Before Starting the CoC Application

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

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

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

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

Your CoC Must Approve the Consolidated Application before You Submit It

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

Answering Multi-Part Narrative Questions

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

Attachments

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

- Attachments must match the questions they are associated with–if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1A-1. CoC Name and Number: CA-519 - Chico, Paradise/Butte County CoC

1A-2. Collaborative Applicant Name: County of Butte

1A-3. CoC Designation: CA

1A-4. HMIS Lead: County of Butte

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
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1B-1.	**Inclusive Structure and Participation–Participation in Coordinated Entry.**	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

	In the chart below for the period from May 1, 2020 to April 30, 2021:
1.	**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 of CoC Board Members	Participated in CoC's Coordinated Entry System
1.	**Affordable Housing Developer(s)**	Yes	Yes	Yes
2.	**Agencies serving survivors of human trafficking**	Yes	Yes	Yes
3.	**CDBG/HOME/ESG Entitlement Jurisdiction**	Yes	Yes	Yes
4.	**CoC-Funded Victim Service Providers**	Yes	Yes	Yes
5.	**CoC-Funded Youth Homeless Organizations**	Yes	Yes	Yes
6.	**Disability Advocates**	Yes	Yes	Yes
7.	**Disability Service Organizations**	Yes	Yes	Yes
8.	**Domestic Violence Advocates**	Yes	Yes	Yes
9.	**EMS/Crisis Response Team(s)**	No	No	No
10.	**Homeless or Formerly Homeless Persons**	Yes	Yes	No
11.	**Hospital(s)**	Yes	No	No
12.	**Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)**	Yes	No	No
13.	**Law Enforcement**	Yes	No	No
14.	**Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates**	Yes	Yes	No
15.	**LGBT Service Organizations**	Yes	Yes	No
16.	**Local Government Staff/Officials**	Yes	Yes	Yes
17.	**Local Jail(s)**	No	No	No
18.	**Mental Health Service Organizations**	Yes	Yes	Yes

19.	**Mental Illness Advocates**	Yes	Yes	Yes
20.	**Non-CoC Funded Youth Homeless Organizations**	Yes	Yes	Yes
21.	**Non-CoC-Funded Victim Service Providers**	Yes	Yes	No
22.	**Organizations led by and serving Black, Brown, Indigenous and other People of Color**	Yes	No	No
23.	**Organizations led by and serving LGBT persons**	Yes	Yes	No
24.	**Organizations led by and serving people with disabilities**	Yes	Yes	No
25.	**Other homeless subpopulation advocates**	Yes	Yes	Yes
26.	**Public Housing Authorities**	Yes	Yes	Yes
27.	**School Administrators/Homeless Liaisons**	Yes	Yes	No
28.	**Street Outreach Team(s)**	Yes	Yes	Yes
29.	**Substance Abuse Advocates**	Yes	Yes	No
30.	**Substance Abuse Service Organizations**	Yes	Yes	No
31.	**Youth Advocates**	Yes	Yes	Yes
32.	**Youth Service Providers**	Yes	Yes	Yes
	Other:(limit 50 characters)			
33.	Resource & Referral Agency-211	Yes	No	Yes
34.				

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

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

(limit 2,000 characters)

1. The CoC invites new members to join through a variety of strategies: open invitation, solicitation at various agency meeting within the community, annual membership drive and through phone contacts at the Lead Agency. Annually, the CoC's membership drive invites community members to join the CoC. During the drive, mass emails are shared with the community through the CoC list serv, as well as through social media. Specific invitations are sent to targeted organizations or persons identified as significant partners to CoC endeavors.
2. Invitations for membership are communicated verbally to persons at public meetings, through social media, on public websites and via word of mouth.
3. Hundreds of community partners are included in a mass email distribution from the CoC for the annual membership invitation; this invitation is a request for additional membership. The Local Disability Action Center is one of the partners that are specifically invited and are asked to share the membership invitation with their program participants. Membership forms are available in hard copy or electronically and can also be submitted verbally.
4. CoC service providers and partners are regularly asked to recommend

persons to the CoC Council who have lived experiences; providers have an understanding of the capacity of their consumers and can provide additional details to consumers on why their participation in the CoC is important. The CoC maintains a homeless/previously homeless member on the council to advocate for the target population.

With respect to addressing equity, the CoC has requested technical assistance to understand how we can improve our outreach to culturally specific communities when there may not be organizations in our community that provide homeless services targeted to a specific community.

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

	Describe in the field below how your CoC:
1.	**solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;**
2.	**communicated information during public meetings or other forums your CoC uses to solicit public information; and**
3.	**took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.**

(limit 2,000 characters)

1. The CoC coordinates several regional planning and engagement groups to gather input and information from various stakeholders across the Continuum. CoC leads have made presentations at city council meetings, at board of supervisor's meetings and at multiple community forums to promote homeless services, homeless funding, advocacy efforts, and to gather information about the target population and their needs. The CoC has solicited the opinions and buy-in from media outlets to promote homeless services and to engage the general public in the activities of the CoC and how persons may provide input. The CoC Coordinator regularly networks with other jurisdictions and organizations that are vested in preventing homelessness, bringing new ideas and opportunities to the CoC.
2. The CoC Coordinator regularly represents the Continuum at city and county public meetings, local coalitions and ad hoc committees. The CoC Director and Council President also present CoC information and ask for public input at different venues, ensuring that the general public has a vested interest in providing potential solutions to the homeless crisis. At each public meeting, information on CoC initiatives and directives is shared and the public is provided an opportunity to provide input.
3. The CoC Council is a large and diverse representation of the Continuum and each member brings forth concepts, solutions and ideas to the planning and decision making process that represent a varying degree of experience and diversity in homeless matters; council members gather this information through community engagement efforts and daily interactions with the public and other partners.
CoC leads take opportunities to transfer knowledge from community engagement efforts throughout the jurisdiction to the CoC Council meeting where advocacy and policy work take shape. At the Council meetings, any individual is able to present, ask questions or advocate for specific policies,

approaches or activities that may alleviate the impacts of homelessness.

1B-4.	**Public Notification for Proposals from Organizations Not Previously Funded.**	
	NOFO Section VII.B.1.a.(4)	

	Describe in the field below how your CoC notified the public:
1.	**that your CoC's local competition was open and accepting project applications;**
2.	**that your CoC will consider project applications from organizations that have not previously received CoC Program funding;**
3.	**about how project applicants must submit their project applications;**
4.	**about how your CoC would determine which project applications it would submit to HUD for funding; and**
5.	**how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.**

(limit 2,000 characters)

1. The local CoC competition announcement was posted on the CoC website; the Memo was also sent out to CoC partners via an email blast which reached hundreds of service providers, advocates and community members.
2. The CoC competition announcement provided information about the source of funding, the process to submit a new or renewal application, minimum threshold criteria for eligibility, types of projects, program requirements, submission procedures and deadlines for submission. Several CoC Zoom meetings were held to ensure that potential new applicants understood the application requirements and process to apply. For those unable to attend the Zoom, applicants could access the recorded Zoom sessions on the CoC website and follow up with any questions about the competition and project applications.
3. The CoC competition announcement provided applicants details on the application process, how to submit and the deadline for doing so. The announcement was information on eligibility thresholds, project quality thresholds, funding priorities and performance measures.
4. The CoC released a staff report to the CoC partners and the Council on the Review and Ranking process for the 2021 CoC NOFO. The staff report included review, scoring and ranking procedures, the process for reallocation, the review and ranking timeline, the project priority ranking spreadsheet and the explanation on tiered ranking. The CoC Council selected a review committee, that did not have a conflict of interest, to review and rank the new and renewal projects as per the Review and Ranking process.
5. The CoC competition announcement, and the email blasts from the CoC to its partners, discussed the availability of reasonable accommodations to assist individuals/organizations in completing the application documentation. All application documentation was available in hard copy, as well as in electronic format for ease of use.

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

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

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

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	**Funding Collaboratives**	No
2.	**Head Start Program**	Yes
3.	**Housing and services programs funded through Local Government**	Yes
4.	**Housing and services programs funded through other Federal Resources (non-CoC)**	Yes
5.	**Housing and services programs funded through private entities, including Foundations**	Yes
6.	**Housing and services programs funded through State Government**	Yes
7.	**Housing and services programs funded through U.S. Department of Health and Human Services (HHS)**	Yes
8.	**Housing and services programs funded through U.S. Department of Justice (DOJ)**	Yes
9.	**Housing Opportunities for Persons with AIDS (HOPWA)**	Yes
10.	**Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)**	No
11.	**Organizations led by and serving Black, Brown, Indigenous and other People of Color**	Yes
12.	**Organizations led by and serving LGBT persons**	Yes
13.	**Organizations led by and serving people with disabilities**	Yes
14.	**Private Foundations**	Yes
15.	**Public Housing Authorities**	Yes
16.	**Runaway and Homeless Youth (RHY)**	Yes
17.	**Temporary Assistance for Needy Families (TANF)**	Yes
	Other:(limit 50 characters)	

18.		

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

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

(limit 2,000 characters)

The CoC met with ESG program recipients, and CoC partners, to collaborate on the allocation of ESG/ESG-CV funds that would best meet the needs of our local population. Although the CoC's strategic plan was used as a guideline, the plan had not been updated to accommodate the realities of COVID response, nor does the plan address the lack of capacity and depth of low-barrier shelter providers to expand services to meet the demands of COVID, quarantining and non-congregate sheltering.
2. Annually, ESG recipients are required to complete and present an annual report to the CoC Council; this report includes outcomes data, demographic, service and housing data and presents program and system specific challenges and successes.
3. Point in Time count and Housing Inventory count data are provided annually to entitlement jurisdictions throughout the county for inclusion in Consolidated Plan updates.
4. CoC provided information about funding availability, the challenges associated with placing program participants in affordable housing and fair housing challenges to the entitlement jurisdictions throughout the county to ensure that they have Continuum information that will help to identify housing and community development priorities and specific goals for federal funding.

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

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

1.	**Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.**	Yes
2.	**Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.**	No
3.	**Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.**	Yes
4.	**Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.**	Yes

5.	**Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.**	Yes
6.	**Other. (limit 150 characters)**	

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

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

(limit 2,000 characters)

1. The Butte County Office of Education and Youth for Change are members of the CoC Council and serve as the county's liaisons to homeless and educational services for area youth. These education providers lead and participate in two of the CoC's ad hoc committees for youth-Households with Children and Youth Homelessness, as well as in the BCOE School Ties and Prevention Services Program. Youth education providers across the jurisdiction also participate in the Point in Time count.
2. The CoC partners and collaborates with education providers by including them in planning and coordination meetings that focus and prioritize youth education, housing and supportive services.
3.LEA/SEA reps attend regular CoC and youth ad hoc committee meetings geared at providing supportive services to students who are at-risk or homeless.
4-6. The McKinney Vento liaison through the LEA is a CoC Council member and participates in the CoC youth ad hoc committees and point in time count, along with other school district staff representing youth. The LEA/SEA participates in referrals to the CoC's coordinated entry process and collaborates with other service providers on case management, supportive services and team decision making for students/families that may be homeless or at risk of homelessness. The CoC also coordinates with the LEAs and Headstart programs to obtain homeless data necessary for CoC endeavors.

1C-4a.	**CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility.**	
	NOFO Section VII.B.1.d.	

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

(limit 2,000 characters)

The CoC has implemented a policy ensuring the "Requirement to Inform Program Participants of the Eligibility for Educational Services and Ensure Their Access to Those Services Under the HEARTH Act. The four assurances that

CoC project applicants are required to demonstrate include (1) it is collaborating with LEAs to assist in the identification of homeless families, as well as informing them of their eligibility for McKinney-Vento educational services; and (2) it is considering the educational needs of children when families are placed in emergency or transitional shelter and is, to the maximum extent practicable, placing families with children as close to their school origin so as not to disrupt the children's education; and (3) their programs are establishing policies and practices that are consistent with, and do not restrict the exercise of rights provided by the education subtitle of the McKinney-Vento Act, and other laws relating to the provision o educational and related services to individuals and families experiencing homelessness; and (4) that programs that provide housing or services to families are designating a staff person to ensure that children are enrolled in school and connected to the appropriate services within the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act and McKinney Vento education services.

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

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

		MOU/MOA	Other Formal Agreement
1.	**Birth to 3 years**	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–Annual Training–Best Practices.**	
	NOFO Section VII.B.1.e.	

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

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

(limit 2,000 characters)

Catalyst Domestic Violence Services, is the County's lead provider of DV/SA and survivor services, and maintains a seat on the CoC Council. Catalyst's Prevention & Outreach Program Manager conducts semi-annual "Love Shouldn't Hurt" training-a guide for social service providers. This training establishes best practices around confidentiality, assessment, safety, risk and the provision of client-centered, trauma-informed care. This level of training is provided to the CES/Intake and Assessment staff, service providers, mandated reporters, LEAs, health care providers, and advocacy groups who serve or provide services to DV/SA/HT survivors. Outcomes of the training includes helping DV programs expand their ability to help domestic violence programs build upon their advocacy practices to provide safe and high quality services to survivors.

1C-5a.	**Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Using De-identified Aggregate Data.**	
	NOFO Section VII.B.1.e.	

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

(limit 2,000 characters)

The County's DV/SA/HT service provider collects and manages demographic and service need data through Osnium, a data base comparable to HMIS, for all persons served through their organization. Catalyst assesses the needs of survivors to determine what services are desired by the survivor and to implement a safety plan that will ensure safety throughout service provision. Aggregate data, de-identified, is provided to the CoC upon request or when available for specific conversations/meetings. De-identified data is used by the CoC to assess the scope of community need and assess system trends and gaps, determine system planning, priorities and funding for survivor programs, including housing.

1C-5b.	**Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Coordinated Assessment–Safety, Planning, and Confidentiality Protocols.**	
	NOFO Section VII.B.1.e.	

	Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:
1.	**prioritize safety;**
2.	**use emergency transfer plan; and**
3.	**ensure confidentiality.**

(limit 2,000 characters)

1. Catalyst DV Services is the provider of emergency services and housing for survivors. Through the CES intake/assessment process, survivors are referred

to the most appropriate shelter that will meet their unique needs. Each shelter site prioritizes safety, confidentiality and a victim-centered service delivery model to identify appropriate housing and supports. To ensure the protection and safety of survivors, all DV service providers use a data tracking system that is separate, but comparable, to HMIS. Survivors are provided information about services available through other public service organizations that provide trauma-informed victim's services such as Health and Human Services, the Food Bank, Behavioral Health, CoC and DOJ.
2. Emergency transfer plans align with VAWA requirements and may be provided directly to program staff via the CES staff. Catalyst staff and CoC partners work with the survivor to meet their requests for both internal and external transfers, depending on availability.
3. The CoC's CES policies and procedure provide additional safeguards for survivors applicable to all CoC providers. Catalyst, the CoC and the CES administrator provide input on safety, confidentiality and system change improvements that serve as best practices for serving survivors.

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

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

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

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

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

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

1C-7a.	**Written Policies on Homeless Admission Preferences with PHAs.**	

	NOFO Section VII.B.1.g.

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

(limit 2,000 characters)

1. Butte County's only PHA has taken a leadership role on the CoC Council. The Housing Authority adopted a limited homeless set aside preference some time ago and has 75 vouchers available for persons that qualify for a homeless preference. Persons must receive case management services from a CoC participating agency. Homeless status is verified by the provider providing case management services. When the PHA has 75 households that reach the preference, a waiting list is established for those who meet the preference criteria. When one of the 75 families exits the program, then the next family on the waiting list will be served.

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

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

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

1C-7c.	**Including PHA-Funded Units in Your CoC's Coordinated Entry System.**	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC's coordinated entry process?	No

1C-7c.1.	**Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System.**	
	NOFO Section VII.B.1.g.	

	If you selected yes in question 1C-7c., describe in the field below:
1.	**how your CoC includes the units in its Coordinated Entry process; and**
2.	**whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.**

(limit 2,000 characters)

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

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

1C-7d.1.	**CoC and PHA Joint Application–Experience–Benefits.**	
	NOFO Section VII.B.1.g.	

	If you selected yes to question 1C-7d, describe in the field below:
1.	**the type of joint project applied for;**
2.	**whether the application was approved; and**
3.	**how your CoC and families experiencing homelessness benefited from the coordination.**

(limit 2,000 characters)

1. CoC member agencies and the PHA have applied for several joint projects. The PHA, the City of Chico, The Community Housing Improvement Program (CHIP) and the Butte County Department of Behavioral Health applied for a 100-unit, affordable housing project. The project is to serve low-income seniors, has dedicated units for BH clients and will utilize project based vouchers.
2. The application was approved and construction has started; it is anticipated to complete around December 2022.
3. By coordinating efforts across multiple public ad private entities, funds were leveraged, partnerships were formed and projects of significant magnitude are being implemented as a result. This effort improves the opportunities for families and persons experiencing homeless to have access to affordable housing that they are able to sustain.

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

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

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

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

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

PHA
Housing Authority...

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

Name of PHA: Housing Authority of the County of Butte

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

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

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

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

1C-9.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

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

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

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

(limit 2,000 characters)

The CoC has developed a crisis response system that works most efficiently when the service providers embrace a Housing First approach. The CoC adopted Housing First for this system and annually assesses the extent to which our local programs are meeting the core elements of Housing First.

To gauge our efficiency level, the CoC utilizes HUD's Housing First Checklist to assess projects, and the overall system, for housing first practices in permanent housing. Access to programs must not be contingent upon having income, sobriety, lack of a criminal record, or other unnecessary conditions. Programs must do everything possible not to reject persons because of a lack of housing readiness. Service and treatment plans are client-driven and voluntary and persons with disabilities are offered the opportunity to request reasonable accommodations. Services are informed by a trauma informed harm-reduction model while allowing participants the flexibility in paying rent on time.

1C-9b.	**Housing First–Veterans.**	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	No

1C-10.	**Street Outreach–Scope.**	
	NOFO Section VII.B.1.j.	

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

(limit 2,000 characters)

1. Street Outreach is conducted by the Butte County Department of Behavioral Health, Crisis Care Advocacy, Triage and by Point of Contact. Methods and implementation of outreach are varied to meet the needs of the target population. Outreach is responsible for: (A) identification, engagement and stabilization of unsheltered persons using harm reduction, trauma informed care, motivational interviewing, relational engagement, housing first, non-violent crisis intervention and basic first aid; and (B)facilitate the delivery of health and basic services needs, clinical support and CES assessments; and (C) locate, evaluate, engage, interact, counsel, and transport unsheltered persons to provider sites for additional services such as food, showers, benefit enrollment, meals, laundry, etc.; and (D) connect to shelter, mental health, physical health and AOD services through the HMIS/CES system.
2. Street Outreach covers approximately 80% of the CoC's geographic area, excluding those remote and sparsely populated regions.
3. Outreach is conducted 5 days a week by public agencies and 7 days a week by private entities.
4. Teams work in known encampments across the CoC, tracking geographic locations to identify patterns and target service needs. Subpopulation outreach focuses on benefits access, probation, transit and connecting persons back to family/friends that can help care for them. For those persons who are least likely to request assistance teams supplemented by mobile health outreach teams provide on demand healthcare and warm handoffs to providers who are able to

provide additional resources, transportation and consultation.

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

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

1.	Engaged/educated local policymakers	Yes
2.	Engaged/educated law enforcement	Yes
3.	Engaged/educated local business leaders	Yes
4.	Implemented communitywide plans	No
5.	Other:(limit 500 characters)	

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

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of "Current."	21	201

1C-13.	Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.	
	NOFO Section VII.B.1.m.	

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

	Type of Health Care	Assist with Enrollment?	Assist with Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
2.	Private Insurers	No	Yes
3.	Nonprofit, Philanthropic	No	Yes
4.	Other (limit 150 characters)		

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

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

(limit 2,000 characters)

1. The CoC does not maintain a system for updating program staff regarding mainstream resources available for program participants. There are many mainstream resource providers who regularly attend the CoC meetings and often share information about new programs or resources available. CoC partners are encouraged to present new or updated information during CoC meetings, CES meetings and Ad Hoc meetings.
2. The CoC disseminates information regarding mainstream resources to its CoC partners through list serv emails; presentations at CoC associated meetings and via presentations held in public venues.
3. The CoC facilitated a process for developing health-related strategies to end homelessness. The process involved local hospitals, health clinics and CoC partners. The collaborative discussions identified areas of need which resulted in problem solving. The local Healthcare Collaborative meets every other month and regularly focuses its meeting on strategies that may assist the un-housed with on-going healthcare needs, accessing healthcare services and identifying the gaps in the healthcare response system.
4. The CoC does not provide assistance regarding the effective use Medicaid or other public benefits. Eligibility workers associated with mainstream and help consumers effectively utilize Medicaid.

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

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

(limit 2,000 characters)

1. The CES covers 100% of the CoC's geographic area
2. Through outreach efforts or via a phone call to 211, the CES system is available to persons who may find it challenging to apply for homeless assistance. The CES allows anyone in need of housing assistance to easily access the system and be assessed in a standard, consistent and fair manner
3. The VI-SPDAT is the triage tool utilized to assess needs and highlight areas of higher acuity, helping to inform providers of the type of support and housing interventions that may be most beneficial to improving health and housing outcomes. This tool helps prioritize which participants should receive assistance first based on their level of need and vulnerability.

4. The CES operates 24 hours a day, 7 days a week and is administered by 211 or via outreach staff who have remote access to the HMIS/CES system.

1C-15.	**Promoting Racial Equity in Homelessness–Assessing Racial Disparities.**	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes

1C-15a.	**Racial Disparities Assessment Results.**	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

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

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

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

1.	**The CoC's board and decisionmaking bodies are representative of the population served in the CoC.**	Yes
2.	**The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.**	Yes
3.	**The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.**	Yes
4.	**The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.**	Yes
5.	**The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.**	Yes
6.	**The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.**	Yes
7.	**The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.**	Yes

8.	**The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.**	Yes
9.	**The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.**	Yes
10.	**The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.**	Yes
11.	**The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.**	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,000 characters)

Within the last year, racial equity has been a focus of state and federal programs, but no direction has been provided. At this time, the CoC understands that we may need to adjust our policies, procedures and practices and have requested HUD Technical Assistance on this topic. The CoC encouraged its ESG-CV service providers and partners to attend the ICF training entitled Racial Equity Foundation.

1C-16.	**Persons with Lived Experience–Active CoC Participation.**	
	NOFO Section VII.B.1.p.	

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	**Included and provide input that is incorporated in the local planning process.**	2	1
2.	**Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.**	2	0
3.	**Participate on CoC committees, subcommittees, or workgroups.**	8	1
4.	**Included in the decisionmaking processes related to addressing homelessness.**	1	1
5.	**Included in the development or revision of your CoC's local competition rating factors.**	0	0

1C-17.	**Promoting Volunteerism and Community Service.**	

NOFO Section VII.B.1.r.

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

1.	**The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.**	No
2.	**The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).**	No
3.	**The CoC works with organizations to create volunteer opportunities for program participants.**	No
4.	**The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).**	No
5.	**Provider organizations within the CoC have incentives for employment and/or volunteerism.**	No
6.	**Other:(limit 500 characters)**	

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	**Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.**	
	NOFO Section VII.B.1.q.	

	Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:
1.	**unsheltered situations;**
2.	**congregate emergency shelters; and**
3.	**transitional housing.**

(limit 2,000 characters)

1.The CoC provided COVID-19 pandemic information to providers and unsheltered persons which included CDC resources and guidance. Pandemic information was regularly posted to the CoC website via a detected page to keep participants informed. All pandemic webinars, trainings and one-on-one meetings with Public Health were shared with CoC partners and participants. Several outreach teams sought out unsheltered and vulnerable persons and got them into a motel room through the Project Room Key Collaborative under the Non-Congregate Shelter Model to reduce the impact of COVID-19 on the unsheltered population. Although PRK has since terminated, a similar intervention has been implemented by a non-profit provider to ensure non-congregate shelter for vulnerable populations.
2. The CoC, in partnership with Public Health and the local hospital, implemented on site testing for persons who wanted to gain access to congregate emergency shelter so as not to increase the number of unsheltered person residing in non-monitored encampments. The CoC and its partners followed HUD's guidance for homeless shelters when it was consistent with our local public health guidance.
3. The CoC, in concert with Public Health, ensured that directives and guidance from the state and federal government was shared with all service providers and participants who were participating in transitional housing programs.

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

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

(limit 2,000 characters)

The CoC was quick to respond to the COVID-19 pandemic and was innovative in bringing a variety of partners to the table to address the emergent needs of the community, as well as an abundance of revenue to deal with the crisis. These partnerships have improved the internal infrastructure and readiness of the CoC to respond in times of need. The CoC also partnered with the Butte-Glenn VOAD (voluntary organizations active in disaster); a response and recovery group that is activated during disasters alongside The American Red Cross, the Salvation Army and the Office of Emergency Services. This has strengthened the CoC's readiness for future public health emergencies.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	

	Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:
1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

The CoC held a series of 6 community forums to (1) identify the needs of the homeless population; (2) prevent future outbreaks; (3) establish sanitary protocols; (4) provide non-congregate shelter; and (5) alleviate the impacts of the virus on service provision and the target population.
1. The CoC coordinated intake/assessment and CES entry through 211 which ensured that there was no face to face contact and safety was adhered to
2. The CoC partnered with the United Way to implement a non-congregate shelter program (Butte United Shelter Program) similar to PRK so that vulnerable persons were not sent back to the streets or to congregate shelter when PRK funding terminated. The CoC also collaborated with Catalyst for non-congregate shelter and with the Torres Shelter for monitored day services so that the target population could maintain social distancing requirements while implementing infection control measures including quarantine. Partnering with Safe Space to provide socially distanced congregate shelter for medically fragile people who were unable to participate in PRK. ESG-CV funds also provided revenue for the PRK program for individuals that did not meet the eligibility criteria for PRK reimbursement.
3.The CoC did not utilize ESG-CV funds for eviction prevention
4. Ampla Health provided vaccinations, testing and medical care through the mobile medical unit
5. The CoC collaborated with two additional service providers who offered hygiene and sanitation services, as well as laundry and shower trailers

1D-4.	CoC Coordination with Mainstream Health.	

	NOFO Section VII.B.1.q.

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

(limit 2,000 characters)

1. Beginning in March 2020, the CoC, and all of its funded providers, partnered with the Public Health Department and the hospital on shelter capacity limitations, mask guidance, physical distancing testing and sanitation measures. The The CoC coordinated efforts to ensure that CoC partner programs had access to hand sanitizer, masks and other prevention materials that were available through public resources. The CoC also ensured that CoC partners had up to date information on the pandemic, best practices on response measures, and current lists of available resources from healthcare providers and public agencies to stop the spread.
2. The CoC relayed and shared information from the Public Health/CDC on safety protocols for CoC partners and service providers to implement. The CoC was not monitoring the implementation of measures but communicated the importance to stop the spread for the community.

1D-5.	**Communicating Information to Homeless Service Providers.**	
	NOFO Section VII.B.1.q.	

	Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:
1.	**safety measures;**
2.	**changing local restrictions; and**
3.	**vaccine implementation.**

(limit 2,000 characters)

1. The CoC implemented a COVID-19 page on the CoC website geared towards COVID information, updates and resources. On the resources tab, there was information from public health regarding hand washing stations and bathrooms for unsheltered persons; resources for persons exiting isolation or quarantine; guidance for homeless assistance providers on the virus and how best to stop the spread; shelter provider toolkits and key resource for providers.
2. COVID restrictions on a local level were available almost daily from public health and shared through the CoC website and list serv which included service providers and advocates.
3. Vaccine information was shared with the CoC on a regular basis by the hospital, local clinics and health care providers. Symptoms,testing, vaccination clinics, vaccines available and priority for vaccinations was shared via the website, list serv and through CoC meetings and emails. Links to all COVID information, resources, and updates were provided regularly to the homeless service providers through mass email distribution.

1D-6.	**Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.**	

NOFO Section VII.B.1.q.

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

(limit 2,000 characters)

The CoC followed the instructions of the Public Health Department and their multi-phased approach which was directed by the California State Department of Public Health. Each phase had its own set of challenges, but the CoC was innovative in how it worked with public agencies to vaccination individuals and families when permission was given by the state. The first phase of vaccinations for the general public was for persons 65 or older in homeless shelters and jails. The mobile medical unit through Ampla was also vaccinating given the same state guidance. Throughout the COVID pandemic, the CoC has taken direction and guidance from Public Health and has shared that direction with its providers, advocates and target population.

1D-7.	Addressing Possible Increases in Domestic Violence.	
	NOFO Section VII.B.1.e.	

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

(limit 2,000 characters)

The CoC worked with the County's domestic violence service provider who was prepared to handle an influx of counseling appointments, hotline calls and housing/shelter needs. Ultimately, the lack of housing and shelter become the most challenging obstacle with respect to an increase in DV assistance calls.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

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

(limit 2,000 characters)

The CoC amended the CES policies and procedures to include amendment #1 which addressed the identification of persons experiencing homelessness and impacted by the pandemic, and how they were to be prioritized for rapid rehousing placement through Coordinated Entry. The amendment addressed specific health related vulnerabilities, age, health conditions and a person's housing situation and prioritized persons for non-congregate shelter through the PRK on a temporary basis. A separate Byname list was established for those persons being served by PRK or waiting for a room through PRK.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

1.	**Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.**	09/16/2021
2.	**Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.**	09/16/2021

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

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

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

1E-2a.	**Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.**	

	NOFO Section VII.B.2.d.

	Describe in the field below how your CoC reviewed, scored, and selected projects based on:
1.	**the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and**
2.	**considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.**

(limit 2,000 characters)

1. The CoC's project review and ranking process prioritized projects serving persons with the most severe needs and vulnerabilities, including: low/no income, chronic homelessness at program entry, have more than one disability type, entering the project from a place not meant for habitation, fleeing violence at program entry.
2.When reviewing and ranking applications, factors noted above and Housing First programs were ranked above applications without those factors; points in the areas of vulnerability, Housing First approach, consistency with local priorities were given higher consideration followed by applications ranked solely on points. All project applications in 2021 reflected housing and services for those with these severe needs and vulnerabilities.

1E-3.	**Promoting Racial Equity in the Local Review and Ranking Process.**	
	NOFO Section VII.B.2.e.	

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

(limit 2,000 characters)

1. The CoC consultant makes recommendations for Project Priority Listing to the CoC Council and all councilmembers are able to able to provide input on rating factors, review, selection and ranking process. Rating and ranking factors are determined in advance of the CoC NOFO release and are based on HUD priorities and are projects that have a track history of being successful in supporting and housing those who are homeless.
2. Butte County is not a highly diverse community when it comes to distribution of race and ethnicity; however the CoC actively recruits CoC Council members that are representative of the population to participate in the CoC and in the rating and ranking of CoC projects.
3. The CoC has not drafted rating and ranking procedures that address the promotion of racial equity across applications, services and homeless demographics.

1E-4.	**Reallocation–Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.**	
	NOFO Section VII.B.2.f.	

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

(limit 2,000 characters)

1. The CoC maintains a written process for re-allocation which is reviewed/updated annually. The reallocation process entails vetting all applications against the same standards and priorities set forth by HUD for the current year. A renewal project may be reallocated if it failed to meet threshold standards based on eligibility, capacity, timeline and performance standards OR a renewal project is outranked by a new project through the competitive process. CoC identified renewal projects that are identified as low-performing through project performance outcomes, may not be reallocated solely based on performance, but also on the needs of the population being served and the availability of comparable services, as well as on the opportunity for TA to improve outcomes and performance.
2. The CoC did not identify any renewal projects that would require reallocation during the 2021 CoC competition; however, the CoC did identify a technical assistance issue that has been unable to be resolved by HUD for one of the projects resulting in a lack of ability to draw down funds although the entity has been implemented the grant program since contract award.
3. No reallocation in 2021 as projects were high performing or of great need based on the scoring took which emphasized objective performance data.
4. Not applicable
5. The CoC communicated the reallocation process via a Staff Report provided to the full CoC at a regularly schedule CoC meeting and through multiple special meetings where the CoC application process, reallocation and rating and ranking were specifically discussed. This information was also posted on the CoC website and shared through the CoC list serv.

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	No

1E-5.	Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
	NOFO Section VII.B.2.g.	

1.	**Did your CoC reject or reduce any project application(s)?**	No
2.	**If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.**	

1E-5a.	**Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.2.g.	

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.	10/13/2021

1E-6.	**Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website–which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	11/08/2021

2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

Enter the name of the HMIS Vendor your CoC is currently using.	Bitfocus by Clarity

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

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

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

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/12/2021

2A-4.	**HMIS Implementation–Comparable Database for DV.**	
	NOFO Section VII.B.3.b.	

	Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:
1.	**have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and**
2.	**submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead.**

(limit 2,000 characters)

1. Catalyst Domestic Violence Services is the County's DV housing and service provider. They utilize an HMIS comparable system called Osnium. The CoC has reviewed this software systems data collection and reporting requirements and have found Osnium to collect the same data elements as is required for VOCA, VAWA and HUD programs, as well as the same HMIS data elements.
2. De-identified aggregate system performance standards and data are provided to the CoC upon request; this information is shared during relevant discussions that occur during CoC meetings and during rating and ranking procedures.

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

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

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	493	32	461	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	280	11	269	100.00%
4. Rapid Re-Housing (RRH) beds	201	14	187	100.00%
5. Permanent Supportive Housing	384	0	384	100.00%
6. Other Permanent Housing (OPH)	112	0	112	100.00%

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

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

(limit 2,000 characters)

2A-5b.	**Bed Coverage Rate in Comparable Databases.**	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC's geographic area.	100.00%

2A-5b.1.	**Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.**	
	NOFO Section VII.B.3.c.	

If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:

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

(limit 2,000 characters)

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

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

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
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- 24 CFR part 578

2B-1.	**Sheltered and Unsheltered PIT Count–Commitment for Calendar Year 2022**	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes

2B-2.	**Unsheltered Youth PIT Count–Commitment for Calendar Year 2022.**	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes

2C. System Performance

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

2C-1.	**Reduction in the Number of First Time Homeless–Risk Factors.**	
	NOFO Section VII.B.5.b.	

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

(limit 2,000 characters)

1. The CoC has undertaken a significant process of analyzing homelessness across the county and has developed strategies to end homelessness and has established priorities for project funding. Through this process, and through the operation of PRK, the community has identified a variety or risk factors that regularly contribute to first time homelessness.
2. The CoC's strategy to address households at risk of first time homelessness is through homelessness prevention, diversion and eviction prevention programming; funds assist in keeping those at risk stably housed or to quickly access housing. The CoC, through its public partners, invests in outreach efforts to ensure that those that are precariously housed have access to resources that can help them avoid homelessness.
3. The CoC Council is the entity responsible for overseeing the CoC's strategy.

2C-2.	**Length of Time Homeless–Strategy to Reduce.**	
	NOFO Section VII.B.5.c.	

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

(limit 2,000 characters)

1. As a result of the 2018 Camp Fire, the 2020 North Complex Fire and the 2021 Dixie Fire, Butte County's rental vacancy rate is virtually zero. Strategies to reduce the length of time homeless or the length of time in short-term housing, become extended and quite limited. The CoC has consistently prioritize RRH projects and supports the construction of affordable housing across the continuum but the CoC is realistically looking at placing program participants in housing options that fall outside of the region.
2. Through the CES system, intake specialists conduct the VI-SPDAT vulnerability assessment that ascertains an individual's needs based on several factors including the length of time homeless. This factor, and others, will prioritize a person for potential housing placement should something be available.
3. The CoC Council is the entity responsible for overseeing the CoC's strategy.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
	NOFO Section VII.B.5.d.	

	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

1. Devastating wildfires have consumed a substantial portion of the County's housing stock and as a result the rental market is significantly impacted. Demand has created over-inflated rental rates, lack of availability and has impacted the ability of case managers to house persons who fall under a Fair Market Rent subsidy. Landlords and property owners now have the luxury of renting to upper middle class renters that pay their rent on time, pay an inflated price and don't have rental history or credit problems. Strategies include supporting affordable housing developments-through the No Place Like Home program; ad to continue supporting the Housing Navigator who has established rapport with landlords and brokers.

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

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

(limit 2,000 characters)

1. The CoC's HMIS system tracks individuals and families who return to homelessness. The CoC uses the HMIS/CES system and the by-name lists to identify patterns in who is returning to homeless and why (specific subpopulations, geographic concentrations, persons with severe mental illness, health challenges, etc.)

2. Strategies to reduce recidivism include tenant behavior training through the Good Tenant Training Program; comprehensive case management; meet household needs with dynamic financial assistance that aids in stabilizing housing for longer periods of time.
3.The CoC Council is the entity responsible for overseeing the CoC's strategy.

2C-5.	**Increasing Employment Cash Income-Strategy.**	
	NOFO Section VII.B.5.f.	

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

(limit 2,000 characters)

1. The CoC is strategically housed in the Butte County Employment and Social Services Department (DESS) and provides CoC partners and program participants the best opportunity to increased employment income as a result of job support, job training and collaborative partnerships with Butte College and the Alliance for Workforce Development (AFWD).
2. Through the CoC's association with DESS, Butte College and the AFWD, direct, prioritized and intense support for mainstream employment resources for the homeless are accessed. Service provider organizations often provide on the job training programs that will increase the potential for cash income.

2C-5a.	**Increasing Employment Cash Income–Workforce Development–Education–Training.**	
	NOFO Section VII.B.5.f.	

	Describe in the field below how your CoC:
1.	**promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and**
2.	**is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.**

(limit 2,000 characters)

1. The commitment and investment of human and financial resources by the DESS, Butte College and the AFWD demonstrates partnerships that increase employability of persons experiencing homelessness. The AFWD connects with employers, conducts outreach, holds job fairs and oversees hiring opportunities. DESS operates a subsidized employment program and work experience workshops. DESS collaborates with case management staff from homeless service providers to locate work experience opportunities for the target population.
2.Butte College and the AFWD offer a job training program, in partnership with DESS. The Homeless Liaison at Butte College assists students experiencing homelessness to enroll in job training programs that compliment the student's educational needs. Butte College holds job fairs twice annually, offers job shadowing and conducts career assessments that help guide students toward

specific careers.

2C-5b.	**Increasing Non-employment Cash Income.**	
	NOFO Section VII.B.5.f.	

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

(limit 2,000 characters)

1. As the CoC's lead agency, DESS holds primary responsibility for the provision of non-employment cash income through the General Assistance and CalWORKs programs, for eligible participants.
2. DESS collaborates with housing and homeless service providers to increase awareness and available services a d to identify potential barriers to accessing non-employment case resources for the target population.
3. The CoC Council is the entity that oversees the CoC's strategy.

3A. Coordination with Housing and Healthcare Bonus Points

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

3A-1.	**New PH-PSH/PH-RRH Project–Leveraging Housing Resources.**	
	NOFO Section VII.B.6.a.	

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

3A-1a.	**New PH-PSH/PH-RRH Project–Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	**Private organizations**	Yes
2.	**State or local government**	No
3.	**Public Housing Agencies, including use of a set aside or limited preference**	No
4.	**Faith-based organizations**	No
5.	**Federal programs other than the CoC or ESG Programs**	No

3A-2.	**New PSH/RRH Project–Leveraging Healthcare Resources.**	
	NOFO Section VII.B.6.b.	

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

3A-2a.	**Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.6.b.	

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

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

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

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

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
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- 24 CFR part 578

3B-1.	**Rehabilitation/New Construction Costs–New Projects.**	
	NOFO Section VII.B.1.r.	

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 VII.B.1.s.	

	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:
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 2,000 characters)

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

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

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 VII.C.	

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

3C-2.	**Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.C.	

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

(limit 2,000 characters)

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
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- 24 CFR part 578

4A-1.	**New DV Bonus Project Applications.**	
	NOFO Section II.B.11.e.	

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes

4A-1a.	**DV Bonus Project Types.**	
	NOFO Section II.B.11.	

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 2021 Priority Listing.

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

You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-3 and 4A-3a.

4A-2.	**Number of Domestic Violence Survivors in Your CoC's Geographic Area.**	
	NOFO Section II.B.11.	

1.	**Enter the number of survivors that need housing or services:**	81
2.	**Enter the number of survivors your CoC is currently serving:**	12
3.	**Unmet Need:**	69

4A-2a.	**Calculating Local Need for New DV Projects.**	
	NOFO Section II.B.11.	

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and
2.	the data source (e.g. comparable database, 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 2,000 characters)

1. The CoC worked with the DV Housing and Service Provider, Catalyst Domestic Violence Services, to determine the number of survivors currently being served and the number of survivors still in need of housing or services.
2. Osnium, an HMIS comparable database, operated by Catalyst is the data source for this information.
3. The CoC is unable to meet the needs of all survivors for several reasons (A) a lack of housing stock as a result of several years of devastating wildfires; and (b) survivors often do not have proper identification and it is not easy to obtain identification without having access to your documents or a mailing address; and (C) poor credit and rental history; and (D)pets that are not allowed in most rental units/shelters.

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information.	
	NOFO Section II.B.11.	

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

Applicant Name
Catalyst Domestic...

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

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2021 Priority Listing:

1.	Applicant Name	Catalyst Domestic Violence Services
2.	Rate of Housing Placement of DV Survivors–Percentage	100.00%
3.	Rate of Housing Retention of DV Survivors–Percentage	86.30%

4A-4a.	Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Describe in the field below:
1.	how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and
2.	the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,000 characters)

1. Rate of housing placement of DV survivors was calculated by the number of persons placed in housing divided by the demand for housing (the number housed added to the number needing housing without housing available). Rate of housing retention was calculated by the number who continued in housing divided by the number placed in housing.
2. The data utilized to determine the calculation was retrieved from Osnium, the HMIS comparable database used by Catalyst Domestic Violence Services.

4A-4b.	Providing Housing to DV Survivor–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Describe in the field below how the project applicant:
1.	ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;
2.	prioritized survivors–you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;
3.	connected survivors to supportive services; and
4.	moved clients from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends.

(limit 2,000 characters)

1. DV survivors who contact Catalyst Domestic Violence Services, the County's DV housing and service provider, receive immediate crisis support and are assessed for housing and service needs. Currently, Catalyst maintains a comprehensive housing program based anchored in the housing first model that includes emergency shelter, transitional housing, and rapid rehousing programs, allowing options to meet the individual needs for survivors. However, due to the historically low vacancy rate of less than 2% coupled with a Presidentially-declared disaster that nearly eliminated a township, the housing stock has exponentially decreased and the market has become more competitive. There are few, if any, units available-none of which are affordable for our programs/participants. Those that do become available are in such demand, landlords are more likely to rent to families or college students who do not have the complications of program required inspections, corrective action, and maximum rent allowances. Tenants with a history of poor credit, poor rental history, or family violence further exacerbate the issue. While immediately moving survivors into permanent housing is always the goal, there are few options to secure temporary housing for families until more permanent options become available. Catalyst is, therefore, applying for a Joint TH-PH/RRH project, in order to rapidly house individuals and families whenever possible, and also provide a temporary safe haven to reside for up to 24 months. This allows survivors to transition into safe housing when available, as well as to participate in support plans to improve family safety, income, rental history and self-sufficiency.
2.

4A-4c.	**Ensuring DV Survivor Safety–Project Applicant Experience.**	
	NOFO Section II.B.11.	

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

(limit 5,000 characters)

1. All staff and volunteers through Catalyst are required to complete a 40-hour mandatory training which is required by the state; safety planning is a large component of this training. Catalyst utilizes the evidence-based lethality Assessment as the basis of safety planning.
2. Confidentiality is the highest priority and is a key tenant to DV services; intakes are always complete in a private and confidential office space.
3.Intakes and assessments are completed on an individual basis; it is rare that both members of intimate partner violence seeks services simultaneously.
4. The client centered approach is a core practice and it begins at the initial intake and assessment; survivors choose the housing option that is safest for them.

5. Sheltering/housing facilities are developed and maintained to offer safety and security for those utilizing services. While there are no bars on the windows, a full security system with alarms and cameras is maintained. Entrance to the facility is only allowed through a door with a code that is regularly changed. Appropriate lighting is maintained throughout the interior and exterior of the facility. Law enforcement has Catalyst facilities on priority should they need to respond.
6. Catalyst's facility locations are all confidential. Their dedicated units and congregate living spaces are solely for the use of survivors.

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

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

(limit 2,000 characters)

Catalyst evaluates its ability to ensure the safety of it survivors the same way they do everything-by asking and listening to our program participants. Staff routinely asks for input and requests that participants complete surveys to share their thoughts on services and safety. Catalyst focuses on the major program components which each have a safety component: shelter/housing, support groups, supportive services/advocacy and counseling. Responses to surveys are input into the database and can be retrieved for reporting or when needed for funders or program improvement purposes.

4A-4d.	**Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience.**	
	NOFO Section II.B.11.	

	Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:
1.	**prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;**
2.	**establishing and maintaining an environment of agency and mutual respect, e.g., the project does not 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 trauma;**
4.	**emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**
5.	**centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
6.	**providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
7.	**offering support for parenting, e.g., parenting classes, childcare.**

(limit 5,000 characters)

1. Catalyst uses a Housing First approach. Advocates meet with participants to assess housing needs. Assessment and case management is provided with,

not for, survivors. Our philosophy reflects that survivors know best what they need to keep their families safe. We work alongside them to help them attain their goals. We have agency values that include history, voice and expertise and empowerment, underscoring participant choice.
2. The move to a trauma-informed approach has meant constant flexibility and change in policies and service offerings in our programs to meet the needs of survivors. We did away with the “rules” approach a decade ago and work from mutual agreements that center on safety. Survivor centered bill of rights and grievance procedures are provided to all participants.
3. Catalyst offers group and individual counseling where participants learn and discuss specifics of trauma, how to move forward, and how to work past triggers. Staff is well-versed in trauma and assist participants in finding the support they want. Discussions around grounding, calming, or other self-care activities are common when assisting a participant to feel supported. Catalyst has groups which provide both in-house and in community that focus on Healthy Relationships and Seeking Safety curriculum, an evidence-based program addressing trauma.
4. Advocacy is centered on participants. Catalyst staff looks at the whole person, both strengths and challenges, and utilizes best practices to support and validate their decisions. Catalyst uses an active engagement model where they set goals based on their needs and help use their skills to realize their goals. Staff works with survivors to help move past challenges that allow participant growth and leaves them empowered. Staff receive training in assessment and utilize evidence-based tools from the Northwest Network.
5. Staff receive training on identifying and eliminating bias that encompasses equal access and nondiscrimination. Catalyst has a policy and “commitment to serving the needs of all survivors… regardless of ethnicity, citizenship, language, religion, physical disabilities, sexual orientation, gender identity or HIV status." The organization recognizes the need to increase capacity with regard to equity to provide services to a variety of communities, including the Latinx and Hmong populations.Catalyst provide educational opportunities to staff. Catalyst recognizes the need to be accessible and language should not be a barrier and has a written language access plan.
6. Catalyst facilitates groups to build connections between participants. The organization offers nutrition workshops biweekly facilitated by USDA. Weekly house meeting time is a discussion of upcoming events and activities about healthy communication or self care.
7.Children’s Advocates offer support to parents, including respite childcare, healthy parenting strategies, referrals, and education of effects of trauma on children, and how their own trauma affects their parenting. A partner holds Parent Café, a way for parents to be together to learn in a facilitated way.

4A-4e.	**Meeting Service Needs of DV Survivors–Project Applicant Experience.**	
	NOFO Section II.B.11.	

	Describe in the field below:
1.	**supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and**
2.	**provide examples of how the project applicant provided the supportive services to domestic violence survivors.**

(limit 5,000 characters)

1. Having a Housing Coordinator in-house at the DV Shelter is a tactical stride to assist particpants in shelter make moves to housing earlier. Traujma makes it difficult for participants to do even the easiest of tasks at times. Advocates at the shelter spend the few moths just helping participants start over and recover. With the Housing Coordinator, everyone can work in unison and those tasks that are too challenging, the Coordinator can assist with. All of this work is done with the participant's buy-in, is based on ther needs and is guided by their wishes. Catalyst helps participants in the transitional housing program maintain their housing for eighteen months and then assists in moving on to scattered sites that the participant is able to rent on their own. In the shelter, staff will help survivors move from homeless and living in a shelter to scattered sites that they rent independently through the RRH program for a period of up to 24 months. Services provided by Catalyst to support a quick move to permanent housing and to address safety needs includes case management, counseling, job readiness and legal services support (as noted below). Staff have a robust referral process with partner agencies, many formalized with Operational Agreements for services survivors need that fall outside of what Catalyst staff provide.
•Child Custody- Advocates work with participants to connect them to legal resources to assist with Child Custody cases, including the county self help clinic and an attorney who offers pro bono services in difficult cases.
•Legal Services- Catalyst has advocates on staff who help obtain temporary restraining orders; we also have an OA with Legal Service of Northern California and Community Legal Assistance Center
•Criminal History-Catalyst maintains relationships with criminal defense attorneys; including those in our office complex
•Bad Credit History- Catalyst has a funding source that can assist with debt assistance related to utilities. Catalyst assists with bad credit history through a referral to a local credit counseling program
•Education- Catalyst has 2 Child Advocates who are well-versed in the McKinney-Vento Act and are liaisons to multiple school districts
•Job Training- Catalyst assists with job readiness through case management and support
•Employment- Catalyst assists with employment services through case management; and though an OA with Butte County Department of Employment and Social Services
•Physical/Mental Healthcare- Catalyst maintains a staff of therapists (licensed and intern status with Board of Behavioral Health) to provide individual and group therapy at all our sites. Catalyst maintains OAs with Butte County Behavioral Health, social service agencies, and Enloe Medical Center
•Drug and Alcohol Treatment- Catalyst refer participants to Butte County Behavioral Health and Skyway House for services. We are able to pay for inpatient care through another funding source
•Childcare- Catalyst has secured two Child Advocates that provide childcare for participants accessing services; participants ma also be referred to Valley Oak Children’s Services
2. Catalyst has a proven track record of being able to house participants quickly and efficiently dating back to our first Rapid Rehousing program starting in 2016. We had a goal of working with five households using those funds and were able to assistant more than double that projection. Most recently throughout the pandemic we were still able to house participants within 90 days of being welcomed into our Rapid Rehousing program. We have been able to report successfully to HUD for the last five years.

Through responsive crisis intervention and a trauma informed approach, Catalyst has fostered an environment with survivors that allows for a quick assessment of their housing and other related needs. Through this process, we help the survivor identify ways to increase their stability, which may include mental health support throughout counseling program, working with them to identify and obtain documents and information they need for housing applications, and addressing other specific financial needs. These supportive services happen in tandem to working with the survivor to find and secure safe housing.

4A-4f.	**Trauma-Informed, Victim-Centered Approaches–New Project Implementation.**	
	NOFO Section II.B.11.	

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

(limit 5,000 characters)

1.Catalyst uses a Housing First approach. Advocates meet with participants to assess housing needs. Assessment and case management is provided with, not for, survivors. Our philosophy reflects that survivors know best what they need to keep their families safe. Staff works alongside them to help them attain their goals. We have agency values that include history, voice and expertise and empowerment, underscoring participant choice.
2. The move to a trauma-informed approach has meant constant flexibility and change in policies and service offerings in our programs to meet the needs of survivors. We did away with the "rules" approach a decade ago and work from mutual agreements that center on safety. Survivor centered bill of rights and grievance procedures are provided to all participants.
3. Catalyst has group and individual counseling available where participants learn and discuss specifics of trauma, how to move forward, and how to work past triggers. Staff is well-versed in trauma and assist participants in finding the support they want. Discussions around grounding, calming, or other self-care activities are common when assisting a participant to feel supported. Catalyst offers groups which are provided in-house and in the community; these groups focus on Healthy Relationships and Seeking Safety curriculum, an evidence-based program addressing trauma.
4. Advocacy is centered on participants. Staff look at the whole person, both

strengths and challenges. We use best practices to support and validate their decisions. We use an active engagement model where they set goals based on their needs and help use their skills to realize their goals. We work to help move past challenges that allow participant growth and leaves them empowered. Staff receive training in assessment and utilize evidence-based tools from the Northwest Network.
5. Staff receive training on identifying and eliminating bias that encompasses equal access and nondiscrimination. We have a policy and “commitment to serving the needs of all survivors… regardless of ethnicity, citizenship, language, religion, physical disabilities, sexual orientation, gender identity or HIV status". We recognize the need to increase capacity to provide services to a variety of communities, including the Latinx and Hmong populations. We provide educational opportunities to staff. Catalyst recognizes the need to be accessible and language should not be a barrier and has a written language access plan.
6. Catalyst facilitates groups to build connections between participants. We have nutrition workshops biweekly put on by USDA. Weekly house meetings bring about a discussion of upcoming events and activity about healthy communication or self-care.
7. Children’s Advocates offer support to parents, including respite childcare, healthy parenting strategies, referrals, and education of effects of trauma on children, and how their own trauma affects their parenting. A partner holds Parent Café, a way for parents to be together to learn in a facilitated way.

4B. Attachments Screen For All Application Questions

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

Attachments must match the questions they are associated with.

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

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

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Tool	11/08/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	Local Competition...	11/08/2021
1E-2. Project Review and Selection Process	Yes	Project Review an...	11/08/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting-Pr...	11/08/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting-Pr...	11/08/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Local Competition Announcement

Attachment Details

Document Description: Project Review and Selection Process

Attachment Details

Document Description: Public Posting-Projects Rejected-Reduced

Attachment Details

Document Description: Public Posting-Projects Accepted

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	10/20/2021
1B. Inclusive Structure	11/08/2021
1C. Coordination	11/08/2021
1C. Coordination continued	11/08/2021
1D. Addressing COVID-19	11/07/2021
1E. Project Review/Ranking	11/08/2021
2A. HMIS Implementation	11/08/2021
2B. Point-in-Time (PIT) Count	11/02/2021
2C. System Performance	11/08/2021
3A. Housing/Healthcare Bonus Points	11/08/2021
3B. Rehabilitation/New Construction Costs	11/08/2021

3C. Serving Homeless Under Other Federal Statutes	11/08/2021
4A. DV Bonus Application	11/08/2021
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

Vulnerability Index -

Service Prioritization Decision Assistance Tool

(VI-SPDAT)

Prescreen Triage Tool for Single Adults

AMERICAN VERSION 2.01

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COMMUNITY SOLUTIONS

ORG CODE

Administration

Interviewer's Name	Agency	○ Team ○ Staff ○ Volunteer
_____	_____	
Survey Date	**Survey Time**	**Survey Location**
DD/MM/YYYY ____/____/_____	__ __ __ __	_____

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name	Nickname	Last Name
_____	_____	_____

In what language do you feel best able to express yourself? _____

Date of Birth	Age	Social Security Number	Consent to participate
DD/MM/YYYY ____/____/_____	_____	_____	○ Yes ○ No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE: 0

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A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- ◯ Shelters
- ◯ Transitional Housing
- ◯ Safe Haven
- ◯ **Outdoors**
- ◯ **Other (specify):** _____
- ◯ **Refused**

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.	SCORE: 0

2. How long has it been since you lived in permanent stable housing? ___ Years ☐ Refused
3. In the last three years, how many times have you been homeless? _____ ☐ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.	SCORE: 0

B. Risks

4. In the past six months, how many times have you...
   a) Received health care at an emergency department/room? ____ ☐ Refused
   b) Taken an ambulance to the hospital? ____ ☐ Refused
   c) Been hospitalized as an inpatient? ____ ☐ Refused
   d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? ____ ☐ Refused
   e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? ____ ☐ Refused
   f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? ____ ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR **EMERGENCY SERVICE USE.**	SCORE: 0

5. Have you been attacked or beaten up since you've become homeless? ☐ **Y** ☐ N ☐ Refused
6. Have you threatened to or tried to harm yourself or anyone else in the last year? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF HARM.**	SCORE: 0

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7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ **Y** ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES.**	**SCORE:** 0

8. Does anybody force or trick you to do things that you do not want to do? ☐ **Y** ☐ N ☐ Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION.**	**SCORE:** 0

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? ☐ **Y** ☐ N ☐ Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Y ☐ **N** ☐ Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR **MONEY MANAGEMENT.**	**SCORE:** 0

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? ☐ Y ☐ **N** ☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY.**	**SCORE:** 0

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☐ **N** ☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE.**	**SCORE:** 0

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted? ☐ **Y** ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS.**	**SCORE:** 0

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D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?	☐ **Y**	☐ N	☐ Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	☐ **Y**	☐ N	☐ Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?	☐ **Y**	☐ N	☐ Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?	☐ **Y**	☐ N	☐ Refused
19. When you are sick or not feeling well, do you avoid getting help?	☐ **Y**	☐ N	☐ Refused
20. *FOR FEMALE RESPONDENTS ONLY:* Are you currently pregnant?	☐ **Y**	☐ N	☐ N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH.**	**SCORE:** 0

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?	☐ **Y**	☐ N	☐ Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?	☐ **Y**	☐ N	☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE.**	**SCORE:** 0

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern?	☐ **Y**	☐ N	☐ Refused
b) A past head injury?	☐ **Y**	☐ N	☐ Refused
c) A learning disability, developmental disability, or other impairment?	☐ **Y**	☐ N	☐ Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?	☐ **Y**	☐ N	☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH.**	**SCORE:** 0

IF THE RESPONENT SCORED 1 FOR **PHYSICAL HEALTH** AND 1 FOR **SUBSTANCE USE** AND 1 FOR **MENTAL HEALTH**, SCORE 1 FOR **TRI-MORBIDITY**.	**SCORE:** 0

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25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☐ **Y** ☐ N ☐ Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS.**	**SCORE:** 0

27. *YES OR NO:* Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? ☐ **Y** ☐ N ☐ Refused

IF "YES", SCORE 1 FOR **ABUSE AND TRAUMA.**	**SCORE:** 0

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /1	**Score:** **Recommendation:**
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	0-3: no housing intervention
B. RISKS	0 /4	4-7: an assessment for Rapid Re-Housing
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	8+: an assessment for Permanent Supportive Housing/Housing First
D. WELLNESS	0 /6	
GRAND TOTAL:	0 /17	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ___ : ____ or Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	☐ Yes ☐ No ☐ Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

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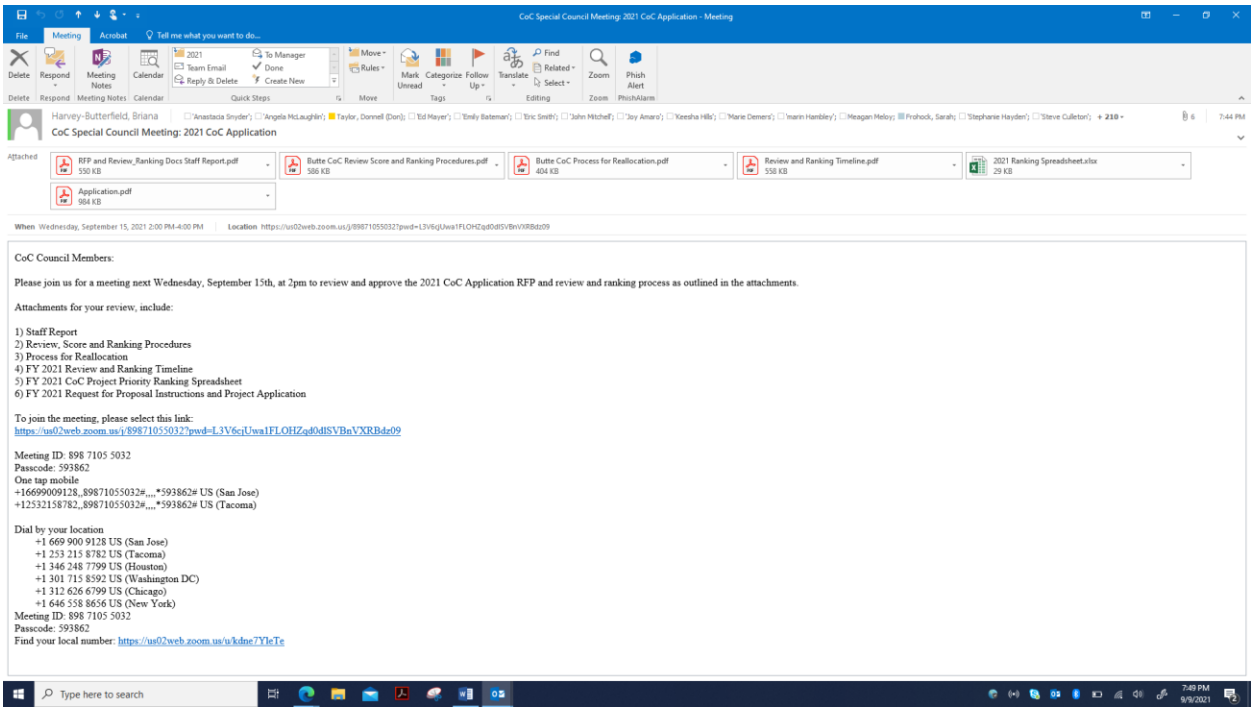
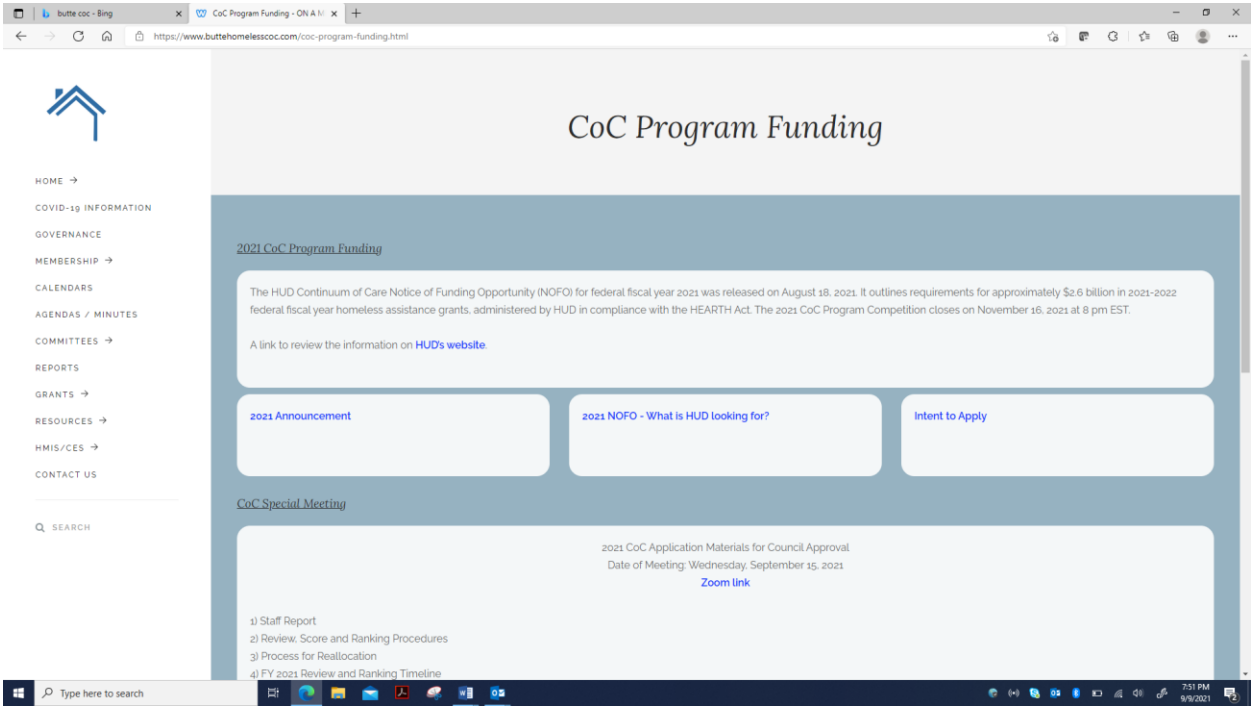

CoC Special Council Meeting: 2021 CoC Application - Meeting
File
Meeting
Acrobat
Tell me what you want to do...
Delete
Respond
Meeting Notes
Calendar
2021
Team Email
Reply & Delete
To Manager
Done
Create New
Quick Steps
Move
Rules
Move
Mark Unread
Categorize
Follow Up
Tags
Translate
Find
Related
Select
Editing
Zoom
Zoom
Phish Alert
PhishAlarm
Harvey-Butterfield, Briana
CoC Special Council Meeting: 2021 CoC Application
Attached
RFP and Review_Ranking Docs Staff Report.pdf
550 KB
Butte CoC Review Score and Ranking Procedures.pdf
586 KB
Butte CoC Process for Reallocation.pdf
404 KB
Review and Ranking Timeline.pdf
558 KB
2021 Ranking Spreadsheet.xlsx
29 KB
Application.pdf
984 KB
When Wednesday, September 15, 2021 2:00 PM-4:00 PM
Location https://us02web.zoom.us/j/89871055032?pwd=L3V6cjUwa1FLOHZqd0dlSVBnVXRBdz09
CoC Council Members:
Please join us for a meeting next Wednesday, September 15th, at 2pm to review and approve the 2021 CoC Application RFP and review and ranking process as outlined in the attachments.
Attachments for your review, include:
1) Staff Report
2) Review, Score and Ranking Procedures
3) Process for Reallocation
4) FY 2021 Review and Ranking Timeline
5) FY 2021 CoC Project Priority Ranking Spreadsheet
6) FY 2021 Request for Proposal Instructions and Project Application
To join the meeting, please select this link:
https://us02web.zoom.us/j/89871055032?pwd=L3V6cjUwa1FLOHZqd0dlSVBnVXRBdz09
Meeting ID: 898 7105 5032
Passcode: 593862
One tap mobile
+16699009128,,89871055032#,,,,*593862# US (San Jose)
+12532158782,,89871055032#,,,,*593862# US (Tacoma)
Dial by your location
+1 669 900 9128 US (San Jose)
+1 253 215 8782 US (Tacoma)
+1 346 248 7799 US (Houston)
+1 301 715 8592 US (Washington DC)
+1 312 626 6799 US (Chicago)
+1 646 558 8656 US (New York)
Meeting ID: 898 7105 5032
Passcode: 593862
Find your local number: https://us02web.zoom.us/u/kdne7YleTe
Type here to search
7:49 PM
9/9/2021


butte coc - Bing
CoC Program Funding - ON A M
https://www.buttehomelesscoc.com/coc-program-funding.html
HOME
COVID-19 INFORMATION
GOVERNANCE
MEMBERSHIP
CALENDARS
AGENDAS / MINUTES
COMMITTEES
REPORTS
GRANTS
RESOURCES
HMIS/CES
CONTACT US
SEARCH
CoC Program Funding
2021 CoC Program Funding
The HUD Continuum of Care Notice of Funding Opportunity (NOFO) for federal fiscal year 2021 was released on August 18, 2021. It outlines requirements for approximately $2.6 billion in 2021-2022 federal fiscal year homeless assistance grants, administered by HUD in compliance with the HEARTH Act. The 2021 CoC Program Competition closes on November 16, 2021 at 8 pm EST.
A link to review the information on HUD's website.
2021 Announcement
2021 NOFO - What is HUD looking for?
Intent to Apply
CoC Special Meeting
2021 CoC Application Materials for Council Approval
Date of Meeting: Wednesday, September 15, 2021
Zoom link
1) Staff Report
2) Review, Score and Ranking Procedures
3) Process for Reallocation
4) FY 2021 Review and Ranking Timeline
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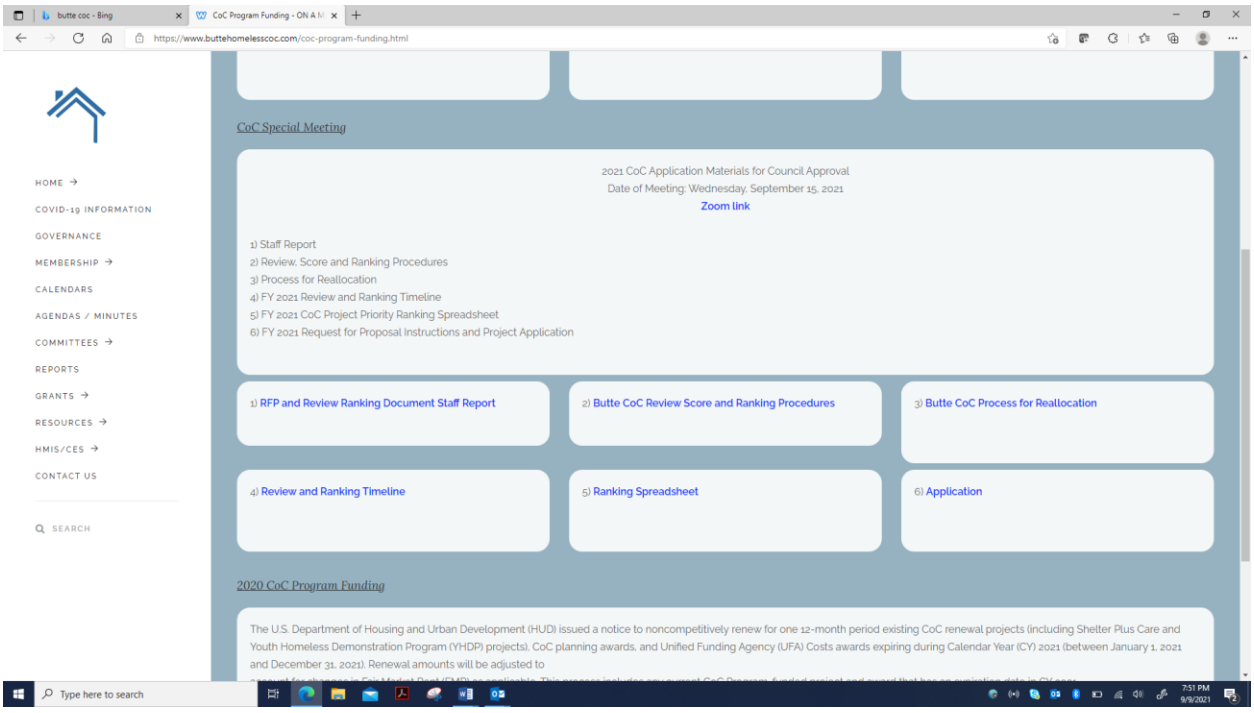
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2020 CoC Program Funding
The U.S. Department of Housing and Urban Development (HUD) issued a notice to noncompetitively renew for one 12-month period existing CoC renewal projects (including Shelter Plus Care and Youth Homeless Demonstration Program (YHDP) projects), CoC planning awards, and Unified Funding Agency (UFA) Costs awards expiring during Calendar Year (CY) 2021 (between January 1, 2021 and December 31, 2021). Renewal amounts will be adjusted to
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Butte Countywide Homeless Continuum of Care
2021 CoC Annual Funding Application
Review, Score, and Ranking Procedures Adopted by CoC Council 9/15/21

HUD requires CoCs to conduct a detailed and objective review, score, and ranking process for project applications that prioritizes and funds the projects which best align with HUD priorities and performance standards. The procedures include a preliminary review of eligibility based on HUD eligibility and project quality threshold standards. Eligible applications are then reviewed and scored based on the applicant and project's ability to meet the HUD priorities established in the NOFO, based on their past performance, and the proposed project design. Applications are then ranked based on their score, and recommended to the CoC Council accordingly. With the Council's approval, the ranking determines whether applications are placed in Tier 1 or Tier 2, or in a separate DV Bonus category, as required by HUD. Applications which are not ranked and placed in either Tier 1 or Tier 2 are the CoC Planning Grant projects. A detailed description of these procedures follows below. See Review and Ranking Timeline for the 2021 Project Application key dates.

Step 1 – Approved Procedures and Documentation

Review, Score and Ranking Procedures, the *Process for Reallocation,* the *Timeline* and a *Request for Proposal Instructions and Project Application (RFP/Application)* are developed and distributed to CoC Council members. These documents include all HUD eligibility, screening, and prioritization requirements. The documents are presented, reviewed, amended, and approved at a public CoC Council meeting.

Step 2 – Outreach

All non-profit and public agencies are invited to submit a proposal for new project funding when there is an opportunity for reallocation of funds or new funds allocated by HUD to the Butte County CoC. An announcement of available funds, the *Review, Score and Ranking Procedures*, and the *RFP Instructions and Project Application* will be distributed to all agencies who are CoC members or who have expressed an interest in being informed of CoC activities. Individual agencies that have expressed interest in receiving CoC-program funds may also be directly contacted. The announcement of available funds will be produced in English. If desired by interested parties, the *Review, Score and Ranking Procedures* and the *RFP/Application* will also be translated into Spanish. The *Review, Score and Ranking Procedures* and *RFP/Application* will also be posted on the CoC website. An orientation session will be offered to all interested applicants, but attendance at this session is not mandatory.

Step 3 - Eligibility Threshold

Eligibility to apply will be based on each applicant's ability to complete and satisfactorily prove qualifications via the Applicant Eligibility Threshold, Project Quality Threshold, and/or Project Renewal Threshold. (See RFP/Application.)

- The *Applicant Eligibility Threshold* consists of eligibility criteria scored on a pass/fail basis.
- The *Project Quality Threshold* outlines quality requirements for both new applications, with eligibility determined by the applicants' ability to meet a minimum number of standards for new project applications. For renewal applications, a different set of standards are used, and renewal applicants are expected to meet all criteria.

Only projects meeting the minimum threshold requirements will be reviewed and ranked.

Step 4 – Project Application Ranking

All eligible projects – both new and renewal - will be reviewed and ranked together in order to strategically allocate resources to the projects that best match the HUD priorities, and to prioritize projects that have been successful in supporting and housing those who are homeless. (See Process for Reallocation.) Performance will be analyzed with the use of data – CoC APR Reports (HMIS data) or comparable data for new projects and domestic violence projects – evidencing specific outcome areas. Applicants will also need to provide narrative and documentation on policies and practices when requested. Answers will be rated on a weighted scale. For housing project applicants, the CoC will consider Rapid Return to Housing and Severity of Barriers Experienced by Program Participants, as evidenced by answers to Questions #6 and #7 in the "All Housing Applicants" section (pages 15-16) when ranking the projects (See RFP/Application). Per Question #6 in this section, the severe barriers the CoC will consider are:

- Participants with income less than $1,000 at program entry
- Participants with more than one disability type
- Participants entering the project from placed not meant for human habitation
- Participants who were chronically homeless at program entry
- Participants who were fleeing violence at program entry

The following ranking exceptions and considerations apply:

- HMIS: The Homeless Management Information System (HMIS) is a required project for the CoC, and so receives top ranking, and granted the funding amount specified in the Grant Information Worksheet (GIW), as long as the project meets the preliminary threshold standards.

- DV Bonus: If a DV Bonus project ranked in either Tier 1 or Tier 2 is selected for funding with DV Bonus funds, the project will be removed from its respective Tier and the projects below it will move up one rank position. However, if a new DV Bonus project is not selected for funding with DV bonus funds, the project will retain its ranked position within either Tier 1 or Tier 2. DV Bonus project applications, both new and renewal, will receive a unique rank number, so that HUD may fund these projects in accordance with section II.B.11.e of the NOFO.

- CoC Planning Projects are not ranked and therefore not shown in either Tier 1 or Tier 2

Completing the ranking portion of the application entails applicants demonstrating that their project aligns with the HUD policies and that evaluation measures prove the success of the program in meeting HUD goals. Applicants who believe the criteria does not offer a fair advantage based on the nature of their agency or project may indicate that in the narrative of their application and request an exception. The council will consider that request during the review, score and ranking process. Applicants will provide narrative and documentation to prove each criterion. After a comprehensive review by a neutral third party, points will be awarded accordingly. Project applications will then be ranked according to each applicant's score and ordered from high to low score on a spreadsheet which identifies Tiers and funding levels as prescribed by HUD. Tier 1 and Tier 2 projects will be determined by which projects fall within the tiers according to their score. The number of projects funded is contingent on the annual allocation and type of projects funded as the top applicants.

Step 5 – Council Approval

Project application ranking will be recommended to the CoC Council, illustrated in an order ranking across tiers (see attached Priority Ranking Spreadsheet). The CoC Council will discuss, amend and approve ranking by majority vote. Council members representing an agency with an application may participate in discussing the applications but will recuse themselves from voting. Below are the rules and parameters the CoC Council will use in its deliberations on the Priority Ranking Spreadsheet.

1. Housing Tools provides an overview of the review and ranking criteria and process.

2. *If there is an even number of CoC Councilmembers who are not Project Applicants*, the non-applicant members of the CoC Council designate, by majority, a Review and Ranking Chair to represent the group and cast an additional tie-breaking vote, if necessary.

3. Housing Tools presents the recommended Project Priority Listing. CoC Councilmembers and CoC Members may pose questions to Project Applicant representatives. Project Applicant representatives do not participate in this discussion unless they are requested to respond to specific questions by CoC Councilmembers or CoC Members.

4. Any CoC Councilmember whose agency has submitted an application recuses herself or himself from voting on the application ranking. These Councilmembers will stay on the premises in case the Council needs to reconvene for further questions.

5. Councilmembers may briefly discuss the applications among themselves or ask Housing Tools criteria or process questions, if necessary. There will be no further discussion or questions with CoC membership unless all Councilmembers are present.

6. The Council votes to approve or disapprove the recommended Project Priority Listing.

7. *In the event that the recommended Project Priority Listing is disapproved* by a majority, Housing Tools will facilitate a decision-making process to reorder the project rankings. Any ranking must be supported by a consistent and strong rationale that adheres to the CoC Program goals and NOFA policy priorities.

8. *In the event that consensus cannot be achieved* for any particular ranking, a vote will be recorded, with each CoC Councilmember casting one vote. *In the event of a tie*, the Review and Ranking Chair will cast an additional tie-breaking vote.

9. Housing Tools records the rankings, Tier 1 or Tier 2 designations, any reallocation, and summarizes these to the full CoC Council.

10. There will be no further discussion, questions, or comment regarding the Project Priority Listing during the CoC Council Meeting after the vote is complete.

11. *In the case that there is no quorum for a vote*, Steps 1 through Step 6 will be followed. If the majority vote approves the Project Priority Listing, an online vote will take place within 24 hours of the meeting for all absentee non-applicant Councilmembers. If the majority vote disapproves the Project Priority Listing, Step 7 will take place, followed by an online vote for all non-applicant Councilmembers within 24 hours. Step 9 will occur through email

announcement by Housing Tools to all CoC Membership, including Councilmembers and Project Applicants.

Step 6 - Notifications

All applicants will be notified of their rank order via email. Applications who do not pass threshold requirements, or whose application scores rank them below the level of available funding, will be provided an explanation of why the application was rejected. The Priority Ranking Spreadsheet will be posted on the CoC website for public review and emailed to the CoC memberships. Dated meeting minutes will be published for all meetings that pertain to the CoC's competition process and distributed to the full CoC membership.

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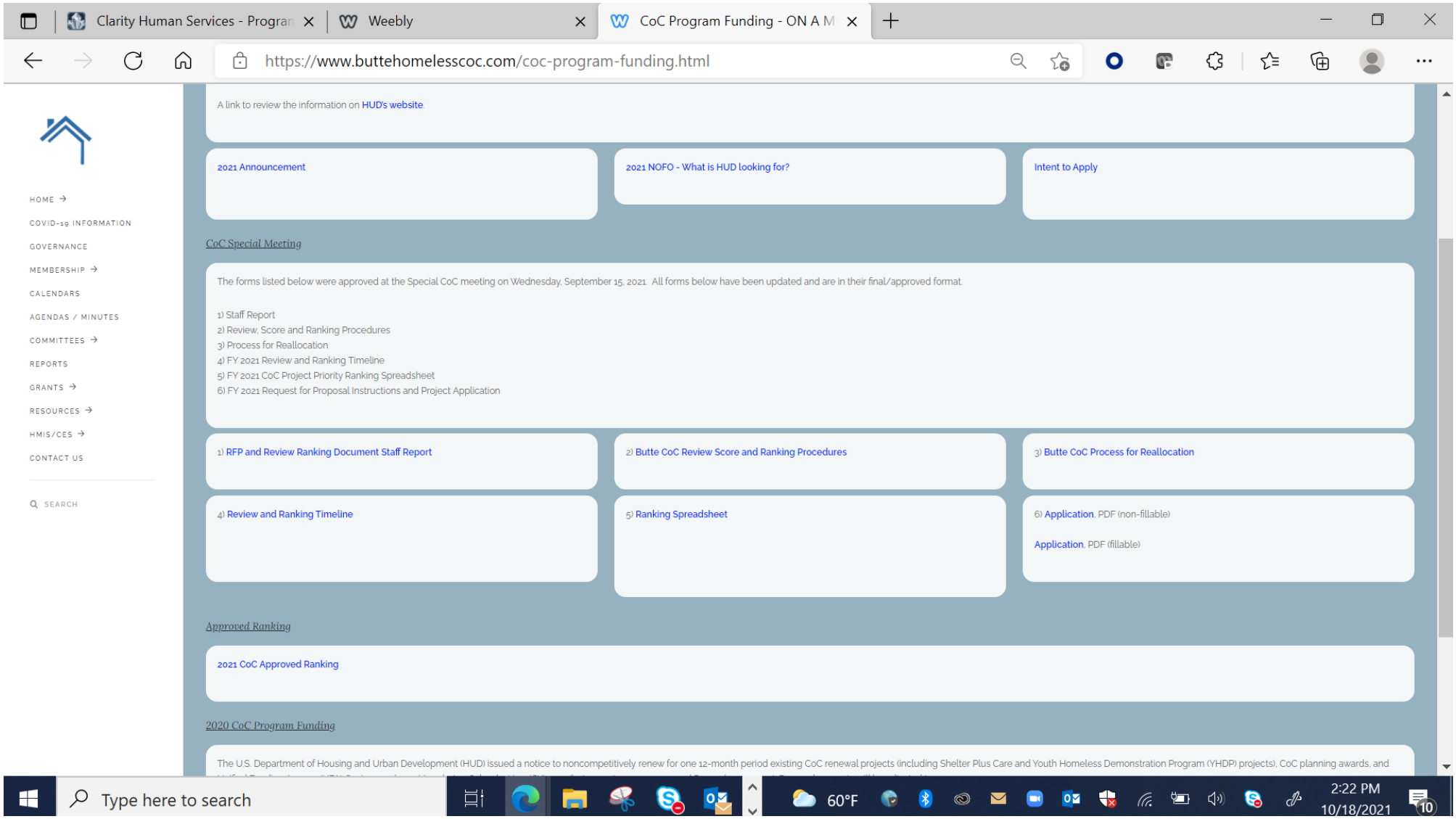
Application, PDF (fillable)

Approved Ranking

2021 CoC Approved Ranking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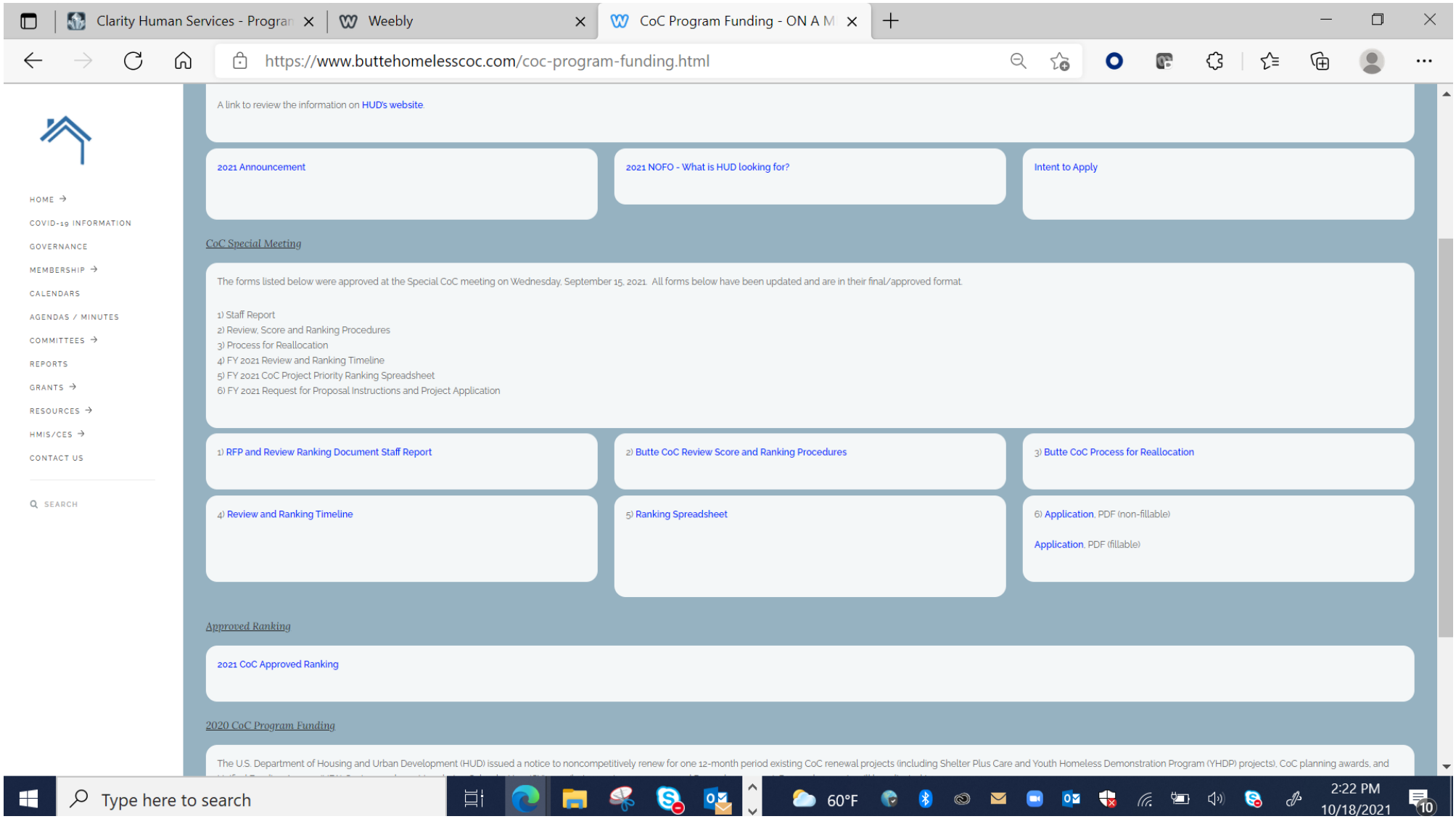
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