



# HHAP-1 Annual Report 9.30.21 - Project Narratives, Racial Equity, and Partnerships

## Jurisdiction Selection

### Introduction

Please complete this project narratives part of the HHAP-1 Annual Report. This completed Cognito form is due by 5 pm on December 31, 2021.

All data should be **cumulative through September 30, 2021**. This period includes data from the grant start date as indicated in the Standard Agreement through September 30, 2021. It also includes any approved reimbursements that took place prior to full execution.

This project narratives report has three sections:

1. **Jurisdiction and Contact Information**
2. **Project Narratives:** Download, fill out, and upload the complete Project Narratives Form
3. **Comments and Certification**

For resources to assist in completing and submitting this report, please see the [Box.com landing page](#) and the [instructions](#). Additionally, this section requires the [Project Narratives Form](#).

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## Jurisdiction Selection

Select your jurisdiction type.

- CoC
- Large City
- County

Select from the list of Continuums of Care

Select from the list of Large Cities

**Select from the list of Counties**

Provide contact information below for an individual who can answer questions about this report.

**Name**

First

Last

**Phone**

**Email**

# Project Narratives

## Project Narratives

Project Narrative updates provide critical data on what each jurisdiction is funding with HHAP-1 dollars. To complete this section, download and fill out the [Project Narratives Form](#). Each project that received HHAP-1 funding will constitute a row. Be sure to fill out each applicable data column for every project.

**Note, HEAP grantees historically and recently completed a Project Narrative Template for their Annual Reports. We recommend local coordination to strategize, and if possible, use that information to help inform answers here for HHAP-1.**

**\*\*\*Note, HCFC [clarified an instruction](#) on the Project Narrative Form subsequent to publication. Ensure that your reponse reflects this update.\*\*\***

### Completed Project Narratives Form

Use the [Project Narratives Form](#), fill it out, and upload the completed file here.

Save the workbook as an Excel (.xlsx) file **using the following naming convention:**

- (Jurisdiction Type)\_(Jurisdiction Name)\_HHAP-1\_Project.xlsx
- o COC EXAMPLE: CoC\_Sacramento\_HHAP-1\_Project.xlsx
- o LARGE CITY EXAMPLE: LargeCity\_Anaheim\_HHAP-1\_Project.xlsx
- o COUNTY EXAMPLE: County\_Riverside\_HHAP-1\_Project.xlsx

## Racial Equity

### Racial Equity

Beginning in 2021, a racial equity accountability framework has been added to the HHAP program under 50222(a)(2)(B). We encourage grantees to provide open and transparent responses as this will be used to determine ongoing technical assistance efforts and peer sharing opportunities.

### Racial Disparity Assessment

*Has there been a racial disparity assessment?*

**Within the last three years, has your jurisdiction conducted a formal or informal assessment of racial or ethnic disparities for the population experiencing homelessness or housing instability within your service area?**

Yes, and it was not funded by HHAP.

**If your jurisdiction has not conducted a formal or informal racial disparity assessment, how has your jurisdiction informed its racial equity strategy?**

### Findings

*What were the findings of the disparity assessment?*

*What is the disparity and where is it occurring?*

**For this formal or informal disparity assessment, in comparison to the general housed population, were people of a particular race or ethnicity more or less likely to experience homelessness?**

There is a Disparity

**For this formal or informal disparity assessment, in comparison to the proportion of persons experiencing homelessness, were people of a particular race or ethnicity more or less likely to receive homeless assistance?**

There is a Disparity

**For this formal or informal disparity assessment, in comparison to the proportion of persons experiencing homelessness, were people of a particular race or ethnicity more or less likely to have a positive housing outcome?**

There is a Disparity

### Strategies

*What has or will the jurisdiction do with the findings?*

**The jurisdiction's decision making bodies**      **Optional: In less than three sentences, provide a**

**are representative of the population experiencing homelessness served in your geographic area, including Black, Indigenous, and people of color (BIPOC).**

Yes  No

**promising example from your jurisdiction.**

Our local CoC is comprised of diverse organizations and thus offers a broad array of knowledge about homelessness. Butte County is using the information made available in Stella, HDIS, and through the LSA to identify gaps in services and make needed adjustments to Coordinated Entry in order to best serve the local population.

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**The jurisdiction has identified steps it will take to help the decisionmaking bodies better reflect the population experiencing homelessness served in your geographic service area.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

A plan is being worked on but is not yet in place.

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**Does your jurisdiction currently have individuals with lived experience providing input that is meaningfully incorporated into planning, analyses, or funding decisions?**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

For the upcoming Point in Time (PIT) count, the input of those with lived experiences of homelessness is actively sought out in order to perform the count as accurately as possible. The PIT count is also used as an opportunity to train volunteers with lived experiences of homelessness as paid surveyors. This lived experience will ensure that a proper count is completed and the disparities in services can be more closely reviewed and appropriate action taken.

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**The jurisdiction has expanded or is expanding outreach in geographic areas with higher concentrations of underrepresented groups.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

Based on the current needs of the community, Housing Navigators have been dispatched on several occasions to different locations to provide services directly where needed. With the end of ESG-CV funds and the needed transition of those in non-congregate shelter to permanent housing, local agencies have been working collaboratively to come up with creative solutions as the amount of individuals experiencing homelessness far outweighs the amount of available real estate. The County has also added Spanish and Hmong speaking Housing Navigators in order to better assist those in the community that do not speak English as their primary language.

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**The jurisdiction has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

The CoC's marketing strategy includes direct outreach, physical informational flyers at service sites and public locations, Butte 2-1-1's mobile application, and announcements during the CoC meetings and other coalition meetings. The County, as the administrative entity, is currently working on making flyers and handouts available in multiple languages.

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**The jurisdiction is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

Various racial equity and implicit bias trainings have been made available and mandatory within the administrative entity. Information obtained from these trainings is made available to collaborating agencies and the related trainings strongly encouraged.

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**The jurisdiction is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.**

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

Yes  No

**The jurisdiction has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

**The jurisdiction 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  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

The CoC has established the LGBTQ+/POC committee to work on identifying disparities in services provided and to come up with solutions to address these disparities as well as to educate the CoC.

**The jurisdiction is evaluating contracting processes and how they may affect racial disparities.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

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**The jurisdiction is reviewing triage, evaluation and scoring tools related to coordinated entry processes to understand their impact on housing placement and outcomes for different racial and ethnic groups.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

Coordinated Entry is currently being reevaluated to better serve the underserved portions of the community and to work toward providing more equitable results.

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**The jurisdiction is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

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**The jurisdiction is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.**

Yes  No

**Optional: In less than three sentences, provide a promising example from your jurisdiction.**

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**Optional: Beyond strategies identified above, describe the steps your jurisdiction has taken or other strategies you have identified to improve racial equity in the provision and outcomes of assistance.**



The County is using information provided by HUD, racial equity and implicit bias trainings, the knowledge of those with lived experience of homelessness, and other jurisdictions' successful plans toward achieving equity in services to move toward removing barriers and inequities in services to people of color. The County is currently in the process of realigning Coordinated Entry to provide equitable access to services to all aspects of the community, specifically reaching out to those that have been historically underserved in the region.

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**Of the strategies identified above where your jurisdiction selected "Yes" or where you provided your own example, which strategy has or will have the GREATEST impact upon the found disparity?**

Making the necessary changes to Coordinated Entry will have the greatest tangible impact on disparity as the County will be able to make an immediate impact on the number of people served to better align with the diversity within those experiencing homelessness.

**For the identified strategy that has or will have the GREATEST impact upon the found disparity, explain how you reached this conclusion.**

Once the needed changes have been implemented within Coordinated Entry, the framework will be established in order to best serve those within underserved communities. With the established framework in place, the focus can shift to reaching underserved communities and bringing services directly to them as needed.

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**In your jurisdiction, has HHAP's funding funded or enabled any of strategies identified above?**

Yes  No

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## Technical Assistance

**Is your jurisdiction interested in Racial Equity Technical Assistance?**

Yes  No

**If yes, what specific type or aspect of TA is needed to support advancing race equity within your jurisdiction?**

The County has reached out to HUD to request Racial Equity TA but would appreciate TA from HCFC as well. The County is looking for an outside opinion to better inform what changes can be made to established processes to best serve underserved portions of the community. As the needs of every community vary so greatly, the assistance of those with the knowledge and resources will always be welcome. Assistance with how to appropriately impact Coordinated Entry and how to reach underserved portions of the community is welcome.

## Partnerships

### Partnerships

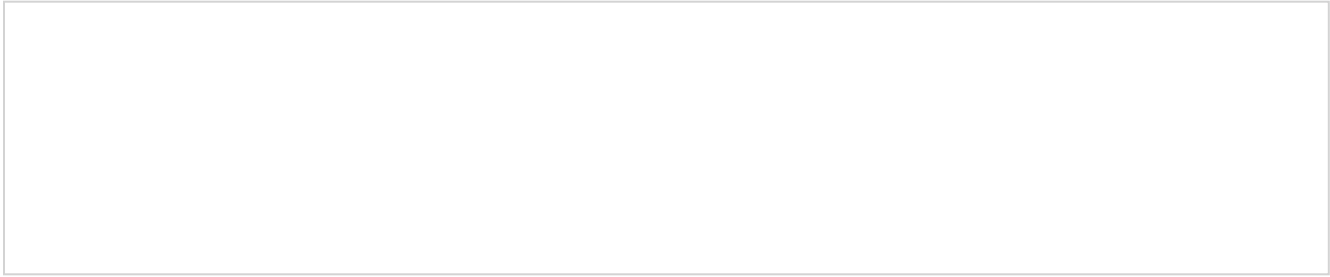
HHAP funding was designed to support regional coordination and partnership between jurisdictions to expand or develop local capacity to address homelessness challenges throughout the state. To help HCFC understand how receiving HHAP funding has impacted collaborative efforts in your community, please answer the following questions. Please be sure to provide open and transparent responses as they will be used to determine ongoing technical assistance efforts and peer sharing opportunities.

**Please share one successful cross-jurisdictional partnership that resulted from your HHAP funding and identify the primary element that made it successful. Here, cross-jurisdictional partnership means formal or informal collaboration across at least two eligible HHAP applicants.**

**Please share the primary impediment to cross-jurisdictional partnership. Here, cross-jurisdictional partnership means formal or informal collaboration across at least two eligible HHAP applicants.**

**Please share one successful cross-sector partnership that resulted from your HHAP funding. Here, a cross-sector partnership can occur across or within geographic areas and does not need to involve a second eligible HHAP applicant.**

**Please identify one specific action that HCFC can undertake to improve local partnerships across and within HHAP funded jurisdictions.**



# Comments and Certification

If needed, provide any additional comments to clarify the data provided

No HHAP funding has been used at this time.

# Certification

*I certify that all information included in this report is true and accurate to the best of my knowledge.*

**Name**

Don

First

Taylor

Last

*This does not have to be an authorized representative or signatory.*

**Title**

Housing & Homeless Administrator



# HHAP-1 Annual Report through 9.30.21 - Fiscal Jurisdiction Selection

## Introduction

Please complete this fiscal part of the HHAP-1 Annual Report. This completed Cognito form is **due by 5 pm on December 31, 2021**.

All data should be **cumulative through September 30, 2021**. This period includes data from the grant start date as indicated in the Standard Agreement through September 30, 2021. It also includes any approved reimbursements that took place prior to full execution.

This fiscal report has five sections:

**1. Jurisdiction and Contact Information**

**2. Total Obligations and Expenditures:** Total, cumulative, HHAP-1 funds obligated and expended through September 30, 2021.

**3. Breakdown of Budgeted, Obligated, and Expended:** Funds budgeted, obligated, and expended by HMIS project type and HHAP eligible use. Additionally, funds budgeted, obligated, and expended for strategic homelessness planning, infrastructure development, and / or administrative costs.

**4. Youth Set-Aside:** Youth set-aside plans and spending by HMIS project type and HHAP eligible use.

**5. Comments and Certification**

For resources to assist in completing and submitting this report, please see the [Box.com landing page](#) and the [instructions](#).

Material Edits to Originally Provided Resources

**In general, funds reported on the quarterly and annual fiscal reports should align with the approved budget on file.**

**Therefore, in scenarios where grantees deviated from their HCFC approved budget and a contractually contemplated exception does NOT apply (i.e., adjust only the FYs), grantees should email [HHAP@bcsh.ca.gov](mailto:HHAP@bcsh.ca.gov) by January 15, 2022 to consult about a potential budget change request.**

**For this HHAP-1 Annual Report, grantees are instructed to report as they are ACTUALLY budgeting and / or spending regardless of whether a budget change request has already been submitted.**

To summarize, grantees reporting as they are actually budgeting and / or spending does not change their approved budget on file and does not guarantee that HCFC will approve the change request.

See [FAQs to Originally Provided Resources](#)

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## Jurisdiction Selection

Please select your jurisdiction type.

- CoC
- Large City
- County

Please select from the list of Continuums of Care

Please select from the list of Large Cities

Please select from the list of Counties

Please provide contact information below for an individual who can answer questions about the details in this report.

**Name**

Erin
First

Murray
Last

**Phone**

(530) 552-6208
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**Email**

emurray@buttecounty.net
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## Cumulative Data

### Cumulative Data

All data for the HHAP-1 Annual Reports are cumulative—with the reporting period beginning at grant start date through September 30, 2021. It also includes any approved reimbursements that took place prior to full execution.

**Did you receive approval to reimburse spending prior to full execution of the HHAP Standard Agreement?**

Yes  No

*Note: If you received approval to reimburse spending prior to full execution of the HHAP Standard Agreement, those reimbursed funds must be captured in your survey responses.*

**If approved for reimbursement, what date marks the beginning of those expended funds?**

## Total Obligations and Expenditures

### Total Obligations and Expenditures

In the following section, report the total **HHAP-1** funds obligated and expended **through September 30, 2021**.

#### Reminders

This data should be **cumulative** (i.e. from the grant start date or date of approved reimbursements through September 30, 2021) and **include the youth set-aside** amounts.

**“Obligated”** means that the Grantee has placed orders, awarded contracts, received services, or entered into similar transactions that require payment using HHAP-1 funding.

**“Expended”** means all HHAP-1 funds obligated under contract or subcontract have been fully paid and receipted, and no invoices remain outstanding.

#### Instructions

Enter "0.00" if you did not obligate or expend any funds in a given category.

#### **Total HHAP Funds Obligated**

\$344,758.55

#### **Total HHAP Funds Expended**

\$0.00

*The amount obligated should include all amounts that were expended.*



# Breakdown of Budgeted, Obligated, and Expended

## Breakdown of Budgeted, Obligated, and Expended

In the following section, report your jurisdiction's HHAP-1 funds budgeted, obligated, and expended **through September 30, 2021**. These amounts will be broken down by HMIS "project type" and HHAP "eligible use".

### Reminders

This data should be **cumulative** (i.e. from the grant start date through September 30, 2021) and **include the youth set-aside** amounts.

Funds "**budgeted**" should align with the approved budget on file with HCFC.

"**Obligated**" means that the Grantee has placed orders, awarded contracts, received services, or entered into similar transactions that require payment using HHAP-1 funding.

"**Expended**" means all HHAP-1 funds obligated under contract or subcontract have been fully paid and received, and no invoices remain outstanding.

### Instructions

In the form below, select all of the HMIS "project types" for which your jurisdiction budgeted, obligated, or expended HHAP funds. If you are unsure about which "project types" your programs were or will be categorized as, please consult with your local HMIS Administrator; they will be able to determine this information in accordance with HUD's most recent HMIS Data Standards.

For each HMIS "project type" that was or will be funded with HHAP dollars, select the respective HHAP "eligible use(s)" funded under the indicated project type by using the dropdown menus below it. Report the amounts budgeted, obligated, and expended for that "project type" and "eligible use." "**Non-HMIS Projects**" is an option under "project type" to ensure that **all** HHAP monies are being reported.

To add additional "eligible uses" that were or will be budgeted or funded under the specified project type, click the "+Add Item" button and select the additional eligible use until all funded eligible uses for a given project type are listed.

Please note that the amounts entered should be the total HHAP funds budgeted, obligated and expended, including any youth set-aside amounts. The amounts budgeted should align with the approved budget on file with HCFC.

Enter "0.00" if you did not obligate or expend any funds in a given category.

**The sum of all categories ON THIS PAGE should equal the amounts previously entered for the total funds obligated and expended.**

**Please select all of the project types for which your jurisdiction obligated or expended HHAP funds**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Emergency Shelter | <input type="checkbox"/> Transitional Housing | <input type="checkbox"/> Street Outreach                  | <input checked="" type="checkbox"/> Services Only |
| <input type="checkbox"/> Safe Haven        | <input type="checkbox"/> Day Shelter          | <input type="checkbox"/> Homelessness Prevention          | <input type="checkbox"/> PH - Housing Only        |
| <input type="checkbox"/> PH - Permanent    | <input type="checkbox"/> PH - Housing with    | <input checked="" type="checkbox"/> PH - Rapid Re-Housing | <input type="checkbox"/> Coordinated Entry        |

Supportive Housing  
(disability required for  
entry)

Services (no disability  
required for entry)

Other

Non-HMIS Projects

## Emergency Shelter Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

## Transitional Housing Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

## Street Outreach Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

## Services Only Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
Outreach and Coordination	\$936,765.23	\$0.00	\$0.00
	Total: \$936,765.23	Total: \$0.00	Total: \$0.00

## Safe Haven Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

## Day Shelter Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Total: \$0.00	Total: \$0.00	Total: \$0.00
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### Homelessness Prevention Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Total: \$0.00	Total: \$0.00	Total: \$0.00
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### PH - Housing Only Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Total: \$0.00	Total: \$0.00	Total: \$0.00
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### PH - Permanent Supportive Housing (disability required for entry) Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Total: \$0.00	Total: \$0.00	Total: \$0.00
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### PH - Housing with Services (no disability required for entry) Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Total: \$0.00	Total: \$0.00	Total: \$0.00
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### PH - Rapid Re-Housing Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Rental assistance and rapid rehousing	\$123,964.22	\$0.00	\$0.00
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**Total:**      **Total: \$0.00**      **Total: \$0.00**  
**\$123,964.22**

## Coordinated Entry Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<b>Total: \$0.00      Total: \$0.00      Total: \$0.00</b>			

## Other Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<b>Total: \$0.00      Total: \$0.00      Total: \$0.00</b>			

## Non-HMIS Projects

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
New Navigation Centers and Emergency Shelters	\$1,177,500.00	\$0.00	\$0.00
Outreach and Coordination	\$290,000.00	\$0.00	\$0.00
<b>Total: \$1,467,500.00      Total: \$0.00      Total: \$0.00</b>			

Report the amounts budgeted, obligated, and expended for strategic homelessness planning, infrastructure development to support CES and HMIS, and/or grant administration.

### Reminder

A grantee may expend no more than 5% of its allocation on strategic homelessness planning and infrastructure development and no more than 7% of its allocation on administrative costs.

### Instructions

Select all of the "eligible uses" that were funded with HHAP-1 dollars, enter the amounts budgeted, obligated, and expended for that each eligible use, and provide a brief description of the activities funded by each eligible use.

Enter "0.00" if you did not budget, obligate, or spend any funds in a given category. If you did not budget or fund any of these eligible uses, you can proceed to the next page.

Please select all of the following non-project eligible uses for which your jurisdiction has budgeted, obligated, or expended HHAP funding

- Strategic homelessness planning
- Infrastructure development to support CES and/or HMIS
- Administrative costs

### Strategic Homelessness Planning

Funded	Total Budgeted	Total Obligated	Total Expended
<b>Total:</b>			<b>\$0.00</b>
<b>Total:</b>			<b>\$0.00</b>
<b>Total:</b>			<b>\$0.00</b>

### Infrastructure development to support CES and/or HMIS

Funded	Total Budgeted	Total Obligated	Total Expended
Infrastructure development to support CES and/or HMIS	\$143,649.40	\$143,649.40	\$0.00
<b>Total:</b>			<b>\$0.00</b>
<b>\$143,649.40</b>			<b>\$143,649.40</b>
<b>Total:</b>			<b>\$0.00</b>

### Administrative Costs

Funded	Total Budgeted	Total Obligated	Total Expended
Administrative costs	\$201,109.15	\$201,109.15	\$0.00
<b>Total:</b>			<b>\$0.00</b>
<b>\$201,109.15</b>			<b>\$201,109.15</b>
<b>Total:</b>			<b>\$0.00</b>

Please describe the activities budgeted, obligated, or funded for strategic homelessness planning

Please describe the activities budgeted, obligated, or funded for infrastructure development to support CES and/or HMIS

Category funds are budgeted for the payment of the HMIS system itself, the salaries of the Information Support Analysts that provide the support for HMIS, and supplies related to HMIS.

**Please describe the activities budgeted, obligated, or funded for administrative costs**

Budgeted administrative costs are planned to be used to support the Health and Human Services Program Analyst, Senior assigned to the tracking of HHAP funds, coordination with subcontractors, and the contract procurement process.

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**Calculated Total Funds  
Budgeted**

\$2,872,988.00

**Calculated Total Funds  
Obligated**

\$344,758.55

**Calculated Total Funds  
Expended**

\$0.00

**Reported Total Funds Obligated**

\$344,758.55

**Reported Total Funds Expended**

\$0.00

## Youth Set-Aside

### Youth Set-Aside

In the following section, report your jurisdiction's HHAP-1 funds budgeted, obligated, and expended **through September 30, 2021**. These amounts will be broken down by HMIS "project type" and HHAP "eligible use". **Note, this section only contains data for youth set-aside funds.**

#### Reminders

The grantee must expend at least 8% of its allocation on programs and services for unaccompanied youth.

This data should be **cumulative** (i.e. from the grant start date through September 30, 2021).

Funds "**budgeted**" should align with the approved budget on file with HCFC.

"**Obligated**" means that the Grantee has placed orders, awarded contracts, received services, or entered into similar transactions that require payment using HHAP-1 funding.

"**Expended**" means all HHAP-1 funds obligated under contract or subcontract have been fully paid and received, and no invoices remain outstanding.

#### Instructions

In the form below, select all of the HMIS "project types" that your jurisdiction budgeted, obligated, or expended HHAP youth set-aside funds. "**Non-HMIS Projects**" is an option under "project type" to ensure that **all** HHAP monies are being reported.

For each HMIS "project type" that was or will be funded with HHAP-1 youth set-aside dollars, select the respective "eligible use(s)" funded under the indicated project type by using the dropdown menus below it. Report the amounts budgeted, obligated, and expended for that "project type" and "eligible use."

To add additional "eligible" uses that were or will be budgeted or funded under the specified project type, click the "+Add Item" button and select the additional eligible use until all funded eligible uses for a given project type are listed.

Enter "0.00" if you did not obligate or expend any funds in a given category.

**Does your jurisdiction know what specific youth projects will be funded with the HHAP youth set-aside?**

Yes  No

**Please describe your HHAP youth set-aside project plans**

**Total Youth Funds Budgeted**

\$233,896.00

**Total Youth Funds Obligated**

\$0.00

**Total Youth Funds Expended**

\$0.00

**Please select all of the project types for which your jurisdiction budgeted or expended HHAP youth set-aside funds**

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> Emergency Shelter   | <input type="checkbox"/> Transitional Housing  | <input type="checkbox"/> Street Outreach                  | <input checked="" type="checkbox"/> Services Only |
| <input type="checkbox"/> Safe Haven  | <input type="checkbox"/> Day Shelter   | <input type="checkbox"/> Homelessness Prevention          | <input type="checkbox"/> PH - Housing Only        |
| <input type="checkbox"/> PH - Permanent Supportive Housing (disability required for entry) | <input type="checkbox"/> PH - Housing with Services (no disability required for entry) | <input checked="" type="checkbox"/> PH - Rapid Re-Housing | <input type="checkbox"/> Coordinated Entry        |
| <input type="checkbox"/> Other   | <input type="checkbox"/> Non-HMIS Projects   |   |   |

**Emergency Shelter Projects, Youth**

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<b>Total: \$0.00</b>		<b>Total: \$0.00</b>	<b>Total: \$0.00</b>

**Transitional Housing Projects, Youth**

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<b>Total: \$0.00</b>		<b>Total: \$0.00</b>	<b>Total: \$0.00</b>

**Street Outreach Projects, Youth**

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<b>Total: \$0.00</b>		<b>Total: \$0.00</b>	<b>Total: \$0.00</b>

**Services Only Projects, Youth**

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
Outreach and Coordination	\$109,931.78	\$0.00	\$0.00
<b>Total: \$109,931.78</b>		<b>Total: \$0.00</b>	<b>Total: \$0.00</b>



### Safe Haven Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

### Day Shelter Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

### Homelessness Prevention Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

### PH - Housing Only Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

### PH - Permanent Supportive Housing (disability required for entry) Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total: \$0.00	Total: \$0.00	Total: \$0.00

### PH - Housing with Services (no disability required for entry) Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

--	--	--	--

Total: \$0.00      Total: \$0.00      Total: \$0.00

### PH - Rapid Re-Housing Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
----------------------	----------------	-----------------	----------------

Rental assistance and rapid rehousing	\$123,964.22	\$0.00	\$0.00
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Total: \$123,964.22      Total: \$0.00      Total: \$0.00

### Coordinated Entry Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Total: \$0.00      Total: \$0.00      Total: \$0.00

### Other Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
----------------------	----------------	-----------------	----------------

--	--	--	--

Total: \$0.00      Total: \$0.00      Total: \$0.00

### Non-HMIS Projects, Youth

Eligible Uses Funded	Total Budgeted	Total Obligated	Total Expended
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Total: \$0.00      Total: \$0.00      Total: \$0.00

<b>Calculated Total Youth Funds Budgeted</b> \$233,896.00	<b>Calculated Total Youth Funds Obligated</b> \$0.00	<b>Calculated Total Youth Funds Expended</b> \$0.00
--	---	--

<b>Reported Total Funds Obligated, Youth</b> \$0.00	<b>Reported Total Funds Expended</b> \$0.00
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## Aggregated Budget by Fiscal Year

### Aggregated Budget by Fiscal Year

All data for the HHAP-1 Annual Report is cumulative—with the reporting period beginning at grant start date through September 30, 2021. It also includes any approved reimbursements that took place prior to full execution.

For the prompts below, in alignment with the approved HCFC budget on record\*, what was your jurisdiction's total, aggregated, budgeted funds that were planned to be expended in each FY? This includes all monies and categories such as eligible uses, administrative funds, or youth set-aside.

**Grantees may calculate this amount by summing the vertical column per their HCFC budget\*. Take care to count the youth set-aside funds only once for each FY.** For example using the budget below, "Budgeted by Fiscal" for FY 21/22 is \$2,461,370.19 (i.e., \$282,541.82 + \$1,500,000.00 + \$678,828.37). Again, take care to count the youth set-aside funds only once for each FY.

**The sum of all budgeted FYs must equal your total allocation.**

The FY starts on July 1st and ends the following June 30th. For example, FY 19-20 starts on July 1, 2019 and ends on June 30, 2020.

Enter "0.00" if you do not have budgeted funds in a specific FY.

**\*In scenarios where grantees deviated from their HCFC approved budget and a contractually contemplated exception does NOT apply (i.e., adjust only the FYs), grantees should email [HHAP@bcsh.ca.gov](mailto:HHAP@bcsh.ca.gov) by January 15, 2022 to consult about a potential budget change request. For this HHAP-1 Annual Report, grantees are instructed to report as they are ACTUALLY budgeting and / or spending regardless of whether a budget change request has already been submitted.** Grantees that have previously submitted data or prepared data in contrast to these instructions do not need to resubmit or amend their data. **Note, HCFC [clarified an instruction](#) for this section subsequent to publication.**



HOMELESS HOUSING, ASSISTANCE AND PREVENTION PROGRAM (HHAP) ANNUAL BUDGET TEMPLATE

APPLICANT INFORMATION

CoC / Large City / County Name:

[Redacted]

Receiving Redirected Funds? Y/N

No  
-

Administrative Entity Name:

Total Redirected Funding

-

HHAP FUNDING EXPENDITURE PLAN\*

Table with columns: ELIGIBLE USE CATEGORY, FY20/21, FY21/22, FY22/23, FY23/24, FY24/25, TOTAL. Rows include Rental Assistance and Rapid Rehousing, Operating Subsidies and Reserves, Landlord Incentives, Outreach and Coordination, Systems Support to Create Regional Partnerships, Delivery of Permanent Housing, Prevention and Shelter Diversion to Permanent Housing, New Navigation Centers and Emergency Shelters, Strategic Homelessness Planning, Infrastructure Development, CES, and HMIS (up to 5%), Administrative (up to 7%), Youth Set-Aside (at least 8%).

\*Narrative should reflect details of HHAP funding plan

COMMENTS:

FINAL

[Redacted]

Aggregated Budget Amount Per the Approved HCFC Budget on Record

FY 19-20?

\$0.00

FY 20-21?

\$0.00

FY 21-22?

\$306,390.88

FY 22-23?

\$1,788,768.56

FY 23-24?

\$611,936.76

FY 24-25?

\$165,891.80



## Comments and Certification

### Please provide any additional comments

As of September 30, 2021, no specific funds had been obligated other than Administrative Costs and Infrastructure Development to Support CES and/or HMIS. However, as of December 14, 2021, projects have since been identified and contracts executed. The budget for each category within this report is reflective of the most recent approved budget revision and the subcontracts executed by the County.

## Certification

*I certify that all information included in this report is true and accurate to the best of my knowledge.*

### Name

Don

First

Taylor

Last

*This does not have to be an authorized representative or signatory.*

### Title

Housing & Homeless Administrator



# HHAP-1 Annual Report through 9.30.21 - Performance Metrics

## Jurisdiction Selection

### Introduction

Please complete this performance metrics part of the HHAP-1 Annual Report. This completed Cognito form is **due by 5 pm on December 31, 2021**.

The performance metrics report has four sections:

- 1. Jurisdiction Selection and Contact Information**
- 2. Performance Metrics:** a brief series of questions to determine if any additional information is required.
- 3. Performance Metrics (Cont.):** provides instructions and upload field for any additional information that is required.
- 4. Comments and Certification**

For resources to assist in completing and submitting this report, please see the [Box.com landing page](#) and the [instructions](#). Additionally, this section may require the [Manual Reporting Form](#).

---

## Jurisdiction Selection

Select your jurisdiction type.

- CoC
- Large City
- County

Select from the list of Continuums of Care

Select from the list of Large Cities

**Select from the list of Counties**

Butte

Provide contact information below for an individual who can answer questions about the details in this report.

**Name**

Erin

First

Murray

Last

**Phone**

(530) 552-6208

**Email**

emurray@buttecounty.net



## Performance Metrics

### Performance Metrics

HHAP-1 grantees are required to report on several performance metrics.

We are relying on data already provided to HDIS to lessen this reporting. Answer the questions below to determine if HCFC needs any additional information to complete your jurisdiction's data profile.

#### **Did the selected jurisdiction serve any people with HHAP-1 funds?**

Yes  No

*"Serve" refers to persons enrolled in projects as defined in HMIS or comparable database (e.g., DV). These are typically service, housing, shelter, outreach, and prevention projects. If, for example, your jurisdiction only funded capital and hygiene projects you might select "no" here. Impacts for these projects are more appropriately captured in the Project Narrative Update. If you have a specific question about your jurisdiction's projects, email [HHAP@bcsh.ca.gov](mailto:HHAP@bcsh.ca.gov)*

#### **Scenario 1: Did the selected jurisdiction capture all applicable HHAP-1 projects in the local HMIS before providing a complete upload to HCFC (on or before November 11, 2021)?**

Yes  No

*"Applicable" refers to projects that can collect client data in HMIS. Some HHAP-1 projects are not well suited for gathering data via HMIS or may be prohibited from being entered in HMIS. These could include: capital projects, landlord engagement, hygiene projects, or Domestic Violence service provider projects. If you have a specific question about your jurisdiction's projects, email [HHAP@bcsh.ca.gov](mailto:HHAP@bcsh.ca.gov)*

#### **Scenario 2: Did the selected jurisdiction confirm their local HMIS administrator provided a complete data upload to HCFC on or before November 11, 2021 of HMIS data through September 30, 2021?**

Yes  No

#### **Scenario 3: Did the selected jurisdiction use HHAP-1 dollars to fund a Domestic Violence service provider?**

Yes  No

#### **Scenario 3 (continued): What kind of project did the Domestic Violence service provider carry out with HHAP-1 dollars? (select all that apply)**

capital, hygiene, or other project that is not connected to client level data

service, shelter, rental assistance, or other project that is connected to client level data

## Performance Metrics (Cont.)

## Performance Metrics (Cont.)

Based on the information provided, we do not need any additional information. Therefore, you **SHALL NOT** submit a Manual Reporting Form. Click on the next button and complete the certification.

## Performance Metrics (Cont.)

Based on the information provided, your jurisdiction must complete and submit a Manual Reporting Form to complete your jurisdiction's performance metrics data profile.

In this form you will report on:

- The individuals and populations served by program funds
- Outcomes for individuals and populations who have exited HHAP-1 funded projects

**Below are links to the detailed instructions and fillable excel sheets for reporting this information:**

[HHAP-1 Instructions](#)

[Manual Reporting Form](#)

## Performance Metrics (Cont.)

Based on the information provided, your jurisdiction must complete and submit a Manual Reporting Form for ONLY Domestic Violence data to complete your jurisdiction's performance metrics data profile.

In this form you will report on:

- The individuals and populations served by program funds
- Outcomes for individuals and populations who have exited HHAP-1 funded projects

**Below are links to the detailed instructions and fillable excel sheets for reporting this information:**

[HHAP-1 Instructions](#)

[Manual Reporting Form](#)

## Performance Metrics (Cont.)

Based on the information provided, your jurisdiction must complete and submit a Manual Reporting Form for both HMIS and DOMESTIC VIOLENCE data to complete your jurisdiction's performance metrics data profile. **THIS DATA SHOULD BE COMBINED AND SUBMITTED THROUGH ONE MANUAL REPORTING FORM.**

In this form you will report on:

- The individuals and populations served by program funds
- Outcomes for individuals and populations who have exited HHAP-1 funded projects

**Below are links to the detailed instructions and fillable excel sheets for reporting this information:**

[HHAP-1 Instructions](#)

[Manual Reporting Form](#)

**ATTENTION!!!!**

First, review the Performance Metrics section in the [instructions](#).

If you believe that the guidance directly above erred and that you need to submit, not submit, or submit different data, please reach out to us immediately at [HHAP@bcsh.ca.gov](mailto:HHAP@bcsh.ca.gov).

Grantees are responsible for determining whether they need to submit a Manual Reporting Form as explained in the instructions.

**Manual Reporting Form**

Download the [Manual Reporting Form](#). Save the workbook as an Excel (.xlsx) file **using the following naming convention:**

- (Jurisdiction Type)\_(Jurisdiction Name)\_HHAP-1\_MRF.xlsx
  - o *COC EXAMPLE: CoC\_Sacramento\_HHAP-1\_MRF.xlsx*
  - o *LARGE CITY EXAMPLE: LargeCity\_Anaheim\_HHAP-1\_MRF.xlsx*
  - o *COUNTY EXAMPLE: County\_Riverside\_HHAP-1\_MRF.xlsx*

*If you are required to submit a Manual Reporting Form for non-DV data and DV data, take care to provide only ONE Manual Reporting Form with all data combined.*

# Comments and Certification

If needed, provide any additional comments to clarify the data provided

## Certification

*I certify that all information included in this report is true and accurate to the best of my knowledge.*

**Name**

First

Last

*This does not have to be an authorized representative or signatory.*

**Title**