

Before Starting the CoC Application

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

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

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

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

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

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

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

1A-2. Collaborative Applicant Name: Homeless Leadership Alliance of Pinellas, Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Homeless Leadership Alliance of Pinellas, Inc.

1B. Coordination and Engagement–Inclusive Structure and Participation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC's geographic area:	

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

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	No
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	No	No	No
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Faith-based Providers	Yes	Yes	Yes
35.				

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

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

(limit 2,500 characters)

1. Throughout the year, the Collaborative Applicant (CA) invites interested community members to join, issuing formal invitations via email and social media at least once annually. The CoC membership forms and related information are posted on the CA website, accessible at all times. Membership forms can be completed online. To encourage membership, the CA uses email, website, social media, public announcements, and newsletters distributed to over 5,000 contacts, as well as community outreach events and direct contact by CoC members. To promote interest in the work and membership in the CoC, the CA facilitates public forums, CoC membership meetings, and educational sessions regarding homelessness and homelessness prevention. All CoC committee, council, and leadership meetings are publicly noticed in advance and open to the public, in adherence with Florida's Sunshine Law.

2. The CoC complies with the Americans with Disabilities Act (ADA) for all meetings and communications. Meeting rooms for CoC-related meetings are ADA compliant. To ensure diverse participation, attendees are asked to inform the CA of any necessary accommodation. Documents are available in accessible electronic formats. Virtual attendees are provided a number/TDD to request accommodations or accessible documents.

3. Members of the CoC's Diversity, Equity and Inclusion Committee and other CoC workgroups include currently and formerly homeless individuals, the Pinellas County Office of Human Rights, domestic violence housing providers, LGBTQ+ advocates, mental health advocates, the InterCultural Advocacy Institute (dba Hispanic Outreach Center), Florida Department of Juvenile Justice, Family Resources youth and LGBTQ+ programs, the NAACP, Area Agency on Aging, Legal Aid Services, and Golden Generations/My Sistah's Place, which serves primarily youth of color, as well as Vincent House, which serves persons with disabilities. These and similar individuals and organizations are invited to serve on other CoC councils and committees, including the Providers' Council and Advocacy Committee. To further encourage diverse involvement, individual CoC members are offered options to pay reduced or complimentary membership fees.

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

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

(limit 2,500 characters)

1. The CA publicly notices and invites all interested parties to participate in meetings and policy making decisions. The CoC structure supports boards, committees, and councils, comprised of subject matter experts, public and nonprofit service providers, local funders, persons with lived experience, disability and victim services advocates, and elected officials. These meetings include: CoC Leadership, Providers and Funders Councils, Executive Committee, Data & System Performance and Diversity, Equity, and Inclusion Committees, Lived Experience Advisory Committee, Youth Action Board, and the Leadership Team to End Veteran Homelessness. More than 85 community members serve on these committees to ensure collaboration, partnerships, resources, and expertise are leveraged to end homelessness. Membership is balanced for CoC area representation to cover the full geography of the continuum, target population, and area of expertise.
2. Public comments, updates and announcements are encouraged and welcomed during all CoC meetings. Agendas are posted and distributed in advance and minutes are recorded at every meeting convened by the CA. Minutes are approved or amended at the next meeting.
3. The CoC complies with the Americans with Disabilities Act (ADA) for all meetings and communications. Meeting rooms for CoC-related meetings are ADA compliant. To ensure diverse participation, attendees are asked to inform the CA of any necessary accommodation. Documents are available in accessible electronic formats. Virtual attendees are provided a number/TDD to request accommodations or accessible documents.
4. All strategic approaches undertaken by the CoC ensure input and feedback from a broad array of organizations. New initiatives and system improvements are discussed in committees or workgroups before being presented to the CoC Board for adoption. CA staff maintain a master spreadsheet that assembles all decisions, tasks identified, and resolutions made with input gathered during all council and committee meetings. The spreadsheet is used to develop future meeting agendas and track decisions/progress/completeness of activities surrounding all facets of homeless services. The CA CEO presented on the state of homelessness to the Council of City Managers and to the local United Way. The Chair of the CoC Board presented the PIT report to the Clearwater City Commission. The CA presented to the community at Foundation for a Healthy St. Pete.

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

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(limit 2,500 characters)

1. The local competition Request for Proposals Instructions included the statement: "[The CA] invites proposals from all eligible entities, including those who have not been awarded HUD CoC funding." Constant Contact was used to announce the local competition to over 5,000 contacts. The application, instructions, timeline, and scoring matrix was also posted on the CA's website and posted on Facebook, Instagram, and Twitter to solicit the widest range of applicants. An Applicant Conference was held to review local competition guidelines and respond to questions. Several agencies not previously awarded funding participated in that conference.
2. The distributed and publicly posted Request for Proposals, along with the Applicant Conference, provided details about the entire process, including the timeline, the application forms, how to submit questions, how to apply, the scoring and ranking tools and process, the appeals process, and e-snaps submissions. This information was communicated through email and social media, as well as on the CA's website.
3. The distributed and publicly posted Request for Proposals, along with the Applicant Conference, included details about the Review and Rank Committee's scoring and ranking processes, the appeal process, and the Scoring Tools for various types of projects.
4. The CA complies with the Americans with Disabilities Act. Individuals are directed to a phone or TTD number to request any accommodation or accessible formats of documents. All meeting rooms are ADA compliant. Additionally, potential applicants were instructed to notify CA staff by email or phone if other accommodations were needed. The local competition Request for Proposals included information on how to request alternative formats or languages.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
2.	select Nonexistent if the organization does not exist within your CoC's geographic area.	

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

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

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

(limit 2,500 characters)

1. The Collaborative Applicant (CA) consults with local ESG recipients in planning and allocating funding during monthly jurisdictional meetings. The CA uses these meetings to present new information from HUD and discuss data trends to identify gaps in services and determine the best possible uses for ESG funding. Additionally, local ESG recipients maintain seats on the CoC Providers' and Funders' Councils, who are responsible for recommending subpopulation and funding priorities to the CoC. In addition, the CA consults with the State of Florida on the planning and allocation of State ESG funding via regular online meetings and emails.

2. CA staff review HMIS data of ESG-funded projects at least once monthly to identify trends, data quality issues, and to monitor project performance. These data reviews are then presented to the CoC's Data and System Performance Committee. CA staff conduct annual evaluations of ESG and ESG-CV funded programs that are contracted through the CA. Results of these evaluations are shared with state and local funders. ESG projects funded through jurisdictions are evaluated annually by the ESG recipients. The CA is consulted by the recipient regarding evaluation tools, HMIS data, Housing First standards, annual training attendance, and CoC participation.

3. The HIC and PIT reports are published on the Collaborative Applicant's website and sent to all stakeholders, including local Consolidated Plan Jurisdictions. In addition, a formal presentation of these reports is presented annually to the CoC, which includes representatives of the local jurisdictions. PIT data is used to develop the annual CoC Gap Analysis submitted to the state and local funders, including Consolidated Plan jurisdictions. All the CoC's entitlement jurisdictions maintain seats on the CoC's Funders Council, which enables consistent collaboration and communication.

4. The CA provides quarterly reviews of CoC data trends, identified gaps in service needs, recommendations for Consolidated Plans, the CoC Gap Analysis, PIT, and Veteran Services reports. The local jurisdictions' Annual Action Plans reflect data and information provided by the CA.

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

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

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

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	No
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

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

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

(limit 2,500 characters)

The CoC has an agreement with the CoC's Local Education Agency, the Pinellas County School District, to prioritize access to education and for students experiencing homelessness. There is a designated seat on the CoC Board for a member of the Pinellas County School Board. The Pinellas County School's Helping Educate All in Transition (HEAT) team supports the educational success of students experiencing homelessness by coordinating school, community, and family services and participating in case conferencing. There is also a HEAT Team representative on the CoC's Providers' Council and the PIT Committee. The CA also partners with the Early Learning Coalition (ELC) to provide after-school childcare subsidies to families in shelter programs, coordinated through a MOU. In collaboration with Pinellas County Schools, the ELC, and Head and Healthy Start, the CA adopted a policy stating these agencies agree to assist in the identification of homeless families and unaccompanied youth. All housing programs ask about children in the household during intake to make appropriate referrals. Parents/Legal Guardians and unaccompanied youth may sign a release of information allowing a provider to speak with the education provider to coordinate services. Housing programs forward this release to education providers to start the process to enroll children in services. In 2015, the CoC adopted a "Enrollment of Children into School or Early Childhood Education" policy. The policy states that all providers working with homeless families will ensure that all preschool and school-aged children in their programs are enrolled in school or early childhood education programs, and that the providers will facilitate their regular attendance and participation to the greatest extent possible. This policy further states that the service providers working with school-aged children and their families will coordinate with the HEAT Team. This ensures a strategic, system-wide response to educate homeless children and unaccompanied youth, as required by the McKinney-Vento Act. The CoC Written Standards also require all housing projects to include information about client rights and access to public education in their intake procedures. Additionally, the CoC's Coordinated Entry Policies and Procedures require all participant advocates, including the Pinellas County School System, to be included in case conferencing for children/youth.

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

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

(limit 2,500 characters)

The CoC policy “Enrollment of Children into School or Early Childhood Education” requires all CoC shelter and housing providers to ensure all preschool and school age homeless children in their programs are enrolled in school or early childhood education programs. It also requires providers to facilitate regular attendance and participation by the children in their education programs. This policy states providers working with school age children and their families will coordinate with the Pinellas County Schools Helping Educate All in Transition (HEAT) staff to ensure that the McKinney-Vento Act (MVA) rights and services are provided to these children in accordance with federal law and school board policy. Providers cannot refuse to provide housing services because of a family’s choice to not utilize HEAT services. During intakes, providers must gather information including the grade level of children, school the children are attending or last attended, transportation method to get to and from schools, needs to participate in school appropriately, referral to HEAT team, and school- based services needed. Providers may forward a release of information to school districts/early childhood education providers to assist in enrollment in education services. Providers are responsible for notifying families that children will attend their school of origin or zoned school per MVA, in coordination with school district/early education program policies. Providers are responsible for educating households of their MVA rights and available services to ensure barriers such as enrollment delays caused by immunization and medical requirements, residency requirements, lack of birth certificates, or other documentation are eliminated in accordance with federal law and school board policy. To increase parental engagement, shelters and housing programs allow households flexibility in participating in school related activities. The Collaborative Applicant also maintains an MOU with the Early Learning Coalition of Pinellas County and collaborates with the Florida Department of Children and Families to ensure preschool age children are enrolled in school readiness services and childcare. Case managers are trained to complete referrals for school readiness services and connection to the Early Learning Coalition for school readiness and childcare resources.

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

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

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

9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

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

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

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

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

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

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

(limit 2,500 characters)

1. The CoC collaborated with Victim Services Providers and federally funded DV programs to update Coordinated Entry policies and procedures in 2022. Changes included new safety planning and risk assessment for domestic violence (DV) survivors, new Coordinated Entry access points for survivors, emergency transfer plans for housing safety issues, and procedures for making referrals for survivor services and assistance. The CoC written standards encompass system-wide coordination requirements to including integration with programs for DV survivors. The written standards include safeguards to meet the safety and shelter needs of survivors and are updated annually, most recently in May 2023. The CoC's HMIS policies and procedures, updated in March 2023, prohibit entering protected personal information into HMIS, specifically related to survivors.

2. The CA works closely with DV providers to ensure that policies, procedures, and monitoring processes are geared to meeting the needs of survivors with trauma-informed care. In June 2023, the CA conducted a monitoring of HUD CoC-funded projects, including case files and policies, to assess whether services and housing are trauma-informed and meeting the needs of survivors, along with general project monitoring. The CA also provides annual monitoring of ESG-funded projects to ensure providers are conducting trauma-informed practices and following CoC policies and procedures when working with survivors. Monitoring includes a review of case plans, case management documentation, staff training logs, leases, and project participant agreements.

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

(limit 2,500 characters)

1. The Collaborative Applicant (CA) ensures all CoC providers receive annual training that addresses best practices in serving survivors of domestic and dating violence (DV), sexual assault, and stalking. Both state certified DV centers in the CoC offer information and provide education to help professionals recognize the warning signs of domestic abuse and to facilitate discussions about having sensitivity to the needs of survivors. All DV training utilizes empowerment-based, trauma-informed, hope-centered, and solution-focused techniques. The CA coordinates annual trainings provided by a local DV provider that are offered to all CoC providers and shared through the newsletter. These courses are mandatory for all CoC and ESG funded projects. All CoC providers are connected to DV educational services through the Providers Council, as well as the CoC's Diversity, Equity, and Inclusion and Data and System Performance Committees.

2. Coordinated Entry staff also receive trauma-informed care, motivational interviewing, and cultural diversity training. Coordinated Entry holds a cross of office hours and training quarterly throughout the year and is open to all agencies to address unique population needs, including how to access services and prioritize safety of DV survivors.

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

(limit 2,500 characters)

1. The CoC partners with local victim service agencies to ensure that training for relevant staff is provided by informed experts on domestic violence (DV), dating violence, sexual assault, stalking, and human trafficking. All CE staff are trained in the complex dynamics of domestic violence, privacy and confidentiality, and safety planning, including handling emergency situations at an access point, whether a physical or virtual location. Victim service providers within the CoC utilize the same CE Assessment to ensure the coordinated entry process addresses the participants' physical and emotional safety and confidentiality needs. The CoC has two designated access points, CASA and The Haven, to ensure safe access to homeless resources. Other providers are knowledgeable of these access points and procedures to connect survivors safely and confidentially. The CA and CASA created a CE referral system for DV survivors to ensure safe and confidential CE transfers between us. All DV policies for safety, planning and confidentiality are outlined in the CE Policies and Procedures, which also include a DV Emergency Transfer Plan. The CoC works closely with DV providers to ensure that policies and procedures are accurate and appropriate for survivors. All policies and procedures are approved by the CoC Provider's Council, which has representation from both state-certified DV centers in the CoC, as well as the Board of Directors, before going into effect.

2. Organizations whose primary mission is to provide services to victims of domestic violence, dating violence or stalking are unable to enter Protected Personal Information (PPI) into HMIS. If a participant first enters the CE system without identifying history or current episode of DV and is entered into HMIS, but then presents with that information after, the HMIS System Administrator will immediately lock the client profile to protect client information and will be removed from the public facing Prioritization Lists. Consenting clients will be referred to a DV provider utilizing the confidential referral system created by the HLA and CASA. A protected online referral form that contains minimal client information, such as name and CE assessment score is sent via encryption to CASA so the client can be enrolled in their CE system. After referral, the client can sign a Release of Information with CASA to be able to gather more information from the CE system.

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

(limit 2,500 characters)

1. The two state-certified domestic violence (DV) centers in the Pinellas County CoC use the Osnium database, which is administered by the Florida Department of Children and Families, to manage data. Osnium is an HMIS-comparable database consistent with HMIS Data and Technical Standards and meets the HUD reporting requirements. The database is equipped with the ESG CAPER and APR reports exportable in CSV format for uploading to the SAGE portal. De-identified, aggregate data includes demographics, income, and employment status. Though not using the software, DV staff attend HMIS training for housing providers, to gain a better understanding of the reports, to ensure quality of the data and to better understand the data needs of the CoC.

2. DV-related data is regularly reviewed in the CoC's Data and System Performance subcommittee, which is responsible for designing the performance outcome and evaluation system, reviewing performance reports on consumer data, identifying areas needing improvement and monitoring outcomes. DV providers are also monitored annually by the Collaborative Applicant, utilizing the same standards used for other providers, including review of the APR generated by the comparable database. The APR is reviewed during project renewal process and by the Review and Rank Committee to determine funding decisions. Staff at each of the DV centers are experts in reviewing Osnium data and working with survivors of DV to identify household needs and suitable community resources and provide empowerment and advocacy while maintaining strict confidentiality. Using this data, Coordinated Entry staff meet monthly with DV providers to review the needs of DV survivors waiting for housing assistance. During these meetings, survivors are prioritized based on their VI-SPDAT score and safety issues.

** nbsp;**

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
1.	whether your CoC has policies and procedures that include an emergency transfer plan;	
2.	the process for individuals and families to request an emergency transfer; and	
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.	

(limit 2,500 characters)

1. The CoC has drafted an Emergency Transfer Plan in partnership with CASA, the CoCs local DV provider, that contains language from the model Emergency Transfer Plan from HUD and CoC specific impacting information. The Emergency Transfer Plan will go to the Providers Council and CoC Board before 2024. Once approved the Emergency Transfer Plan will be incorporated in the CE Policies and Procedures.

2. Though the CoC has not formally implemented an Emergency Transfer Plan, providers within the CoC have their own policies and procedures. Providers notify individual and families at program entry of their policies and procedures should they experience a DV incident and need an emergency transfer. Notification is in writing with program intake information.

3. The first step is to encourage the tenant to contact the DV crisis hotline, either local or national, to get safety planning and other wrap-around services specific to safety. That way, too, the tenant and advocate can decide if transfer to emergency shelter, if there is an opening, is even more appropriate. A written request should then be provided to the participants case manager so the provider can inquire about shelter or hold an emergency case conferencing if there is no immediate unit availability. Housing providers in the CoC work together to identify safe and available units and share resources to do so. CASA also has attorneys who can help with injunctions for protection if the case qualifies, and other legal partners at the CoCs Family Justice Center.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and	
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.	

(limit 2,500 characters)

1. The CoC has specialized DV access points at CASA, located in the southern region of the CoC, and Hope Villages of America's Haven, located in the northern region of the CoC, to ensure survivors of DV receive appropriate housing and supportive services. These DV providers conduct the initial CE Assessment to determine acuity for housing program prioritization and immediate needs. If a participant needs the confidential nature of DV services, they continue to work with the agency. If they do not require DV-specific services, the consenting household will be referred to the CoC lead agency through a confidential referral process to be placed on the Prioritization List. If a client or household is a victim of domestic violence and presents for intake at a non-victim service provider, they will be connected to homeless shelters and housing options that are best equipped to serve survivors of DV and their children based on their location, program model, and linkages to other supportive services. The CE system includes two domestic violence hotlines that are operated 24 hours a day, seven days a week. Hotlines provide an initial lethality assessment, followed by linkage to support services and proper housing interventions. Though CASA is the only DV provider in the CoC that offers housing projects, the Haven and CASA have a strong working relationship to ensure that if a survivor presents to the Haven, there is a quick, confidential, and safe referral process for CASA housing programs. The CA and CASA have also developed a confidential referral process through CE for consenting households should they enter at a non-DV access point and receive mainstream services initially. A monthly meeting is held with the CE Manager and CASA Housing Program Supervisor to ensure that referrals were completed, and a housing plan is in process for all households.

2. Both the Providers Council and the CoC Board has a member who is a survivor of DV and is also the CEO of CASA, therefore this member brings forth any identified systemic barriers for these Councils to overcome. All housing agencies, including CASA, request verbal feedback and written, anonymous feedback, upon program exit, which is brought forth the CoC when systemic barriers are identified, which shape CoC policy. The Data & System Performance Committee also reviews performance metrics in DV programs to analyze data such as length of time homeless and time to housing placement.

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

(limit 2,500 characters)

1. The CoC has members with Lived Experience on a variety of CoC councils, committees and boards driving policies and enhancing programmatic structure in the CoC. The make of up these members are also part of sub populations, such as living with a physical or mental disability, survivors of DV, Veterans, and the LGBTQIA+ community. The CoC also started the Lived Experience Advisory Committee, where the first three meetings were held as interest meetings throughout the CoC and had extremely diverse turnout and interest in CoC membership. The meetings were marketed in a way to bring people who had lived experience, were currently unhoused, were chronically homeless, were Veterans and more so that representation from all communities could attend. The meetings focused on CoC goals, barriers, and needs of PLE which is relayed back to the Board. Once the Committee is formally established, they will have joint meetings across all councils, committees and Boards.
2. The CoC maintains a strong partnership with both agencies in the CoC serving survivors of DV and has representation across all committees, councils and boards providing input directly for survivors, including those with lived experience.

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

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

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

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

(limit 2,500 characters)

1. The CoC updates its anti-discrimination policies and procedures annually and regularly reviews CoC inclusion policies and procedures for potential gaps. The Diversity Equity and Inclusion (DEI) Committee is responsible for spearheading these efforts. Members of the DEI Committee include LGBTQIA+ advocates, representatives of diverse races, local leaders, and individuals with a lived experience of homelessness; all of these members advise the committee on potential gaps, ensuring that programs and services are equitable and do not retraumatize survivors and those enrolled in the crisis-response system. Changes to policies and procedures are vetted with the CoC and approved by the CoC Board.

2. The DEI Committee is responsible for assisting providers in developing project-level anti-discrimination policies, consistent with CoC-wide policies and procedures. DEI meetings are open to the public and offer quarterly technical assistance sessions on inclusion policies and procedures to all providers. All policies are presented to and approved by the CoC's larger Board of Directors before implementation.

3. The Collaborative Applicant (CA) conducts annual reviews of CoC and ESG-funded projects' inclusion policies and procedures during regular monitoring, ensuring that projects adhere to local and federal anti-discrimination laws and policies.

4. If gaps are found during these reviews, immediate technical assistance is provided by the CA. These issues are also brought to DEI so they may be used to help strengthen CoC policies. In addition, evidence or complaints of noncompliance may be reported to the CA. The CA conducts a review of the reported situation, policies and procedures, and recommends a course of action. The CEO of the CA and the involved provider organization are notified prior to reviews being conducted; the CoC's Executive Committee may also be notified depending on the severity of the report. This course of action may include notifying local funders if a corrective action plan must be enacted for CoC or ESG-funded projects. Corrective action plans are monitored by the CoC's Data and System Performance Committee. Any project placed on a Corrective Action plan during a fiscal year will lose points on their renewal or new applications for CoC funding.

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Pinellas County Housing Authority	25%	Yes-Both	No
St. Petersburg Housing Authority	21%	Yes-Both	No

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

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

(limit 2,500 characters)

1. The largest and second largest PHAs in the Continuum of Care (CoC) - Pinellas County Housing Authority (PCHA) and St. Petersburg Housing Authority (SPHA), respectively - have a long demonstrated and successful history of utilizing a homeless admission preference and showing a willingness to collaborate with the CoC. Currently, the Chief Executive Officers (CEOs) of the PCHA and SPHA are voting members of the CoC's Board of Directors. Over the past two years, both agencies worked with the Collaborative Applicant (CA) to implement a standardized referral process for Mainstream and Emergency Housing Voucher (EHV) programs. For both programs, a Memorandum of Understanding (MOU) was formalized to outline the procedures and responsibilities of the PHA and CA. PHAs also drafted policies for these programs, which were approved by the CEOs and presented to their respective boards for approval; these policies are still actively in place. For both programs, a standardized referral process through the Coordinated Entry system was created for all allotted vouchers in CoC. This plan was successfully executed and remains in place currently for any vouchers that returned to the CoC. The CoC and PHAs identified agencies serving homeless households through Emergency Shelter, Rapid Rehousing, Permanent Supportive Housing, and Eviction Diversion programs to ensure those with homeless history were prioritized for admission. The PHAs have committed to continuing to work with the CoC to develop a prioritization plan for those with the highest service needs, pairing Stability Vouchers with CoC-funded supportive services through the Coordinated Entry process.

2. Not applicable.

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	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

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

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

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

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

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

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

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

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

PHA
Pinellas County H...
St. Petersburg Ho...
Clearwater Housin...

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

Name of PHA: Pinellas County Housing Authority

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

Name of PHA: St. Petersburg Housing Authority

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

Name of PHA: Clearwater Housing Authority

1D. Coordination and Engagement Cont'd

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

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

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	15
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	15
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

1. The Continuum of Care (CoC) has a requirement that a Housing First/Low Barrier Survey be included in applications for all local private, public, HUD, and ESG funding opportunities to assist in the documentation of an organization's fidelity to the Housing First approach. This fidelity is assessed as a factor in the review and rank of applications for HUD funding. Prior to submitting applications to the Review and Rank Committee, Collaborative Applicant staff review the questionnaire and compare the responses to the organization's most recent monitoring results. Discrepancies are noted on the Review and Rank scoring matrix.

2. The Housing First/Low Barrier survey includes more than 20 factors to assess whether programs ensure rapid placement and stabilization in permanent housing and verifies that services are optional and offered without any preconditions. Examples of these factors include but are not limited to whether people are barred program entry based on criminal history, whether drug and/or alcohol testing is done, whether behavioral health "compliance" is required, whether income is required, and whether participation in services is required. The survey provides a narrative section to describe any challenges that prevent the project from implementing Housing First, which the Collaborative Applicant uses to design technical assistance for the project applicant.

3. Housing First evaluations are conducted annually through an administrative review of policies and procedures for all CoC and ESG funded projects. During regular monitoring, client file evaluations are conducted with reviews of housing plans, case management documentation, and intake paperwork. Through this evaluation, the Collaborative Applicant can identify programs who may have Housing First barriers, offering technical assistance to ensure compliance with the CoC's Housing First policy. Additionally, the CoC's Coordinated Entry policies ensure the assessment, referral, navigation, and diversion processes uphold best practices in Housing First. All projects participating in Coordinated Entry are trained in Housing First requirements and technical assistance is provided by the CA when appropriate. Furthermore, all organizations applying to join as a CoC member are asked to self-certify that they use housing first approaches, regardless of whether they apply for funding.

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

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

4. how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

1. The CoC has several outreach teams, using a variety of ways to ensure all people are engaged, such as utilizing homeless outreach officers as support, using physical locations like day centers and libraries, partnering with social service agencies, operating phone lines and traditional methods of on foot outreach. SO teams are trained in diversion and use motivational interviewing and trauma-informed care practices. SO teams utilize a standardized triage assessment tool to make informed objective decision regarding the type of crisis intervention needed to address immediate needs for safety through housing and/or shelter. Additionally, the Healthcare for the Homeless Street Outreach Medical Team and Mobile Medical Unit provide access to medical care and assistance enrolling in the Pinellas County Healthcare for the Homeless Program, operating on the street and at shelters and resource centers.
2. The CoC's SO covers 100% of the geographical area, excluding gated communities and private beaches. Targeted SO work with jurisdictions and use heat maps to target areas of the CoC with the highest counts of unsheltered homelessness. SO teams also use the CE Prioritization List to identify people in special populations to provide outreach no matter their location.
3. Targeted SO staff work full-time, although their hours vary, Monday through Friday. Many police departments also have Homeless Outreach Officers that work Saturday and Sunday.
4. SO teams make repeated contact with individuals to develop rapport. They assess, address basic needs, provide linkage to services, follow up, track and advocate, and encourage connections to permanent housing options. SO Teams are encouraged to utilize community partners and resources. The CoC has SO teams focusing solely on special populations such as mental health, chronic, youth, Veterans, and seniors to engage those most difficult to reach. Two beach jurisdictions are piloting the use of emergency medical services paired with SO to target those with the most severe needs. PSTA, the local bus transportation service, is piloting a SO program to identify persons experiencing homelessness that might not otherwise be located and move around the county. SO partners with law enforcement who are also able to be available at untraditional hours. So works with mental health providers, the court system and senior service officers to target those populations. The Street Medicine and Mobile Medical Teams also support SO.

1D-4. Strategies to Prevent Criminalization of Homelessness.

NOFO Section V.B.1.k.

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No

3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		
	Jail diversion program	Yes	Yes

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	636	667

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

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	
	The value of Mainstream Benefits is discussed in other trainings, such as DV and ACE training	Yes

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1. The CA offers CoC-wide annual training through the Florida Department of Children and Families (DCF) on mainstream benefits and assisting persons experiencing or at-risk of homelessness in applying for aid. CA staff attend DCF meetings for updates on mainstream benefits, including SNAP, TANF, and Medicaid. Each CoC provider has (a) benefits expert(s) on staff who stay current on benefit criteria and is responsible for staff training.

2. The CoC collaborates with healthcare organizations including the Health Care for the Homeless Program (HCH), EVARA (FQHC), and several hospitals, crisis stabilization units, and treatment facilities. HCH provides primary care and specialty care that includes dental, substance use, mental health, prevention, and more to over 2,000 homeless individuals annually. HCH uses a mobile medical unit that visits multiple CoC shelters and drop-in sites on weekdays, a Street Medicine team targeting encampments, and a clinic offering primary and dental care 6 days a week. HCH employs a Certified Application Counselor (CAC) to help patients obtain coverage. CACs are certified to provide information to consumers about qualified health plans (QHP) and insurance affordability programs; they also help consumers apply for coverage in a QHP and insurance affordability programs. When patients inquire about service eligibility, staff assess the individual's situation and educate consumers about coverage options, such as QHPs through the Exchange and other local, state, and federal programs. Once the consumer's needs and eligibility factors are determined, staff assist the consumer with the application process. Additionally, project staff are made aware of services such as the Mobile Crisis Response Team provided by Personal Enrichment Through Mental Health Services (PEMHS) and the suicide prevention hotline managed by 211 Tampa Bay Cares. Project staff provide this information to clients. This and similar information is publicly available through the Pinellas County Homeless Resource Guide, published annually by the CoC's lead agency.

3. The CA offers CoC-wide annual SOAR training. The CoC also has a contracted provider that engages homeless individuals or individuals at risk of homelessness who have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder that would qualify for SSI/SSDI. That provider assists eligible individuals apply for SSI/SSDI benefits utilizing the SOAR model.

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

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

(limit 2,500 characters)

The CoC has one main provider for non-congregate shelter programs, St. Vincent de Paul (SVdP). The CoC currently has 57 non-congregate shelter rooms all for families with minor children, not including those for Veterans under Supportive Services for Veteran Families (SSVF) assistance, providing over 200 beds a night for family households. Since January 2023, 200+ households have been placed in non-congregate shelter. The SSVF program provides NCS for Veterans in need of alternative shelter opinions if they have a viable housing plan, up to 40 households. The use of Covid 19 dollars has been extremely instrumental in obtaining non-congregate shelter beds and continues to do. Several municipalities, a quasi-governmental non-profit and private community foundation have dedicated these funds to the creation of beds and are making strategic and consolidated plans to keep these initiatives going after Covid 19 dollars end. Currently, families are prioritized for NCS using the Family Shelter Assessment. The assessment prioritizes families based on disabilities, ages of children, and medical complexities to determine the household's level of immediate shelter needs. The assessment was collaboratively created with input from local funders and providers and is completed in HMIS. This Shelter Prioritization List helps the CoC have a finite understanding of the need for shelter beyond what the CoC currently has capacity for, and data from this initiative has helped increase funding for non-congregate shelter. SVdP works closely with municipalities and other agencies communicating the need and increase of costs, and maintains close relationships to apply for more funding. The concerns of lack of capacity in brick and mortar shelters are often relayed to and addressed in joint Funders Council and Providers Council meetings.

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

(limit 2,500 characters)

1. Comprehensive Emergency Management Plans are updated annually by providers, and the CoC utilizes Written Standards, which were formally adopted in 2021 and have since been updated. The CoC works with the Department of Health in Pinellas County (DOH), Pinellas County Emergency Management, and Pinellas County Human Services to update its infectious disease policies and procedures. The DOH is the lead emergency management response agency for public health outbreaks, and its Epidemiology Department monitors potential outbreaks in the CoC. Updates to policies, procedures, and best practices are communicated to CoC providers through a monthly newsletter and in various standing meetings. If appropriate, the CoC hosts meetings or trainings to ensure that providers are aware of infectious disease policies and procedures.

2. The CoC has communication protocols with homeless and healthcare providers to help prevent infectious disease outbreaks amongst people experiencing homelessness in Pinellas County. Information about infectious disease outbreaks, prevention/mitigation, and available services is shared with providers through a monthly newsletter. Urgent updates are also shared through email and – when necessary – in meetings hosted by the CoC. If needed during an outbreak, the CoC is also prepared to host daily or weekly virtual meetings to ensure all providers are up to date. The Health Care for the Homeless (HCH) Program provides vaccines, testing, personal protective equipment (PPE), and other care to vulnerable populations at their clinic, at multiple service providers throughout the county, and on the street. Providers also work with the DOH to ensure their agency's safety protocols follow the DOH's recommendations, including increasing space between shelter beds to allow for social distancing and implementing isolation protocols when necessary. Additionally, the CoC in collaboration with the DOH and other healthcare agencies provide PPE to providers – including Street Outreach teams, Emergency Shelters, pantries, resource centers – so that both clients and employees may follow safety procedures. The CoC's lead agency also provides updates to the general public through email, their social media and website, and through direct contact with clients.

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

(limit 2,500 characters)

1. Communication between healthcare, street outreach, shelter, and housing providers increased during COVID-19 and these communication efforts have continued. Effective communication is vital to ensuring that providers are equipped to prevent and limit infectious disease outbreaks. As such, information is shared via emails, newsletters, meetings, trainings, pamphlets, and written policies and procedures. Through collaboration between the Health Department, Emergency Management, and CoC leadership, providers receive frequent updates regarding best practices, current and potential outbreaks, and vaccine and testing availability. To ensure this important information reaches people experiencing homelessness, street outreach teams and shelter and housing providers regularly distribute educational pamphlets, vaccine and testing information, PPE, and other necessities. In addition, new information, resources, and best practices are shared and implemented as available.

2. The CoC facilitates communication between healthcare professionals and CoC member organizations including the Health Department, Emergency Management, Human Services, shelter and housing providers, street outreach teams, other service providers and the public. Since the start of the COVID-19 pandemic, these efforts have improved and continued. The Health Department adheres to its Emergency Operations Plan (EOP), which provides an all-hazards approach to managing emergencies, outlining roles and responsibilities necessary to prepare, respond, and mitigate negative impacts to the public. One such plan is the Communicable Disease Plan, in which the Health Department must lead efforts to prevent a countywide infectious disease outbreak or emergency. The Health Department's Department of Epidemiology works with Infection Control Practitioners, laboratories, and private medical providers and is charged with ensuring that disease testing and reporting complies with all requirements. The CoC works alongside the Department of Epidemiology to communicate official information with providers, clients, and the public as needed. Information is shared via the CoC's Written Standards, CoC Councils, Committees, and membership meetings, and email, social media, monthly newsletters, Emergency Management alerts, and trainings hosted by the Health Department. These methods of communication reach hundreds of thousands of Pinellas County service providers and residents.

1D-9.	Centralized or Coordinated Entry System—Assessment Process.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	covers 100 percent of your CoC's geographic area;	
2.	uses a standardized assessment process; and	
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 characters)

1. The Coordinated Entry System covers 100% of the CoC's geographic area through emergency shelter, street outreach, Family and Veteran Navigation service, and service center access points, excluding gated communities and private beaches.

2. The CoC utilizes the VI-SPDAT as the standardized assessment tool. Individuals entering emergency shelters are assessed within 72 hours if they have HMIS history within the last 6 months or are assessed after 10 days if they have not been entered into HMIS for 7 months or longer. If the individual appears to have severe service needs, the assessor has discretion to assess immediately. Individuals who encounter Street Outreach are assessed on their third interaction to allow for self-resolution or connection with diversion services unless the client appears to have severe service needs, whereas families are assessed on the first encounter. Families in need of emergency shelter that have not encountered Street Outreach will contact 211 and will be assessed for the Family Shelter Prioritization List. For families, 211 will schedule a VI-FSPDAT with the HLA Community Navigator within 3 business days, regardless of HMIS history, if they do not already have one completed within the last 90 days. The CoC also created a Mobility Policy to ensure that if there is a change in client service need, providers can submit requests for appropriate interventions for which clients are prioritized.

3. Since 2021, the CoC has been convening a Coordinated Entry Assessment Workgroup with community providers from various professional backgrounds and persons with lived experience to create a fair and equitable CE assessment. A private consultant was hired to do an equitable review of prioritization assessment tools around the country to inform our work on a new assessment. A new assessment was piloted but did not ultimately meet the needs of our community. The workgroup continues to meet, and work is still being done towards a new CE assessment which will be tailored uniquely to our community and its needs. The CoC has a target goal of releasing a pilot assessment by the middle of 2024.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
	1. reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
	2. prioritizes people most in need of assistance;	
	3. ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
	4. takes steps to reduce burdens on people using coordinated entry.	

(limit 2,500 characters)

1. Two EMS teams have partnered with a major mental health provider to provide outreach to those with the highest and continuous needs, paving the way for other emergency service teams who cannot provide care for the highest needs and reduce emergency service calls. The same provider is also piloting a program with PSTA, the local public transportation provider, at a major transit location to conduct outreach and connect individuals to stable housing. A CoC agency specializing in unaccompanied youth and minors maintains a dedicated SO team. SO uses heat maps created from the 2023 PIT count to target exact locations with high counts of unsheltered homelessness, reaching those who would not present at emergency shelters or call local 211. The local VA also conducts community outreach at local drop-in centers to target unsheltered homeless Veterans. All programs are trained to do the CE assessment and enter into HMIS.
2. Once a person has been assessed, they are placed on the respective Prioritization List (Families, Adult Only Households or Veterans), and are prioritized by assessment score and tiebreakers. The CoC tiebreakers are sections D, B, and C of the VI-SPDAT as well as chronicity, Veteran status, and length of time homeless. Case Conferencing is held monthly for families and adult only households and weekly for Veterans enrolled in CE. Case Conferencing is where providers can provide more information for prioritization.
3. Housing projects notify the CE Manager when there is capacity for new referrals and are made within 48 hours in HMIS. The CE Manager refers to housing programs based on the level of care needed and match to specific program supports. Clients are notified of options for housing assistance and can choose a program best suited for their needs. In 2024, the CoC will move to a referral "push out" system, using HMIS to establish housing capacity, rather than the current "pull in" system. This is being piloted with the SSVF RRH program and another family RRH program.
4. All providers are trained in CE and each access point has a knowledgeable person to explain CE to clients. Case managers are trained to rephrase VI-SPDAT questions using accessible user-friendly language. The CoC is currently working towards a new CE assessment and has an active Workgroup that includes community providers from various backgrounds, including PLE. We also created system flows that follow a decision tree template to simplify the system.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

1. The CoC affirmatively markets housing and services within the CoC's geographic area and ensures it reaches all persons experiencing homelessness regardless of membership in a protected class, unsheltered/sheltered status, or likelihood of applying for assistance. CE is marketed through the CoC's website and all social media accounts. All access points provide an overview of CE. Each project participating in CE provide an electronic or printed copy of a CE one pager provided by the CoC. Other homeless services agencies are encouraged to provide the one pager in the agency waiting areas and other areas where participants congregate or receive services. A staff member at each access point is knowledgeable of CE so they can be utilized as a resource for clients and other staff. An agency can request a CE presentation for their staff or clients by contacting the CE Manager. For non-English speaking households, local translation services and centers are available to help with CE intake and assessment.

2. The CE process is available to all program participants and does not discriminate or prioritize households for housing and services based on race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. The CE referral process is informed by federal, state, and local laws and regulations and ensures participants are not "steered" toward any housing facility or neighborhood. This nondiscrimination policy is extended to all agencies that participate in CE. The CoC CA's CE Navigation teams and housing providers provide all program participants with information, in writing, on their rights and remedies under applicable federal, state, and local fair housing and civil rights laws. Rights and remedies are provided immediately upon working with any program participant. To ensure effective communication, CE staff provide reasonable accommodation and modifications of this information as necessary.

3. All program participants have the right to file a nondiscrimination complaint with the system's Coordinated Entry Manager. Complaints will be reviewed by the CE Manager, Director of CoC Strategy and Performance and the CoC's CA CEO. If the issue is unable to be resolved by CA staff, the issue will be elevated to the CoC Grievance Committee. Failure to comply results in a monitoring finding, which may affect scoring and ranking in local funding competitions.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	03/01/2021

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

Describe in the field below:

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

(limit 2,500 characters)

1. The Diversity, Equity, and Inclusion Committee (DEI) executed the research process for the 2021 Racial Disparities Study, with a mixed-method analysis of quantitative data from HMIS, PIT, Pinellas County Sheriff's Office, and City of St. Petersburg, as well as qualitative data obtained through focus groups and one-on-one interviews with unsheltered Black individuals. The study recommendations were to increase the number of people with lived experience, reflective of the makeup of the CoC's unsheltered population that drive the work of the CoC. In turn, the CoC instituted a tracking process to ensure this goal is met. Currently, 15% of the Collaborative Applicant's (CA) board, councils, and committees have lived experience while 17% of the CoC Board have lived experience; further, 31% of the CoC Board of Directors are Black. The CoC established contracts to oversee the development of a new, equitable Coordinated Entry (CE) assessment focusing on CE policies and procedures to support a reduction in racial disparities in the system. From analysis, the CoC started a quarterly data review by DEI of CE By-Name List, CoC inflow and outflow, returns to homelessness and RRH/PSH move-in and exits to account for systemic race inequities and to plan for equitable access for all people regardless of color. This data is extracted from HMIS through customized reports using WellSky's reporting system and submitted into Tableau software to create data visualizations. This quarterly data is compared annually to HUD's Race Equity Tool and PIT data.
2. The 2023 PIT and HIC showed that though more individuals in Pinellas County's Emergency Shelters identify as Black/African American than White, more individuals identifying as White reside in Pinellas County's TH and SH programs. Data also shows that families in Pinellas County Emergency Shelters are significantly more likely to identify as Black/African American than White, but an even number of families identify as Black/African American and White reside in Transitional Housing programs. Similarly, data from Pinellas County Schools showed that the vast majority of students experiencing homelessness identify as Black/African American. This information has been and continues to be reviewed and utilized by the CoC's Board; Data and System Performance Committee; Diversity, Equity and Inclusion Committee; and other critical workgroups to ensure that racial disparities in overall homelessness and in system flow are addressed

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

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes

4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

The Diversity, Equity, and Inclusion (DEI) Committee oversees the CoC's strategies to address disparities and is guided by the CoC's strategic plan based on the 2021 racial disparities study. Strategic goals completed last fiscal year to address disparities include: a CoC Bullying Policy; Race and LGBTQIA+ Shared Glossary; 21-Day Race Equity Challenge; increased training for bias, race equity, and inclusion; CoC BOD approval to seek funding for individuals with lived experience; equity review of CE policies equity; and a system-wide workgroup to create a new CoC CE assessments to replace VI-SPDAT. Over the last three years, the CoC Board increased its BIPOC representation from 4% to 31%, with board recruitment expanding to different community systems to include health, business, civil rights organizations, faith-based council, and ex-offender reentry.

The Diversity, Equity and Inclusion Committee created a Workplan at the end of 2021 that was worked through in 2022. The Workplan included creating a list of CoC trainings and a guide to local trainers for the CoC, enhancing CoC policies such as recommendations for staff advancement and addressing language barriers, sharing the toolkit for agencies to recommend ways to enhance diversity, guides for other CoC committees and councils to enhance membership diversity, and creating system evaluation standards. The efforts from the workplan addressed disparities identified in all corners of the CoC and provided guidance for CoC partners to improve their own internal barriers in addressing racial disparity. The CoC has also been using data on diversity to drive mapping the crisis response system which has simplified the system and address gaps in populations who have not previously been served by the homeless system at the same rate they are experiencing homelessness.

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

(limit 2,500 characters)

1. The Data, Equity, and Inclusion Committee (DEI) oversees a quarterly review of CoC inflow and outflow, along with return to homelessness data from HMIS, to assess for systemic racialized inequities. All CoC data reviews utilize a breakout analysis by race, gender, age, and ethnicity. DEI conducts biannual meetings with the CoC's Data and System Performance Committee (DSP) to review analysis for HUD System Performance Measures, CoC Benchmarks, and CE By Name List data. This data is compared to the HUD Race Equity Toolkit annually. The findings are shared with DSP and the CoC Board to help advise funding prioritization decisions. The CoC used data collected from HMIS, 211, Unite Pinellas, and United Way ALICE report to identify zip codes within the CoC with the highest counts of poverty, unemployment, and requests for rent, housing, and utility assistance. This data was used to identify those most in need of Emergency Housing Vouchers, prioritizing the unsheltered and limiting applicants to those earning less than 30% AMI. Additionally, the CoC monitors the location of those experiencing homelessness through the PIT Count. In addition to geographic data from PIT, the CoC reviews demographic data to identify which communities interact with the homeless services system. A race equity narrative is a part of all CoC and ESG funding applications. The narrative asks applicants to describe the steps their organization has taken to secure a commitment to race equity from their stakeholders. It also asks how the organization adopted a race equity approach in their policies and procedures and how they created an informal, equitable, inclusive environment for the staff and communities they serve. Additionally, members of the Funders' Council adopted a policy to ask organizations applying for local funding about their race equity initiatives. DEI conducts a blind review of these responses to identify technical assistance (TA) needed and offers TA quarterly.

2. The CoC uses various methods to track progress on preventing and eliminating racial disparities, as described in #1 above. The primary tools utilized include data on CoC inflow and outflow, the HUD Race Equity Toolkit, and analysis of HMIS, PIT, and related data by race and ethnicity.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC's Outreach Efforts.	
	NOFO Section V.B.1.r.	
	Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.	

(limit 2,500 characters)

The CoC's Lived Experience Advisory Committee (LEAC) began meeting in 2023. This committee includes individuals who have experienced homelessness in Pinellas County within the last seven years, and its purpose is to ensure that people who have experienced or are experiencing homelessness are actively involved in the CoC's decision-making process. The CoC's Youth Action Board (YAB) – which includes youths aged 24 and younger who have experienced homelessness in Pinellas County within the last seven years – has also met with plans to formalize their work in 2024. LEAC meetings take place monthly in various locations throughout the county to ensure maximum participation; YAB meetings will follow suit. These meetings are promoted through flyers shared with and by homeless service providers, social media, email, and word of mouth; LEAC members also actively engage in committee recruitment. Additionally, the CoC encourages individuals who have experienced homelessness to join the CoC as Lived Experience Members; dues for this membership are \$0 annually to allow low-income individuals to participate in CoC membership events, committees, and boards. To encourage consistent engagement, CoC members experiencing homelessness receive stipends for meeting participation. Lived Experience Members have full voting privileges and are encouraged to hold active roles within the CoC. In fact, the CoC's Board of Directors has two seats reserved for individuals with lived experiences of homelessness. Currently, there are 15 CoC members who have self-reported experiences of homelessness, many of whom are engaged in the CoC's board, councils, and committees. To recruit CoC members with a lived homeless experience, the CoC relies on social media, community outreach, meetings and workgroups, and its members and partners. To engage prospective members, the CA and CoC prioritize a trusting, open, and safe environment. To create this environment on social media, the CA regularly shares important community resources and news with over 4,500 followers and in relevant groups with hundreds of thousands of members. These channels are then used for calls to join the CoC, workgroups, and meetings. Similarly, the CA attends community resource events geared towards helping those experiencing or at risk of homelessness.

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

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	0	2
2.	Participate on CoC committees, subcommittees, or workgroups.	15	10
3.	Included in the development or revision of your CoC's local competition rating factors.	0	0
4.	Included in the development or revision of your CoC's coordinated entry process.	0	0

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

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

(limit 2,500 characters)

The CoC will be offering professional development opportunities to members of the Lived Experience Advisory Committee and Youth Action Board, which include individuals who are actively experiencing homelessness or who have experienced homelessness within the last seven years. Our CoC practices Housing First, prioritizing permanent housing and stability. Financial growth and development are focal points for stabilization. The Workforce Development Program of the Collaborative Applicant (CA) helps individuals with lived experience obtain professional development and employment opportunities. The project bridges the gap between the homelessness/housing and employment systems by focusing on skills training, career exploration, job retention, and employment barrier mitigation.

The CA Workforce Development Specialist acts as a navigator for participants, providing support through two complicated systems of care through in-depth employment research, resume development, transportation assistance to and from interview sites, budgeting educational guidance, and mock interview prep. CoC and ESG funded projects can utilize the services of the CA Workforce Development Program or enter formal partnerships with other workforce development projects across the CoC. Boley Centers, a PSH and SH provider, offers community employment services, job support programs, and supported employment services that help develop jobs with local employers to place individuals with lived experience in positions that best suit their aptitudes and interest.

The Homeless Empowerment Projects' Adult Education and Workforce Development Center provides one-on-one mentorship and classroom style workshops to enhance essential skills necessary to re-enter the workforce. Florida Dream Center's Work Readiness Training program is accredited by the National Center for Construction Education & Research and is able to train and certify individuals for Core Construction and Carpentry. The Feeding Pinellas Empowerment Center – a branch of Feeding Tampa Bay – offers workforce training courses throughout the year. Workforce development programs in the CoC collaborate through interactive fieldwork with a myriad of businesses, colleges and universities, community nonprofits, the local Workforce Development Board, CareerSource Pinellas, and project participants. Collaboration promotes awareness and improves cross-sector communication and information sharing, enhancing opportunities for project participants.

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC designates two CoC Board seats for individuals with lived experience of homelessness. The CoC's Lived Experience Advisory Committee (LEAC) began meeting in June 2023. This committee includes individuals who currently experience homelessness or who have experienced homelessness within the last seven years, and its purpose is to ensure that people who have experienced or are experiencing homelessness can provide feedback and share experiences and expertise. The CoC's Youth Action Board (YAB) – which functions similarly to the LEAC but includes youths aged 24 and younger – has also met with plans to formalize their work in 2024. Both LEAC and YAB make recommendations to the CoC Board based on their personal experiences and input from others with lived experience. In addition, the CoC's Diversity, Equity, and Inclusion Committee (DEI) must include at least one member with lived experience. Furthermore, there are at least 15 members of the CoC who have self-reported experiencing homelessness.

2. The CoC monitors CoC and ESG projects annually. An integral part of monitoring is interviews with people experiencing homelessness and who have received assistance. The information gathered from these interviews is provided as feedback to the funded projects and is incorporated into CoC policy and procedure updates, as well as the CoC Written Standards. CoC and ESG projects also use client satisfaction surveys, which funded organizations use to make project enhancements. Examples of CoC-funded projects utilizing the voice of those with lived experiences are the Boley's PSH and Safe Haven projects. Boley maintains a Client Advisory Council that meets monthly with staff to provide feedback on services, discuss problems, and plan social events for the agency. Each PSH unit also holds community meetings designed to get direct feedback and plan activities.

3. The CoC makes every attempt to be nimble in its responses to the needs of those who are experiencing or who have experienced homelessness within its system of care. For instance, LEAC members recently requested that the CoC conduct an assessment of a local Emergency Shelter. To meet this request and enhance the overall system, the CoC has created an opportunity for CoC Board Members and local leaders to experience a day in the life of clients within the Continuum of Care.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1. The Chair of the CoC Funders Council sits on the Local Planning Agency Board. Pinellas County - the area served by our CoC - is the sixth most populous and the densest county in the state. The county intends to seek and promote land use and development patterns that support equitable economic growth to include promoting mixed-income communities that provide a range of housing types and costs to meet the needs of residents. Additionally, the CoC's plan to end unsheltered homelessness includes the strategy to ensure elected officials understand the complexities and barriers of the unsheltered. This plan enlists these influencers to contribute to solving systemic issues throughout the county. Along with leveraging commitment from major public funders entitlement communities to support innovative approaches such as accessory houses, tiny homes, hotel to housing conversion, and the adaptive reuse of buildings.

2. Over the past few years, increasing rents and reduced vacancy rates of affordable units throughout Pinellas County have made landlord recruitment and housing navigation services even more essential. According to the National Low-Income Housing Coalition, there are only 36 affordable and available rental units per 100 households in the Metro Area. The CoC worked closely with the local apartment association to host informational sessions and distribute program information to their large membership group, which allowed for acquirement of units in multiple properties. To increase the affordable housing inventory, the CoC utilized expanded funding for landlord incentives, including signing bonuses and increased security deposits, while continuing to market the CoC's Risk Mitigation Fund. In 2022, the largest family emergency shelter in the CoC closed to become affordable housing. Many of the families residing within the shelter were given preference and priority for the available units within the new housing neighborhood.

As a CoC we have seen significant support through our municipal partnerships to increase the supply of affordable housing. Most recently, an additional 307 affordable housing units were allocated to homeless families. One of our strategies has been to reduce barriers through media and other community-based partnerships to increase community awareness on the need for affordable housing. In addition, the St. Pete Housing Authority is allocating 20% of their units at a new building for homeless seniors.

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

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

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

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

1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	07/14/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition—meaning the date your CoC published the deadline.	07/14/2023

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

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

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

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

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	110
2.	How many renewal projects did your CoC submit?	14
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC has adopted specific benchmarks for evaluating project performance, including permanent housing placement and stability. These benchmarks are included in the scoring tools used to evaluate projects submitted in the local competition. Projects meeting or exceeding the benchmarks score higher than those that don't, other things equal. HMIS and APR data are used to measure actual project performance of projects.
2. The Data and Systems Performance Committee, which provides input to the local competition Review and Rank Committee, analyzes the length of time to housing within the CoC, broken out by household type, race, ethnicity, gender, acuity, income, Veteran status, and disabilities then compared to housing and rent trends.
3. The project performance benchmarks against which actual project performance is measured vary between project types. For instance, because Permanent Supportive Housing and Safe Havens serve persons with more severe needs and vulnerabilities, the benchmark for employment income is lower for those project types, as compared to Rapid Rehousing. By gearing performance benchmarks on the scoring tool to the specific type of project, the severity of needs is taken into account.
4. As described above, the benchmarks against which projects were evaluated varied based on the type of project and who was served. In addition, there were 10 bonus points available for the Review and Rank Committee to assign (over the 100-point base points) for projects that were especially critical to the CoC or served the hardest to serve population.

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

(limit 2,500 characters)

1. The Data, System and Performance (DSP) Committee, a racially diverse group, created the project performance benchmarks used in the local competition. Project performance was a major factor in the local competition scoring and ranking. In addition, race equity questions used for scoring projects in the local competition were developed by the CoC's Diversity, Equity, and Inclusion committee (DEI). DEI is comprised of 50% Black, and Indigenous people of color (BIPOC). It was vital to the committee that the local competition include how organizations are implementing the CoC's Race Equity Toolkit to increase racial equity within their organizations. The Toolkit was written and adopted by the full CoC Board in 2022 and provides education about the history of race in our geographic area. It then provides a framework for agencies to identify the racial equity issues that may exist within their organization. There was also BIPOC representation on the CoC Review and Rank Committee in 2023.

2. Our CoC's Board appoints a Review and Rank Committee (RRC) to review local funding applications each year. The CoC Board intentionally tries to appoint persons of different races and ethnicities to the RRC. The 2023 Review and Rank Committee includes 25% BIPOC persons.

3. Using the Racial Equity Toolkit, the DEI Committee developed a series of race equity questions that applicants were asked to address in a Racial Equity Narrative in the local competition. Applicants are asked what steps their organization taken to secure a commitment to race equity from the board of directors, funders, employees, and clients and what ways the organization has adopted a racial equity approach through policies and procedures, planning, and/or tools. Applicants are also asked to describe the ways the organization has created an equitable, inclusive environment for all communities served.

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

(limit 2,500 characters)

1. Reallocation may occur either through voluntary reallocation or through involuntary reallocation based on the CoC's published reallocation process for low performing projects. Projects who have been consistently in Tier two can consider voluntary reallocation. Renewal project reallocation is based on poor project performance based on CoC performance benchmarks or have recaptured funds/untimely drawdowns. The Review and Rank Committee may reject or reduce underperforming and underspent involuntarily. Information about the process for reallocation was included as a part of the instructions in the local competition. The Scoring Tool for renewal projects assigned 80% of the points available to project performance (65%) and timeliness of drawdowns and whether funds had been recaptured (15%). The Review and Rank Committee used the resulting scores and performance metrics and eLOCCS drawdowns for renewal projects to determine whether or not a project's poor performance or ineffective use of funding would merit reallocation.

2. In the 2023 local competition, two renewing projects were identified as lower performing - one RRH project and one PSH project. The PSH project had funds recaptured recently and their drawdowns for their current grant were well below the expectation, leading to concerns about likely recaptures as a result. The RRH project's performance outcomes were lower than the CoC's benchmarks set for RRH projects. For instance, the rate of employment income increases for program participants was less than 15%, as was the rate of nonemployment income increases.

3. The CoC did reallocate funding from the lower performing projects during the 2023 local competition. From a PSH project, \$80,000 was reallocated, while \$150,240 was reallocated from an RRH project. These represent approximately 4.2% of our CoC's 2023 ARD.

4. Not applicable.

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

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
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1E-5.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes

4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/05/2023
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1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/05/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

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

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

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

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

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

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

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

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

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

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

(limit 2,500 characters)

1. The CoC and the HMIS Lead Agency work closely with domestic violence (DV) providers to ensure that their data is collected in a comparable database and to provide technical support regarding project setup, data collection, and HUD data standards as if they were a standard HMIS participating agency. One DV provider in our CoC receives CoC funding, so they must maintain their data in a comparable database to extract APR data as a requirement of their CoC contract. Other DV providers in the CoC must utilize a database to receive state funding for Domestic Violence and the state also requires that they utilize an HMIS comparable database. Both state-certified DV centers in the Pinellas County CoC use the Osnium database, which is administered by the Florida Department of Children and Families, to manage data. Osnium is an HMIS/HUD comparable database consistent with HMIS Data and Technical Standards & meets the Homelessness Prevention and Rapid Re-housing Program reporting requirements. The database is equipped with the ESG CAPER and APR reports exportable in CSV format for uploading to the SAGE portal.

2. DV housing and services providers in our CoC utilize Osnium, a HUD-compliant comparable database that complies with the FY 2022 HMIS Data Standards.

3. The CoC's HMIS is compliant with the FY 2022 HMIS Data Standards. HMIS has the ability to export the newest HUD CSV file, containing all new HUD Data Elements, and providers are able to generate all needed reports for federal funding.

2A-5. Bed Coverage Rate—Using HIC, HMIS Data—CoC Merger Bonus Points.

NOFO Section V.B.3.c. and V.B.7.

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	1,545	117	1,428	100.00%
2. Safe Haven (SH) beds	70	0	70	100.00%
3. Transitional Housing (TH) beds	371	23	348	100.00%
4. Rapid Re-Housing (RRH) beds	667	194	473	100.00%
5. Permanent Supportive Housing (PSH) beds	1,641	0	1,641	100.00%
6. Other Permanent Housing (OPH) beds	187	0	187	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 V.B.3.c.

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

(limit 2,500 characters)

Not applicable. No bed coverage rates were at or below 84.99%.
NOTE: The VSP project that was entered into HDX failed to say "yes" to the question of "Victim Service Provider" which is why the beds are not appearing to be broken out (as the above) on the competition report. The numbers match the competition report but due to this error the bed coverage rate is not correct on the report. The above numbers are correct and properly identified with the VSP counts.

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

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

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/25/2023
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2B-2.	PIT Count Data—HDX Submission Date.	
	NOFO Section V.B.4.a	

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

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

(limit 2,500 characters)

1. The 2023 Youth PIT Count Planning Subcommittee – part of the PIT Planning Committee – was led by Family Resources, a CoC member organization serving unaccompanied youths experiencing homelessness in Pinellas County. This subcommittee also included Ready For Life Pinellas, an organization serving youths exiting the foster system, many of whom are currently experiencing or at-risk of homelessness; Brookwood Florida, a group home for girls; Camelot Community Care who provide care to youths and families involved in the foster/adoption system; Pinellas County Schools HEAT Program, which serves families experiencing homelessness enrolled in Pinellas County Schools; an individual experiencing homelessness, and at least one member who went through the local crisis response system as a youth. Other organizations included in the Youth PIT Planning process were the Pinellas County Department of Health, Street Outreach teams, and representatives of local municipalities. CoC members – including those with a lived experience of homelessness – were also invited to participate in this subcommittee.

2. The Youth PIT Planning Subcommittee hosted two drop-in Youth PIT survey sites at Family Resources and Ready for Life Pinellas, both locations that Pinellas youths experiencing homelessness are familiar with. The Youth PIT Subcommittee’s members collaborated to identify areas where youths experiencing homelessness congregate to advertise the drop-in survey sites; these were also advertised on social media in groups frequented by youths experiencing and at-risk of homelessness. Some youths were also contacted directly to ensure participation. Additionally, resources including meals, haircuts, hygiene supplies, blankets, sleeping bags, socks, and more were provided during the Youth PIT to encourage youth survey participation.

3. The PIT volunteer application is shared widely digitally, in print, with news outlets, at local events, in meetings, and through CoC providers, including those serving youths experiencing and at-risk of homelessness. CoC providers are encouraged to share this volunteer opportunity with team members, volunteers, supporters, and program participants. As the PIT volunteer application does not ask about a volunteer’s housing status, the exact number of volunteers with a history of homelessness is unknown. However, some volunteers – including youths and seniors – indicated that they have previously or were actively experiencing homelessness.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
	3. describe how the changes affected your CoC’s PIT count results; or	
	4. state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

1. The Continuum of Care (CoC) made no changes to the methodology and data quality for the 2022 Sheltered PIT count.

2. The 2023 PIT Deployment Subcommittee – part of the PIT Planning Committee – added new survey locations utilizing data provided by HMIS and Street Outreach teams, as well as the heat map from the 2022 PIT survey. As 2022's PIT survey was the first to provide a true heat map, 2023 was the first year that one was utilized for planning purposes. Additional survey locations were also added by members of local law enforcement who surveyed individuals primarily in encampments. Law enforcement volunteers also helped survey areas of Pinellas County that volunteers could not reach during prior year's surveys. Fewer surveys were completed at Day Labor sites in 2023 as many have switched to digital scheduling and do not provide on-site services. Unsheltered families on the CoC's shelter waitlist and unsheltered youth clients were also contacted via phone on the day after the 2023 PIT Count to ensure survey completion; in previous years, only youth clients were contacted via phone. The Youth PIT event also offered increased resources at their drop-in survey sites to encourage participation. Furthermore, the 2023 PIT involved more volunteers actively surveying individuals experiencing unsheltered homelessness than years prior. Lastly, 2023's PIT Survey was available in both English and Spanish, whereas it had only previously been available in English.

3. Despite an increased number of volunteers conducting surveys in more of Pinellas County, the unsheltered PIT Count remained consistent between 2022 (644 individuals) and 2023 (646 individuals). Similarly, despite the PIT survey being available in Spanish for the first time in 2023, no Spanish-language surveys were completed and there was only a small difference in individuals who identify as Hispanic between 2022 (36) and 2023 (39). An increased number of children and youths were identified between 2022 (14) and 2023 (58).

2C. System Performance

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

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

2C-1.	Reduction in the Number of First Time Homeless--Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
2.	describe your CoC's strategies to address individuals and families at risk of becoming homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

1. The CoC coordinates with diverse organizations to determine the risk factors which are most likely to lead to first-time homelessness. Collaborative Applicant (CA) staff review HMIS data to identify trends and recommend interventions to the Data & System Performance Committee (DSP) once a month. Together, CA staff and the DSP Committee review this HMIS data, along with data from the PIT Count and CoC Annual Performance Reports, to identify the risk factors for first time homelessness and make recommendations for the development and standardization of assistance programs to the Funders' Council, and Providers' Council. The CoC has also used data from the local 211, Urban Institute, United Pinellas, and U.S. Census to identify zip codes where residents were determined to be at higher risk of homelessness due to housing and economic conditions to target them for assistance.

2. If an individual or family is determined to be at risk of homelessness, they are targeted by Prevention and Diversion efforts prior to becoming literally homeless and entering the Coordinated Entry (CE) process. The CA has 115 provider staff members trained in diversion strategies and continues to expand local funding for diversion strategies that assist at-risk individuals and families with problem-solving techniques and accessing formal and informal networks. The CoC continues to invest in Eviction Diversion Programs, diversion for clients prior to shelter intake, and Targeted Prevention Programs for high risk/high needs zip codes. The Targeted Prevention has been expanded to cover individuals and families who reside in 15 zip codes that local data has shown to house those at the highest risk for experiencing homelessness. The CA's Director of CoC Strategy and Performance, CE Manager, HMIS staff, and the DSP Committee oversee the strategy to reduce the number of those experiencing homelessness for the first time. The CA's CE Manager is responsible for ensuring the CE design meets the needs of the at-risk households in the CoC. DSP reviews the CoC's Diversion and Prevention projects against local benchmarks and tracks outcomes quarterly.

3. The Homeless Leadership Alliance of Pinellas, the CA for the CoC, is the primary responsible party for overseeing the strategy to reduce first-time homelessness.

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

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

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

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

In the field below:

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

(limit 2,500 characters)

1. Our CoC aims to reduce the length of time (LOT) homeless by monitoring HMIS data and continuously improving CE. The Data & System Performance Committee meets monthly to evaluate projects and monitor local benchmarks including LOT homeless. The Diversity, Equity, and Inclusion Committee monitors race disparities in LOT homeless and develops policies to increase equity. CE is designed to improve the efficiency of referring households to housing opportunities and providers to reduce the time from referral to housing, including a redesigned CE Prioritization List informed by Community Solutions that makes all needed data available to improve case conferencing and housing placements. The CoC adopted a mobility policy to move households from one program to another based on developing needs to ensure better client care. The CoC is also redirecting low acuity households to mainstream resources to ensure that they are assisted while awaiting housing. These changes were adopted to ensure that the CES is an efficient process and that wait times are reduced between a housing opportunity opening and a referral being made. The CoC continues work on the Built for-Zero project to reduce lengths of time homeless. The CA employs staff to assist households in the housing search and placement process, to speed up moves into PH. A Landlord Liaison position function is to increase landlord participation and affordable housing options to make housing placement timely. The CoC also maps out the crisis response system on an ongoing basis to ensure households do not encounter duplication of efforts. The CA also employs a Workforce Development Specialist to assist households in obtaining employment or increase earned income to ensure sustainability in stable housing without employment assistance.
2. The CE prioritization process uses VI-SPDAT scores and length of time homeless for prioritization. Chronic homelessness status is a tiebreaker to prioritize households with the longest history of homelessness and the most severe service needs. This process results in a CE List that is used to refer those who have been homeless the longest to available PH interventions.
3. The Homeless Leadership Alliance, the CoC's CA, is responsible for overseeing this strategy.

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

In the field below:

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

(limit 2,500 characters)

1. The Data & System Performance Committee monitors exits to, and retention of, permanent housing across all project types and shares outcomes with the CoC quarterly. The Diversity, Equity, and Inclusion Committee reviews exit and retention data for racial disparities and proposes solutions to increase equitable outcomes. Last year, the CA hired additional staff to assist households in identifying available housing, mediate on their behalf, coordinate inspections, and help households move into their new home. A Landlord Liaison position was created to increase landlord participation and affordable housing options and a Workforce Development Specialist position was created to assist households in finding and maintaining employment. The CoC also partnered with three PHAs to effectively utilize Emergency Housing Vouchers. The CA has also begun piloting a new Coordinated Entry Assessment to replace the VI-SPDAT and better match households with interventions that meet their level of need to increase exits to permanent housing. Exits to, and retention of, permanent housing is a scored factor in the local competition processes for funding to provide another incentive for applicant agencies.

2. The CoC utilizes the Moving on Strategy in conjunction with a local PHA and PSH projects to help households in PSH who no longer want or need intensive services maintain their housing. The CoC works to increase the rate that individuals and families exit to permanent housing and maintain a permanent housing status by expanding housing navigation and support services staff and partnering with PSH providers to help households in PSH gain independence. PSH Case Managers work to secure Housing Choice Vouchers and locate the housing of the household's choice, negotiating with landlords, coordinating inspections, helping the household move into their new home. Supported Living staff ensures the household connects to needed service and basic needs are met.

3. The Homeless Leadership Alliance of Pinellas, the CA for the CoC, is the primary responsible party for overseeing the strategy to increase exits to, and retention of, permanent housing.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1. Our CoC works to reduce the rate that individuals and families return to homelessness by identifying risk factors for returns across a range of factors such as loss of income, extreme low incomes, high acuity scores, and high levels of service needs, and developing plans to mitigate these issues. The CoC and the County look at rates of returns to homelessness and trends, and there is follow up with clients who returned to homelessness to understand the reasons, such as increased rent or loss of income, in order to bring that data back to the CoC and overcome these barriers. Data on household income is also compared to median rent costs to understand household sustainability and risks of returns to homelessness. The Data and System Performance Committee consistently review return data against local benchmarks at the system and project levels to identify potential gaps in services or trends in returns.

2. Data analysis and policy recommendations are presented to the Data & System Performance Committee once a month. This data is also reported to the Funders' Council and Providers' Council to develop strategies and target funding to reduce returns to homelessness. The Diversity, Equity, and Inclusion Committee also reviews return data, monitors racial disparities, and proposes solutions to increase equitable outcomes. The CoC is also always looking at new programs and practices, such as shallow subsidies, to increase sustainability and prevent returns. Specifically the CoC implemented and increased funding for Eviction Diversion programs to assist households from returning to homelessness, and created a Workforce Development program with CA to help households find and maintain employment to increase housing stability. The CoC also made Prevention the number one funding priority for funding in the 23-24 fiscal year, as CoC prevention has shown immense outcomes, especially when it is used in targeted zip codes.

3. The Homeless Leadership Alliance of Pinellas, the CA for the CoC, is the primary responsible party for overseeing the strategy to reduce returns to homelessness.

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

(limit 2,500 characters)

1. All CoC provider case managers are required to monitor the status of their program participants' income and employment. Case managers must follow up on referrals to employment organizations and document all income information in HMIS and the individualized housing plans. The CoC works to increase individual and family income through the CA's Workforce Development Project, "Ending Homelessness Through Employment and Housing," which is funded through a multi-year partnership agreement with United Way Suncoast. The CA employs a full-time Workforce Development Specialist to assist households who are experiencing homelessness and housing instability with workforce development services to find and maintain employment to be able to increase their employment cash income. This service is available to serve clients in the entire CoC geographical area. The annual monitoring of all CoC and ESG funded projects ensures projects have formal partnerships with workforce development programs, which are to include MOUs. Data regarding the effectiveness of workforce development collaborations is regularly presented to the Data & System Performance Committee, Funders' Council, Providers' Council, and CoC Board.

2. CoC-funded projects connect participant households to mainstream employment services through their case management process and through a Memorandum of Agreement between the CA and CareerSource Pinellas, which acts as the County Workforce Development Board. Local service agencies have developed a range of programs to assist clients in gaining employment. For example, Boley Centers, a PSH and SH provider, offers community employment services, a job support program, a homeless Veteran's reintegration program, supported employment demonstration, supported employment services, vocation evaluation, work adjustment, and youth employment program. Also, the Homeless Emergency Project has Pathways to Employment program which uses the area's workforce agency, Urban League, and Veteran employment programs for job training and placement. Lastly, the Florida Dream Center offers a work readiness and forklift certification classes.

3. The Homeless Leadership Alliance of Pinellas, the CA for the CoC, is the primary responsible party for overseeing the strategy to increase employment cash income.

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

(limit 2,500 characters)

1. Our CoC helps households increase their non-employment cash income by ensuring they are connected to mainstream resources, such as SNAP (food stamps), TANF, SSI/SSDI, Veterans benefits, unemployment compensation, and more. The Data & System Performance Committee and CA staff monitor cost-of-living adjustments from the federal government and send out income update notices to CoC projects when there are increases made to benefits. Additionally, HMIS staff provide training to end users on non-employment income which ensures data integrity. All CoC and ESG funded projects are monitored for their effectiveness and impact of connecting households to benefits. All CoC provider case managers are responsible for ongoing updates to clients' income within client files and HMIS. Case managers also assist with benefit enrollment and renewal applications as part of case management process. CoC funded housing projects have inter- and intra-agency relationships with the SSA, VA, Disability Determination Services, Ryan White Services, and other public, private, and non-profit agencies. Coordinated Entry Navigators are required to connect households going through the Coordinated Entry System to non-employment benefit resources as part of the document readiness process for housing interventions. Participation in the SSI/SSDI Outreach, Access, and Recovery (SOAR) program has been expanded across the CoC and SOAR engagement and outcomes data are tracked in HMIS to improve follow through with clients and ensure they receive all non-employment benefits they are entitled to. The CoC also conducts annual SOAR training and how to apply for benefits. Trainings are mandatory for all CoC and ESG funded projects.

2. The Homeless Leadership Alliance of Pinellas, the CA for the CoC, is the primary responsible party for overseeing the strategy to increase non-employment cash income.

3A. Coordination with Housing and Healthcare

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

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

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

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

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

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

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

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

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

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

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

(limit 2,500 characters)

Not applicable

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

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

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

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

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

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

(limit 2,500 characters)

Not applicable

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

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

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

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

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

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

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

You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-2, 4A-2a. and 4A-2b.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.I.(1)(c)	

1.	Enter the number of survivors that need housing or services:	5,040
2.	Enter the number of survivors your CoC is currently serving:	248
3.	Unmet Need:	4,792

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

(limit 2,500 characters)

1. The numbers were calculated by determining the number of reported DV incidents in this CoC, the number of those cases that likely need housing, and the number currently being served by the provider. Pinellas County (our CoC geographic area) had over 6,000 reported DV incidents in 2020, which is almost certainly an underestimate. This number has not been updated since 2020 due to implementation of a new database used by the Florida Department of Law Enforcement. Probably twice that number go unreported, making the true number of DV incidents in this county closer to 18,000 annually. The National Network to End Domestic Violence (NNEDV, 2017) estimated that 84% of DV survivors need housing assistance, making the conservative estimate for Pinellas County survivors who need housing at 5,040. CASA Pinellas (Community Action Stops Abuse, Inc.), a large state-certified domestic violence center, holds all of the HUD-funded housing contracts in this CoC, and on 9/1/2023 was serving about 248 DV households in those specialized housing programs, addressing about 5% of the CoC's need. Data provided by DV providers has been entered into the Osnum client tracking and case management software (HMIS-comparable database), and the CoC is provided data reports during annual monitoring and in preparation for the HUD NOFO.

2. Data was obtained from the Florida Department of Law Enforcement, the National Network to End Domestic Violence, the state-certified domestic violence services provider (CASA), and Osnum, which is an HMIS-comparable database.

3. The documented housing shortage and increased rent only add to the reasons for unmet housing needs that additional funding could address.

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

Applicant Name
CASA
Hope Villages of ...

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

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

1.	Applicant Name	CASA
2.	Project Name	CASA Rapid Rehousing New Expansion
3.	Project Rank on the Priority Listing	19
4.	Unique Entity Identifier (UEI)	UGHLKVBMDAR4
5.	Amount Requested	\$365,707
6.	Rate of Housing Placement of DV Survivors-Percentage	96%
7.	Rate of Housing Retention of DV Survivors-Percentage	98%

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

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

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1. The rates were computed by looking at the number of persons served in DV housing programs, the number who were placed in housing, and the number who exited the housing programs.

2. Yes, the rates account for exits to safe housing destinations. Of the 237 persons in CASA Pinellas' housing programs last year, 227 or 96% exited to safe permanent destinations.

3. The Annual performance report (APR) run for combined DV housing programs indicated persons who were exited during 2022 without a move-in (Q22c). The HMIS-comparable database is Osnium and is prescribed by the Florida Department of Children and Families for all VSPs to use.

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

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

(limit 2,500 characters)

1. DV survivors are quickly moved into safe, affordable housing. Often, survivors are informed about housing options while they are in an emergency shelter, at a time when they are making plans for their independence. They complete the assessment and start preliminary goal setting at that time so that transition into community housing is seamless and immediate. Other times, survivors self-identify while receiving supports from other community resources, and are referred to the DV center for safety planning so they be safe in the community regardless of what provider they choose.

2. There are 2 state-certified DV centers in the CoC, and they use a parallel coordinated entry system that the CoC assisted to design. This was created when the state would not give permission for the centers to participate in the regular CES. The parallel system works exactly like the regular CES, but is closed to DV professionals who have obtained privilege to communicate with and about survivors in the state. The CoC's emergency transfer plan was made in conjunction with the centers to take into account their expertise and advice.

3. The need for supportive services is driven by survivor requests. Case management for survivors centers around empowerment philosophy which views each survivor as the expert of their circumstance. Case managers can help with teaching decision-making skills and connecting survivors to community resources, but the survivor chooses what is best for that household.

4. Once survivors have determined what goals are appropriate for their individual circumstance, case managers are able to research local community resources, refer survivors, and in some cases make "warm" handoffs. This includes referring survivors to other housing providers in the CoC if that is what they choose. That is, the survivor can continue to get services from the DV center, such as updated safety planning, even if they choose to pursue housing placement with another provider. The CoC has a plethora of community resources and a 2-1-1 information line that makes it easy to get local information.

5. At present, rapid rehousing is available to all survivors in the CoC, whether they are a new intake or are coming from transitional or permanent supportive housing. The procedure includes temporary financial assistance that gradually decreases over 3 months to ensure that the survivor is able to make the transition successfully.

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

(limit 2,500 characters)

1. The state-certified DV centers in this CoC are expert in providing safe and confidential supports for survivors. Often, intake is done in-person at the emergency shelter which is designed for maximum security and privacy. When intake is done in person or virtually, DV staff has been well trained to ensure safe, confidential communications by choosing a convenient but neutral setting, and by ensuring technical settings online audio and web conferencing platforms do not allow for artificial intelligence tracking or location mapping on behalf of abusers.

2. DV staff are responsible for performing the Housing Quality Standards inspection and often interface with landlords who are hesitant to rent to survivors for fear that the abuser will cause property damage. During these interactions in the community, observations are made to alert the survivor to concerns or other issues that should be included in the updated safety plan.

3. Under Florida Statute 39.908, "information about the location of domestic violence centers and facilities is confidential and exempt from the provisions of s. 119.07 (1)." Furthermore, FL Statute 39.908 and Statute 90.5036 do not allow the release the names of victims receiving services and the projects do not enter data into HMIS, hence the parallel process involves monthly consultation between the DV services to review families waiting for housing assistance and prioritize them based on VI-SPDAT and safety issues.

4. All staff members who supervise, coordinate, and/ or provide direct advocate or counseling services to survivors and their children complete the 30 hours of training to obtain privilege (FS Section 90.5036). Additionally, the state monitoring agency, Department of Children and Families, requires all direct service staff, including part-time and volunteers, to annually receive 16 hours of training in DV, child abuse, elder abuse, and/ or other issues pertinent to providing quality services to domestic violence survivors and their dependents, in addition to disaster preparedness training. Each DV center has been providing DV services for over 40 years in this CoC.

5. Housing locations that are owned and operated by the DV centers have extensive security surveillance that is monitored remotely. For scattered site locations, survivors are encouraged to use dead bolts, window/ door alarms, and ring camera systems as part of their safety plan.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.	

(limit 2,500 characters)

This CoC has worked with DV centers to provide specialized housing to survivors of domestic violence and their children for many years. The DV center staff members are trained to work with domestic violence victims and are knowledgeable of the multiple challenges they face, the safety issues involved, and the challenges in seeking safe, stable, permanent housing. DV staff are highly trained in safety and confidentiality, and provide this kind of expertise for the entire CoC. DV staff participate in the CoC's work as evidenced by participation in multiple subcommittees and other collaborative meetings. In this manner, the DV center offers their expertise in safety and the CoC, as well as other housing providers, offer their expertise in housing.

The DV provider is also monitored annually by CoC staff and by the same standards used for other providers, including review of the APR generated by the comparable database. This collaborative assessment has resulted in excellent performance scores and provides the opportunity for CoC to continue dialogue about services for this vulnerable population. CoC often solicits information and advice from the state-certified center, such as when writing the emergency transfer policy, and in the past CoC has asked for DV 101 and trauma-informed services training for the other housing providers and CoC staff so they are more aware.

DV survivors are more likely to speak to their DV case manager than to CoC staff, and to date, are not interested in providing direct feedback. That is why DV staff participation in the CoC subcommittees is so important. At present, there is investigation as to how survivors could provide feedback to CoC on anonymously, such as having a private lived experience subgroup meeting with a DV staff member to get feedback.

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

(limit 5,000 characters)

1. In every aspect of services, DV survivors are approached under an empowerment philosophy that is akin to Housing First. Survivors set goals in line with their current life circumstances, and DV case managers respect their wishes by providing placement and stabilization that support their individualized goals.

2. DV advocates support the survivor in becoming stronger and independent, not to take over for her or to make her dependent on the advocate. When support is needed, advocates "walk with her" rather than "do for her." The advocate's job is to help the survivor gain the skills and confidence so she can exercise power over her life, leaving the choice of options to the survivor no matter what she decides, even if the advocate does not agree with her choice. Safety is first and foremost for survivors. Although "her," "she," and "woman" are used to describe the survivor in this philosophy, it is not meant to be gender specific.

3. Support groups are held for DV survivors who choose to attend, and include education about the power and control wheel as well the effects of trauma.

4. Part of the philosophy that is central to the DV movement and that is espoused by the DV centers requires providing support and teaching empowerment skills to survivors. Part of those empowerment skills involves teaching them how to access community resources so that they might enjoy an independent lifestyle. Case plans consist of survivor-defined goals and aspirations, which the DV advocate can help in finding appropriate providers.

5. Empowerment theory focuses on how oppression contributes to feelings of helplessness. It centers on helping marginalized people at individual, group and community levels gain the personal, interpersonal and political power to improve their lives. All direct service DV staff, including part-time and volunteers, annually must complete 16 hours of training in DV, child abuse, elder abuse, and/ or other issues pertinent to providing quality services to domestic violence survivors and their dependents. These 16 hours of training are enforced by state certification and include safety, diversity, civil rights, supports for deaf and hard of hearing, American with Disabilities Act, etc.

6. Survivors are offered individual and group advocacy, as well as referrals to other community resources that can help meet their spiritual and other needs.

7. Survivors are given referrals to other community resources that specialize in parenting. Additionally, the DV centers offer legal and justice advocacy services, such as accompanying survivors to court or representing them in injunction for protection cases, and child welfare services as an advocate and resource during child protection investigations.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.	
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(limit 5,000 characters)

CASA provides the rent and utility deposits via this award, and will provide ongoing case management once the household is in permanent housing, to include information/ referral to address barriers in real time in the community where they live.

CASA understands that collaboration is the key to a good enterprise. We have developed into experts in providing support and teaching empowerment skills to survivors. Part of those empowerment skills involves teaching them how to access community resources so that they might enjoy an independent lifestyle. We work with community resources to provide basic needs, employability skills, housing, counseling, medical, childcare, legal representation, transportation, etc. These community resources are free to the program participants.

Once enrolled, survivors establish their goals for self-sufficiency. Goals will be individualized for each household and advocates assist to refer for employment, educational skills, improving credit ratings, obtaining reliable transportation, eliminating legal issues, obtaining child support, clearing child custody issues, and accessing mainstream resources. Regular meetings take place to discuss progress towards goals, with an in-depth, goal-related discussion. Support groups are available for safety, parenting skills, employment skills, time management, financial literacy, self-esteem, stress management, substance abuse and mental health issues, etc. Job openings, upcoming workshops and trainings are shared.

The CASA continuum of services includes an emergency shelter, outreach support groups, 24 hour crisis hotline, rapid rehousing, transitional and permanent supportive housing, substance abuse and mental health advocacy, child protection advocacy, justice advocacy, legal aid for injunction for protection, and education for youth and professionals. In October 2022, CASA opened the only Family Justice Center (FJC) in the state of Florida, creating a centralized point of service for survivors and partnering with law enforcement, legal services, healthcare, and the school district. These services are free to survivors in CASA's programs, funded by various, ongoing contracts outside of this funding request, and any survivor is free to request services at the FJC regardless of their participation in housing or other programs.

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

(limit 5,000 characters)

1. The new project will mirror current survivor-driven placement and stabilization procedures for survivors who choose to pursue housing under this funding. In every aspect of services, DV survivors are approached under an empowerment philosophy that is akin to Housing First. Survivors set goals in line with their current life circumstances, and DV case managers respect their wishes by providing placement and stabilization that support their individualized goals.
2. The new project will mirror current agency and mutual respect procedures for survivors who choose to pursue housing under this funding. DV advocates support the survivor in becoming stronger and independent, not to take over for her or to make her dependent on the advocate. When support is needed, advocates "walk with her" rather than "do for her." The advocate's job is to help the survivor gain the skills and confidence so she can exercise power over her life, leaving the choice of options to the survivor no matter what she decides, even if the advocate does not agree with her choice. Safety is first and foremost for survivors. Although "her," "she," and "woman" are used to describe the survivor in this philosophy, it is not meant to be gender specific.
3. The new project will mirror current access to information on trauma procedures for survivors who choose to pursue housing under this funding. Support groups are held for DV survivors who choose to attend, and include education about the power and control wheel as well the effects of trauma.
4. The new project will mirror current cultural responsiveness and inclusivity procedures for survivors who choose to pursue housing under this funding. Part of the philosophy that is central to the DV movement and that is espoused by the DV centers requires providing support and teaching empowerment skills to survivors. Part of those empowerment skills involves teaching them how to access community resources so that they might enjoy an independent lifestyle. Case plans consist of survivor-defined goals and aspirations, which the DV advocate can help in finding appropriate providers.
5. The new project will provide a variety of opportunities for connection for survivors who choose to pursue housing under this funding as currently offered in the DV existing housing programs. Empowerment theory focuses on how oppression contributes to feelings of helplessness. It centers on helping marginalized people at individual, group and community levels gain the personal, interpersonal and political power to improve their lives. All direct service DV staff, including part-time and volunteers, annually must complete 16 hours of training in DV, child abuse, elder abuse, and/ or other issues pertinent to providing quality services to domestic violence survivors and their dependents. These 16 hours of training are enforced by state certification and include safety, diversity, civil rights, supports for deaf and hard of hearing, American with Disabilities Act, etc.
6. The new project will provide a variety of opportunities for connection for survivors who choose to pursue housing under this funding such as the ones that are now being offered. Survivors are offered individual and group advocacy, as well as referrals to other community resources that can help meet their spiritual and other needs.
7. The new project will mirror current procedures for survivors who choose to pursue housing under this funding. Survivors are given referrals to other community resources that specialize in parenting. Additionally, the DV centers

offer legal and justice advocacy services, such as accompanying survivors to court or representing them in injunction for protection cases, and child welfare services as an advocate and resource during child protection investigations.

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

(limit 2,500 characters)

1. Input from survivors is actively solicited throughout their case management. In addition, they are asked to complete an exit survey when they leave. Results of those surveys are carefully reviewed and in some cases, services are modified and strengthened as a result of them.

Survivors of domestic violence are defined as situationally homeless even when not formally admitted into DV center programs. Survivors are asked to provide input for improvement across all CASA programs. Support group participants routinely complete a satisfaction survey which is reviewed quarterly and changes are made in response if appropriate.

Many of CASA's volunteers are also survivors of domestic violence. These volunteers assist in residential non-residential programs, and with community education.

Many of CASA's staff are also victims of domestic abuse, and as a result, are able to better understand what the victims are currently experiencing.

2. CASA's Board of Directors has active committees which are comprised of current Board members and potential Board members. There are several homeless representatives or survivors of domestic violence who are on these committees. CASA has historically numerous homeless representatives (victims of domestic violence) on its Board of Directors and continues to do so. CASA continues to be actively seeking additional homeless and minority representatives for potential board members

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

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

1.	Applicant Name	Hope Villages of America
2.	Project Name	HVA's The Haven RRH Case Management
3.	Project Rank on the Priority Listing	18
4.	Unique Entity Identifier (UEI)	TS79VPGHH6H6
5.	Amount Requested	\$142,302
6.	Rate of Housing Placement of DV Survivors-Percentage	85%
7.	Rate of Housing Retention of DV Survivors-Percentage	80%

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

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

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1. We computed the rates of housing placement and housing retention as follows. First, the percentage placement rate was calculated by dividing the number exiting the program into safe housing divided by the total number participating in the program. Second, the percentage retention rate is the total number remaining in safe housing after 12 months divided by the total number placed in safe housing.

2. The rates account for destinations to safe housing.

3. The data source used for placement into housing is comprised of manual data collection captured by the project applicant. The retention rate is calculated through comparable databases.

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

Describe in the field below how the project applicant:

1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;
3.	determined which supportive services survivors needed;
4.	connected survivors to supportive services; and

5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.
----	---

(limit 2,500 characters)

1. Within the first 72 hours of contact, Hope Villages of America (HVA), in concert with the survivor, completes the Housing Stabilization Plan designed to identify strengths, challenges, and goals. The Housing Stabilization Plan is cornerstone to establishing timeframes for relocation with measurable action steps. The plan outlines clear roles and responsibilities of both the survivor and case manager to avoid confusion. The Housing Stability Plan is driven by the client and time frames are designed to expedite the relocation process. The relocation process is expedited through rent and utility assistance. The program provides support in the housing search by working collaboratively with local landlords to secure an inventory of available homes. The housing search is built on locating a home that supports the safety of the survivor. All searches are done with explicit consent of the survivor and are done quickly to ensure timely relocation.
2. The project will receive referrals from the CoC's Coordinated Entry System, from other DV providers (e.g., CASA), and other stakeholders. The program has designed clear policies and procedures that identify how survivor's needs are prioritized using a validated screening and assessment tool. A prioritization list will be utilized to ensure those survivors who have the highest needs are served first.
3. The survivor is the primary driver in determining their needs for supportive services, combined with two processes integral to the service determination: (1) Safety Assessment and Safety Planning and (2) The Housing Stability Plan. All case management activities are designed collaboratively with the survivor.
4. The supportive services that HVA will provide, or connect the survivor, to include survivor support groups (HVA or CASA), behavioral and physical health services (Suncoast Center and Evara Health), food assistance (HVA), legal assistance (Suncoast Legal Services), childcare (Early Learning Coalition), transportation (HVA), employment (CareerSource and HVA), and mainstream benefits such as SNAP, TANF, and Medicaid (DCF).
5. Case Managers assist program participants with supportive services as described above to help ensure ongoing housing stability. They also assist with applying for other rental programs (e.g., HCVs) or other affordable housing options. Clients can contact HVA for help with temporary financial assistance in the event of a crisis to ensure housing stability.

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

	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping information and locations confidential;
4.	training staff on safety and confidentiality policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1. HVA ensures confidentiality during the intake and interview process to minimize coercion of survivors. The survivor is the driver in determining means and location. Informed consent is utilized to empower the survivor. Informed consent is also important in ensuring safety, well-being, and avoiding further trauma as they will not be coerced or pressured into decisions counter to their best interest. All communication with the survivor is done in a secure and private method such as encrypted e mails or phone lines – voice mails are not left. HVA empowers the survivors by ensuring they understand they have the right to refuse to answer any questions that they are uncomfortable with. Survivors may use pseudonyms or anonymous identifiers.
2. The most critical process in ensuring safety is the safety assessment and plan. The program works collaboratively with the survivor to incorporate an emergency response plan. Confidentiality is always honored when conducting a housing search and no identifiable information is shared with prospective lessors. The program prioritizes housing options that are in safe neighborhoods and considers proximity to law enforcement and emergency services. HVA conducts background checks on the lessor to ensure they do not pose any safety risks to the survivor.
3. HVA employs strict confidentiality policies to safeguard the survivor's information. All staff are trained on the policies through mandatory training. HVA stores documentation in a confidential record system. Any written documentation is guarded by two locks – a locked cabinet and a secured office. HVA limits access to a survivor's records - only those staff with a legitimate "need to know" are granted access to the system.
4. Safety and confidentiality training is conducted as part of all pre-service or CORE training. Adherence to policies and procedures are routinely monitored.
5. Locating housing with security features is critical to achieving physical safety – this may include (1) finding a home in a secure or gated area, (2) installing a security alarm system, and (3) installing locks that are of high quality. Through safety assessments and planning the program works with the survivor to determine any vulnerabilities or security risks.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.	

(limit 2,500 characters)

All HVA services are delivered using the Empowerment Model. This model is a client centered approach - safety assessments and planning are done collaboratively with the survivor. Safety insurances are built on mutual trust and open communication between HVA and the survivor.

HVA evaluates their ability to ensure the safety of the survivor through timely completion of safety plans. Safety plans provide (1) strategies for survivors to protect themselves, (2) empower the survivors through planning thus boosting their confidence and decision-making ability, (3) reduce risk, (4) enhance emotional support for the survivor, (5) provide information on legal resources and steps to take, and (6) identify strategies for the survivor to achieve financial dependence. 100% of HVA participants exit with a safety plan. 97% of survivors receive a comprehensive service plan from HVA within 72 hours of contact.

HVA employs a Continuous Quality Improvement Model that mandates (1) clear protocols for collecting and entering data, (2) timely review of all data to drive performance improvement, (3) utilization of diverse teams to review the data for improvement strategies, and (4) sharing data at all levels of the organization including the Board of Directors.

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

(limit 5,000 characters)

1. HVA ensures that the placement and stabilization in permanent housing is consistent with the program participant's wishes and stated needs. HVA employs the Empowerment Model which includes a client centered approach. Safety is central to all decisions to include plans to leave an abusive relationship. First and foremost, safety planning is conducted with all survivors who lead all decision making. The Housing Stability Plan is used as the primary driver of discussions related to placement and permanent housing – the plan identifies the survivors' strengths, challenges, supports, and actively engages them in safety planning. All casework activities that result from safety planning and The Housing Stability Plan are done in concert with the survivor- no decisions are made outside the participants wishes or stated needs.

2. At HVA, there is an environment of agency and mutual respect. This is done through the employment of the Empowerment Model philosophy in all aspects of service delivery. The model is designed to encourage and support survivors. The model is further built on equipping survivors with the tools that they need to regain power and control that their abusers have taken from them. Staff are trained and monitored on the implementation of the model to ensure consistent practice. HVA has strong grievance policies in place to empower the survivor to discuss with senior staff any concerns with staff.

3. HVA provides participants with information on the impact of trauma. Staff lead support groups that educate the participants on the impact of trauma. HVA staff in addition provide participants information on counseling, empowerment workshops, and related support groups. Staff support the participants in securing transportation to all appointments or meetings where trauma may be addressed.

4. HVA emphasizes the strengths of the survivors in all aspects of service delivery. Participants are invited to participate in a Six Week Pathway Course. This staff-led course is designed to build on the strengths of the individual and goal setting. The program utilizes assessment materials where survivors are encouraged to share their strengths. Safety planning is built upon empowering the staff to describe their strengths and supports and The Housing Stability Plan is built on the survivor identifying their strengths.

5. HVA builds all program service delivery around culturally inclusive and sensitive practices. HVA employs staff that are representative of the population served. HVA employs bilingual staff in ALL divisions of service. HVA's Executive Leadership and Board of Directors are diverse. HVA's The Haven's Advisory Committee is led by an African American female and the committee is representative of the population served. HVA trains all employees in cultural responsiveness and inclusivity. HVA has partnered with the Intercultural Advocacy Center and community-based programs in the LGBTQ community to receive guidance in delivering culturally appropriate services.

6. HVA offers multiple opportunities daily for participants to connect – this are peer to peer interactions, staff support, work with their advocate, volunteers. All clients are invited to participate in support groups, volunteerism, and program activities to increase their daily connections.

7. HVA offers weekly parenting classes. The delivery of this service is in the early phases of implementation and promotes child development knowledge, positive discipline strategies, conflict resolution techniques, effective

communication, and healthy boundaries.

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

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

(limit 5,000 characters)

HVA provides two categories of supportive services – those the organization directly provides and services that the survivor is connected to.

HVA delivers directly supportive services that are available to the survivor, including the following.

- (1) 24-hour crisis hotline, support groups, and case management support beyond rapid rehousing.
- (2) At any juncture, food can immediately be provided to a survivor and their family.
- (3) HVA regularly assists participants with filling out necessary paperwork for HUD housing. HVA also offers financial assistance through Publix and Duke Energy funding
- (4) HVA offers employment services through our Pathway's to Success Program.

All service delivery is trauma informed and practices align with the Empowerment Model.

HVA provides linkages to support services through strong partnerships, including the following.

- (1) Behavioral Health Services through a Memorandum of Understanding with Suncoast Center.
- (2) Medical Services through partnerships with Evara Health.
- (3) Legal Services through partnership with Suncoast Legal Services.
- (4) HUD Housing Support through partnerships with the Clearwater, St. Pete, and Pinellas County Housing Authorities.
- (5) Childcare Services through the Early Learning Coalition of Pinellas County.
- (6) Transportation support is provided throughout the service delivery through bus passes, taxis, or services such as Uber and Lyft. All transportation support is carefully assessed to ensure safety.
- (7) A partnership with CareerSource Tampa Bay to provide employment and related services.
- (8) Survivors who may be addressing addiction are referred to Operation PAR or local twelve step programs.
- (9) An extensive catalog of support groups for survivors is provided to the participant.
- (10) Services to children are a cornerstone of HVA's programming – this may include support in communicating or the public school system, linkage to play therapy, or after-school programming.
- (11) Through the HVA Pathways to Success Program and volunteers, HVA provides financial literacy services.
- (12) Survivors will be linked to all benefits available through DCF to include SNAP and Medicaid.

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

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

(limit 5,000 characters)

1. HVA ensures that the placement and stabilization in permanent housing is consistent with the program participant's wishes and stated needs. HVA will continue to employ the Empowerment Model which includes a client centered approach. The survivor is the center of the process and acknowledges that survivors are experts in their own lives. The Housing Stability Plan will be used as the primary driver of discussions related to placement and permanent housing – the plan identifies the survivors' strengths, challenges, supports, and actively engages them in safety planning. Safety will be central to all decisions. All decisions will be made at a pace comfortable to the survivor. Safety planning is the first and most critical step before all casework activities. The safety planning process is led by the survivor. All case management activities are approved and led by the survivor and proceed at their pace.

2. HVA maintains an environment of agency and mutual respect. This will be done through consistent practice of the Empowerment Model. The client centered model focuses on providing information, resources, and support to survivors to enable them to make informed decisions about their own lives. The Rapid Rehousing Program is built on trust, active listening, and collaborative decision making – these principles are and will be central to all activities. Cultural sensitivity is critical when establishing an environment of mutual respect – all program staff will be mandated to participate in cultural competency training. Continuous learning will be central to the program to enhance staff skills to better serve the survivors. Grievance procedures are communicated with the participant to ensure that they express concerns.

3. HVA provides participants with information on the impact of trauma. Staff will be trained and ultimately certified in delivering trauma-informed care to the survivors. Staff will lead support groups for the survivors that educate the participants on the impact of trauma. The Rapid Rehousing Advocate will be trained in trauma informed care and ensure that case management activities include the provision of information to participants on the impact of trauma.

4. HVA emphasizes the strengths of the survivors in all aspects of service delivery. Participants will be invited to participate in the Six Week Pathway program – this program delivered by HVA staff focuses on building strengths of survivors and goal setting. The Housing Stability Plan encourages survivors to share their strengths. Safety planning is built upon empowering the survivor in describing their strengths and support systems. Casework activities will support survivors in self-care by utilizing positive affirmations, engaging in physical exercise that is appealing to the participant, reigniting hobbies or interests, meditation, and connecting with friends and families who are safe and supportive.

5. HVA builds all program service delivery around culturally competent practices. All staff will be trained on the delivery of culturally competent services for populations to include persons of color and the LGBTQ community. Staff are representative of the clients served and bilingual staff are always available. The Board of Directors and Executive Leadership are representative of the population served.

6. HVA offers multiple opportunities daily for participants to connect – peer to peer interactions, staff support, work with their advocate, volunteers. Volunteers are utilized to support the survivor in reviewing leases, budgeting, and securing employment promoting peer to peer interactions. Survivors are invited to attend

support groups promoting both peer and staff support.

7. Parenting classes will be offered to the participants – the curriculum will be evidenced based and promote an understanding of child development, positive discipline, conflict resolution, effective communication, stress management, bonding, and assist with peer support. The parenting class will be provided in a safe environment (confidential location) for the survivor.

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

(limit 2,500 characters)

1. HVA received input from an Advisory Committee of volunteers – the committee consists of survivors of domestic violence with lived experience. The committee meets regularly to discuss policies, procedures, and practices of HVA programs. The committee is currently led by Board Member Major Nathaly Patterson of the St. Pete Police Department's Investigative Support Division who serves as coordinator of the Tampa Bay Human Trafficking Task Force.

2. HVA develops all policies and procedures in concert with the Advisory Committee. No program decisions are made without the support and approval of the committee. The Advisory Committee meets quarterly on site at The Haven's Outreach Center.

4B. Attachments Screen For All Application Questions

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

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.		
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.		
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.		
4.	Attachments must match the questions they are associated with.		
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.		
6.	If you cannot read the attachment, it is likely we cannot read it either.		
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).		
	. We must be able to read everything you want us to consider in any attachment.		
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.		
8.	Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.		
Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	1C-7 PHA Homeless...	09/14/2023
1C-7. PHA Moving On Preference	No		
1D-11a. Letter Signed by Working Group	Yes	1D-11a Letter Sig...	09/13/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	08/03/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	07/30/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	07/30/2023
1E-2a. Scored Forms for One Project	Yes	1E-2a Scored Form...	09/22/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	1E-5 Notification...	09/06/2023
1E-5a. Notification of Projects Accepted	Yes	1E-5a Notificatio...	09/06/2023
1E-5b. Local Competition Selection Results	Yes	1E-5b Local Compe...	09/01/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	2A-6 HDX Competit...	09/01/2023
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: 1C-7 PHA Homeless Preference

Attachment Details

Document Description:

Attachment Details

Document Description: 1D-11a Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: 1E-2a Scored Forms for One Project

Attachment Details

Document Description: 1E-5 Notification of Projects Rejected-Reduced

Attachment Details

Document Description: 1E-5a Notification of Projects Accepted

Attachment Details

Document Description: 1E-5b Local Competition Selection Results

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: 2A-6 HDX Competition Report

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	07/28/2023
1B. Inclusive Structure	08/08/2023
1C. Coordination and Engagement	09/22/2023
1D. Coordination and Engagement Cont'd	09/22/2023
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/19/2023
2B. Point-in-Time (PIT) Count	09/22/2023
2C. System Performance	09/21/2023
3A. Coordination with Housing and Healthcare	09/20/2023
3B. Rehabilitation/New Construction Costs	08/01/2023
3C. Serving Homeless Under Other Federal Statutes	09/13/2023

4A. DV Bonus Project Applicants	09/14/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

1C-7

PHA HOMELESS PREFERENCE

Neil Brickfield
Executive Director

11479 Ulmerton Road, Largo, Florida 33778
Phone: (727) 443-7684 | Fax: (727) 489-0757
TDD: (800) 955-8770 | TTY: (800) 955-8771



September 14, 2023

Homeless Leadership Alliance of Pinellas, Inc.
740 4th Street North, Suite 206,
St. Petersburg, FL 33701

VKelly@HLPinellas.org

PCHA Homeless Preference

4th Preference: Homeless Families Completing Self-Sufficiency Program

A preference will be given to Homeless Families Completing Approved Self-Sufficiency Programs in Pinellas County. The waiting list will remain open for up to 75 homeless families annually who have completed a residential self-sufficiency program in Pinellas County through an approved program. The following agencies have approved residential self-sufficiency programs: Homeless Emergency Project, RCS Grace House, the YWCA, Salvation Army North County, Family Housing Assistance Program (FHAP) of Pinellas County, and Boley Centers Supportive Housing, Personal Enrichment through Mental Health Services (PEMHS) and Alpha House of St. Petersburg. PCHA reserves the right to amend the list of approved programs at any time. In addition, under this preference, PCHA will accept referrals from the Public Child Welfare Agency, its designee, or another agency approved by PCHA, for families whose children have been removed from the household or are in imminent danger of being removed, and the lack of decent, safe and affordable housing is the primary reason. 10 Points

BOARD OF COMMISSIONERS

Veronica Hickey
Chair

Chloe Firebaugh
Vice Chair

Wayne Mineo
Commissioner

Alen Tomczak
Commissioner





Excerpt from HCV Administrative Plan

Homeless families = One (1) Point: Applicant family is currently residing in Emergency Shelter, Transitional Shelter, Permanent Supportive Housing or participating in homeless services at/in/through a participating Pinellas County Continuum of Care agency and have received a written letter of recommendation from that agency not less than 30 days ago.

Excerpt from Public Housing Admissions and Continuing Occupancy Policy (ACOP)

One (1) point will be awarded to homeless individuals or families who are residing in an Emergency Shelter or participating in homeless services in or through a Continuum of Care (COC) Program. TO receive the preference, an applicant must provide a written letter of recommendation from the COC or a COCO-participating agency dated within thirty (30) days of notification of an offer of Public Housing unit.

1D-11a

LETTER SIGNED BY WORKING GROUP

To: Homeless Leadership Alliance of Pinellas
From: Lived Experience Working Group
Re: Letter of Support for FL-502 HUD CoC NOFO Application

As participants in the Lived Experience Working Group, we write to provide support for the priorities set forth by the Continuum of Care (CoC) for serving households families experiencing homelessness in Pinellas County. We support the CoC Application to HUD for funding to support the CoC in making homelessness a rare, brief, and one-time experience in our community.

The CoC as a whole has been working diligently to serve those experiencing homelessness and has been very open to feedback and recommendations from individuals with lived experience in the community.

Matthew Zimmerman
Printed Name

M. Zimmerman
Signature

9/12/23
Date

ERIC PETERS
Printed Name

Eric Peters
Signature

9/12/23
Date

Jennifer Haithcock
Printed Name

Jennifer Haithcock
Signature

9/12/23
Date

1D-2a

HOUSING FIRST EVALUATION

Housing First Questionnaire

Please answer the following questions related to the project's eligibility criteria and project rules.

1. Will the project require a background screening prior to project entry (excluding sex offender/predator check, if the project is facility-based)?
Yes ☐ No ☐
2. Will the project prohibit persons with certain criminal convictions (e.g., violent felonies, arson) from entering your project (excluding registered sex offender/predator, if the project is facility-based)?
Yes ☐ No ☐
3. Will the project require drug or alcohol testing prior to entry?
Yes ☐ No ☐
4. Will the project require participants to be clean and sober prior to project entry and/or during project stay?
Yes ☐ No ☐
5. Will the project require alcohol/drug tests on participants for any reason?
Yes ☐ No ☐
6. Will a positive alcohol/drug test result in termination from the project and/or require participant to participate in substance abuse treatment and/or detox to resume project services?
Yes ☐ No ☐
7. Will the project require participants to have a mental health evaluation prior to project entry?
Yes ☐ No ☐
8. Will the project require project participants who demonstrate mental health symptoms to participate in mental health services and/or medication compliance (excluding those who present a danger to self or others) as a condition of services?
Yes ☐ No ☐
9. Will the project require participants to have income at the time of project entry?
Yes ☐ No ☐
10. Will the project require participants to obtain an income as a condition of remaining in the project?
Yes ☐ No ☐

11. Will the project require participants to participate in supportive services (such as vocational training, employment preparation, budgeting or life skills classes; not including required case management meetings) as a condition of continued services?
Yes ☐ No ☐
12. Will the project require participants to be “progressing” in their goals to remain in the project?
Yes ☐ No ☐
13. Will the project require participants to sign a services plan agreement to receive your services? (Please note a service plan is not the same as a housing plan.)
Yes ☐ No ☐
14. Will project participants have to do “chores” as a part of project stay and/or will project participants who do work around the facility receive special treatment or are rewarded with special benefits (applicable for facility- based transitional housing and permanent housing)?
Yes ☐ No or N/A ☐
15. Will the project include curfews and/or required ‘lights out’ time for all participants (applicable for facility based transitional housing and permanent housing)?
Yes ☐ No or N/A ☐
16. Will the project exclude or refuse project entry based on race, color, religion, national origin, disability, sex, sexual orientation, gender identity, and/or gender expression?
Yes ☐ No ☐
17. Will the project include any requirements, outside of those typically found in a lease agreement or in “community-living” conduct rules? Examples of acceptable ‘community- living’ rules include agreement to be non-violent, agreement to no weapons on site, agreement to no alcohol/drug consumption on site.
Yes ☐ No ☐
18. Will a project participant be required to leave the project and/or will agency refuse service if project participant is disrespectful to a staff member or other project participant, including making verbal threats, acting belligerently, or “having an attitude?”
Yes ☐ No ☐
19. Will project participants have to travel to the agency’s office(s) to receive the majority of their services, including case management?
Yes ☐ No ☐
20. Will the project exclude any dependent children in the household, based on age and/or gender, from remaining with the household at the project (applicable for facility-based permanent housing for households with children)?
Yes ☐ No or N/A ☐

21. Will the project prohibit any member(s) of a household (as defined by the household), based on age, gender, biological relationship, sexual orientation, and/or marital status, from residing together?

Yes ☐ No ☐

22. Will the project exclude any family composition type: single dad, single mom, same gender couples, opposite-gender couples, multi-generational, and non-romantic groups who present for services as a family?

Yes ☐ No ☐

23. Will the project require project participants to be “placed” in accordance with their sex assigned at birth and/or “perceived” gender; and/or require participant to “prove” their gender identity prior to receiving services?

Yes ☐ No ☐

24. Will the project exclude participants who do not have a form of identification?

Yes ☐ No ☐

Please describe any challenges that that may prevent this project from implementing Housing First principles and practices. [Click or tap here to enter text.](#)

1E-1

WEB POSTING OF LOCAL COMPETITION DEADLINE

Homeless Leadership Alliance

pinellashomeless.org

PINELLAS CONTINUUM OF CARE

HOMELESS LEADERSHIP ALLIANCE

PINELLAS HMIS

GET INVOLVED

NEWS AND EVENTS

GET HELP

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Annual CoC Notice of Funding Opportunity (NOFO)

The Department of Housing and Urban Development released its FY 2023 Notice of Funding Opportunity (NOFO) for the annual CoC competition on July 6th, 2023. The Pinellas Continuum of Care (CoC) will begin the 2023 NOFO competition by releasing instructions and applications via www.PinellasHomeless.org on July 14th at 10:00am. Applicants seeking renewal funding will submit an Intent to Renew form. New and expanded projects will submit a full Request for Proposal.

If you are submitting a New or Expansion proposal, at least one agency representative is required to attend the Applicant Conference on July 20th at 9:30am via Zoom. Please register utilizing this form to receive the virtual link: <https://hlapinellas.wufoo.com/forms/qgqv06uzoe8gzva/>.

If you have any questions or concerns not addressed at the Applicant Conference, you may submit them to CoCNOFO@HLAPinellas.org between July 17th at 9:00am and August 3rd at 4:00pm. Questions will be responded to in a timely manner and posted on www.PinellasHomeless.org each afternoon. The cone of silence period will begin at 4:01pm on August 4th, and we will not be able to respond to questions after that time.

Please send applications via email to CoCNOFO@HLAPinellas.org no later than 4:00pm on August 9, 2023.

To apply you must meet the following eligibility criteria:

- Registered 501(c)(3).
- Registered and in good standing in the State of Florida based on current filing with the Secretary of State, Division of Corporations.
- Registered with SAM.gov, and able to obtain a Federal Unique Entity Identifier (formerly DUNS #). HLA staff will use SAM.gov to verify if an agency is on the Excluded Parties List. Any party on the list will be considered ineligible for funding.

FY23 NOFO MATERIAL PACKET

COC NOFO RFP INSTRUCTIONS

INTENT TO RENEW

RENEWAL PROJECT SCORING TOOL

Renewal+Project+...xlsx

78°F Mostly cloudy

Search

10:01 AM 7/14/2023

1E-2

LOCAL COMPETITION SCORING TOOL

FL-502 Renewal Project Scoring Tool

Organization:	Project Type:
Project:	Request:

Race Equity Narrative	Scoring Rubric
Does the Race Equity Narrative reference the CoC's Race Equity Tool Kit?	5 pts. Yes 0 pts. No
Has the organization taken steps to secure a commitment to race equity from the board of directors, funders, community stakeholders, volunteers, employees, and clients?	Scale of 1 (low) -5 (high) points
Has the organization adopted a racial equity approach through policies and procedures, assessments, planning, and/or tools?	Scale of 1 (low) -5 (high) points
Has the organization created an informal, equitable, inclusive environment for staff and/or communities served?	Scale of 1 (low) -5 (high) points
Points Available	20

Timely Drawdowns and Recaptured Funds (See Note)	Scoring Rubric
<i>Note: For projects that have been operating less than a year, full points will be awarded.</i>	
Drawdowns as evidenced by eLOCCS for the past year	5 pts. Yes and all timely
	4 pts. One quarter late
	3 pts. Two quarters late
	2 pts. Three quarters late
	0 pts. All quarters late or missing
In the past 3 years has the organization's HUD CoC budget been fully spent? (No CoC funds were recaptured)	5 pts. Yes
	0 pts. No
What was the overall monitoring score from the most recent Homeless Leadership Alliance of Pinellas (HLA) Monitoring?	5 pts. 91-100%
	4 pts. 81-90%
	3 pts. 71-80%
	2 pts. 61-70%
	1 pt. 51-60%
	0 pts. Below 50%
Points Available	15

Project Performance for Type of Intervention (See Notes)

Notes:

(1) For projects that have been operating less than one full year, the full available points will be awarded.

(2) For percentages, if the denominator was zero and therefore percentage cannot be computed, all available points will be awarded.

Permanent Supportive Housing Criteria		Scoring Rubric	
Average length of stay in program	≥ 365 days		13 pts.
	< 365 days		0 pts.
Percent of participants who remain housed in PSH or exit to PH	≥ 90%		20 pts.
	< 90%		0 pts.
New or increased employment income for project stayers	≥ 10%		8 pts.
	< 10%		0 pts.
New or increased non-employment income for project stayers	≥ 30%		8 pts.
	< 30%		0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 10%		8 pts.
	< 10%		0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 30%		8 pts.
	< 30%		0 pts.
Points Available		65	
Transitional Housing Criteria		Scoring Rubric	
Average number of days between entry and residential move-in	≤ 180 days		13 pts.
	> 180 days		0 pts.
Percent of individuals in TH projects who moved to permanent housing at exit	≥ 50%		20 pts.
	< 50%		0 pts.
New or increased employment income for project stayers	≥ 35%		8 pts.
	< 35%		0 pts.
New or increased non-employment income for project stayers	≥ 35%		8 pts.
	< 35%		0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 35%		8 pts.
	< 35%		0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%		8 pts.
	< 35%		0 pts.
Points Available		65	

Rapid Rehousing Criteria		Scoring Rubric	
Average number of days between project entry to residential move-in	≤ 30 days	13 pts.	
	> 30 days	0 pts.	
New or increased employment income for project stayers	≥ 15%	13 pts.	
	< 15%	0 pts.	
New or increased non-employment income for project stayers	≥ 20%	13 pts.	
	< 20%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 20%	13 pts.	
	< 20%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 15%	13 pts.	
	< 15%	0 pts.	
Points Available		65	
Safe Haven Criteria		Scoring Rubric	
Percent move to permanent housing	≥ 75%	21 pts.	
	< 75%	0 pts.	
New or increased employment income for project stayers	≥ 10%	11 pts.	
	< 10%	0 pts.	
New or increased non-employment income for project stayers	≥ 35%	11 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit.	≥ 25%	11 pts.	
	< 25%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 60%	11 pts.	
	< 60%	0 pts.	
Points Available		65	
Joint TH/RRH Criteria		Scoring Rubric	
Participants spend ____ days from project entry to residential move-in	≤ 180 days	13 pts.	
	> 180 days	0 pts.	
Percent move to permanent housing	≥ 50%	20 pts.	
	< 50%	0 pts.	
New or increased employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
New or increased non-employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained employment income during the reporting	≥ 35%	8 pts.	

period or at exit.	< 35%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	8 pts.
	< 35%	0 pts.
Points Available	65	
HMIS	Scoring Rubric	
HMIS collects all Universal Data Elements as set forth in the HUD HMIS Data Standards	Yes	20 pts.
	No	0 pts.
HMIS has the ability to deduplicate client records	Yes	15 pts.
	No	0 pts.
HMIS produces all HUD-required reports	Yes	15 pts.
	No	0 pts.
HMIS produces reports as needed for monitoring and tracking performance data	Yes	15 pts.
	No	0 pts.
Points Available	65	
Coordinated Entry	Scoring Rubric	
There is a standardized assessment process	Yes	17 pts.
	No	0 pts.
There is a process in place to prioritize households that meet specified vulnerability criteria	Yes	16 pts.
	No	0 pts.
The system refers participants to appropriate housing and services that fit their needs and preferences	Yes	16 pts.
	No	0 pts.
There is a strategy for advertising that is designed to reach homeless persons with the highest barriers	Yes	16 pts.
	No	0 pts.
Points Available	65	

Summary	Points Available
Race Equity	20
Timely Drawdowns and Recaptured Funds	15
Project Performance	65
Subtotal	100

Discretionary Bonus Points

Up to 10 bonus points may be awarded based on the RRC's judgment regarding a project's importance in the CoC system of care, the consequences of funding loss, and/or a focus on subpopulations with the most severe barriers to obtaining and retaining housing stability.

Scale 0-10

Points Available	10
Total Available Points Including Bonus	110

FL-502 New Housing Project Scoring Tool (Non-DV Bonus Projects)

Organization:

Project Type:

Project:

Request:

Expected Project Outcomes		
Permanent Supportive Housing Criteria	Scoring Rubric	
Average length of stay in program	≥ 365 days	3 pts.
	< 365 days	0 pts.
Percent of participants who remain housed in PSH or exit to PH	≥ 90%	8 pts.
	< 90%	0 pts.
New or increased employment income for project stayers	≥ 10%	3 pts.
	< 10%	0 pts.
New or increased non-employment income for project stayers	≥ 30%	3 pts.
	< 30%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 10%	3 pts.
	< 10%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 30%	3 pts.
	< 30%	0 pts.
Points Available		23
Rapid Rehousing Criteria	Scoring Rubric	
Average number of days between project entry to residential move-in	≤ 30 days	5 pts.
	> 30 days	0 pts.
New or increased employment income for project stayers	≥ 15%	5 pts.
	< 15%	0 pts.
New or increased non-employment income for project stayers	≥ 20%	4 pts.
	< 20%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 20%	5 pts.
	< 20%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 15%	4 pts.
	< 15%	0 pts.
Points Available		23
Joint TH/RRH Criteria	Scoring Rubric	

Participants spend ____ days from project entry to residential move-in	≤180 days	3 pts.
	>180 days	0 pts.
Percent move to permanent housing	≥ 50%	8 pts.
	< 50%	0 pts.
New or increased employment income for project stayers	≥ 35%	3 pts.
	< 35%	0 pts.
New or increased non-employment income for project stayers	≥ 35%	3 pts.
	< 35%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 35%	3 pts.
	< 35%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	3 pts.
	< 35%	0 pts.
Points Available		23

Drawdowns and Monitoring		Scoring Rubric
Note: If any of the below scored elements is Not Applicable to a project, full points should be awarded for that item.		
Has any CoC-funded project been monitored by HUD?		Not scored
If Yes, was the report attached and the agency fully responsive to findings and concerns?	2 pts.	Yes or N/A
	0 pts.	No
In the past 3 years has the organization's HUD CoC budget been fully spent? (No funds were recaptured)	2 pts.	Yes
	0 pts.	No
Is the organization on a PIP?	2 pts.	No
	0 pts.	Yes
What was the overall monitoring score from the most recent Homeless Leadership Alliance of Pinellas (HLA) Monitoring?	3 pts.	91-100%
	2 pts.	81-90%
	1 pts.	71-80%
	0 pts.	Below 71%
Was there a plan due to the most recent HLA Monitoring?		Not scored
If Yes, were the agency's resulting actions fully responsive?	2 pts.	Yes
	0 pts.	No

Did the organization attach their eLOCCS screens to show timely financial drawdowns for the last fiscal year?	3 pts.	Yes all timely
	2 pts.	One quarter late
	1 pts.	Two quarters late
	0 pts.	Missing or more than two quarters late

Points Possible:	14
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Budget and Cost Effectiveness	Scoring Rubric	
Is the budget complete and was it calculated correctly?	Scale of 1 (low) -2 (high) points	
Does the budget explain how the amount of funding being requested and/or listed as match in each section was calculated?	Scale of 1 (low) -2 (high) points	
What percentage match will be provided?	2 pts.	50-100%
	1 pts.	25-50%
	0 pts.	Below 25%
Is the project is cost-effective, including operations and supportive services, with such costs not deviating substantially from the norm in our CoC for the program type and population served?	Scale of 1 (low) -2 (high) points	
	See DSP Committee Recommendations	
Points Possible:	8	

Organizational Capacity and Experience Narrative	Scoring Rubric	
Does the organization have a history of providing services to low-income individuals/households?	Scale of 1 (low) -2 (high) points	
Does the organization have experience operating the proposed or similar projects?	Scale of 1 (low) -2 (high) points	
Does the organization have the capacity to operate the proposed program, including having an assigned staff person to monitor program regulations and requirements, financial processing and billing, and data accuracy and reporting? If not, does the proposal describe the agency's plans to get to capacity?	Scale of 1 (low) -2 (high) points	

Is the organization financially sound? Do they describe their organizational liquidity, percent of liabilities and assets, and percent of program expenses and relation to their total expenses?	Scale of 1 (low) -2 (high) points
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Points Possible:	8
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Project Description Narrative	Scoring Rubric
Does the description provide sufficient information about the full scope of the project?	Scale of 1 (low) -2 (high) points
Does the description explain how the project will improve the performance of the community's overall system, fill a gap/need within our system, and move the community forward to make homelessness rare, brief and a one-time experience?	Scale of 1 (low) -2 (high) points
Does the description explain how the project addresses the needs of special populations?	Scale of 1 (low) -2 (high) points
Does the description provide a good explanation of the housing stabilization plan?	Scale of 1 (low) -2 (high) points
Does the description indicate a full operationalization of traum-informed care?	Scale of 1 (low) -2 (high) points
Does the description explain how supports are provided?	Scale of 1 (low) -2 (high) points
Does the description indicate a collaboration with PHAs?	Scale of 1 (low) -5 (high) points
Does the description indicate a good collaboration with healthcare providers, including formal agreements?	Scale of 1 (low) -5 (high) points
Does the description explain how mainstream resources are leveraged?	Scale of 1 (low) -2 (high) points
Points Possible:	24

Lived Experience Narrative	Scoring Rubric
Does the organization incorporate the input and experience of people with lived experience into their structure, decision making, and quality improvement efforts?	Scale of 1 (low) -5 (high) points
Points Possible:	5

Race Equity Narrative	Scoring Rubric
Has the organization taken steps to secure a commitment to race equity from the board of directors, funders, community stakeholders, volunteers, employees, and clients?	Scale of 1 (low) -2 (high) points
Has the organization adopted a racial equity approach through policies and procedures, assessments, planning, and/or tools?	Scale of 1 (low) -2 (high) points
Has the organization created an informal, equitable, inclusive environment for staff and/or communities served?	Scale of 0 (low) -1 (high) points
Points Possible:	5

Housing First	Scoring Rubric
What was the Housing First Questionnaire score?	22-24 13 points
	19-21 5 points
	18 or below 0 points
Points Possible:	13

Summary	Points Possible
Expected Project Outcomes	23
Drawdowns and Monitoring	14
Budget and Cost Effectiveness	8
Organizational Capacity and Experience	8
Project Description Narrative	24
Lived Experience Narrative	5
Race Equity Narrative	5
Housing First Questionnaire	13
Total Available Points	100

FL-502 New DV Bonus Project Scoring Tool

Organization:
Project:

Project Type:
Request:

Note: If any of the below scored elements is Not Applicable to a project, full points will be awarded for that item.

Expected Project Outcomes		
Rapid Rehousing Criteria	Scoring Rubric	
Average number of days between project entry to residential move-in	≤ 30 days	5 pts.
	> 30 days	0 pts.
New or increased employment income for project stayers	≥ 15%	5 pts.
	< 15%	0 pts.
New or increased non-employment income for project stayers	≥ 20%	4 pts.
	< 20%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 20%	5 pts.
	< 20%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 15%	4 pts.
	< 15%	0 pts.
Points Available		23
Coordinated Entry	Scoring Rubric	
Percent of households assessed using a standardized assessment tool, with safety planning and confidentiality protocols	≥ 95%	6 pts.
	< 95%	0 pts.
Percent of households referred to housing and/or services consistent with their needs and choices	≥ 95%	6 pts.
	< 95%	0 pts.
Percent of households referred within 24 hours	≥ 95%	6 pts.
	< 95%	0 pts.
Percent of households entered into HMIS or an HMIS-comparable database	≥ 95%	5 pts.
	< 95%	0 pts.
Points Available		23

Drawdowns and Monitoring	Scoring Rubric
Has any CoC-funded project been monitored by HUD?	Not scored

If Yes, was the report attached and the agency fully responsive to findings and concerns?	3 pts.	Yes or N/A
	0 pts.	No
Has HUD recaptured any CoC funds within the past 3 years?	3 pts.	No
	0 pts.	Yes
Is the organization on a PIP?	2 pts.	No
	0 pts.	Yes
What was the overall monitoring score from the most recent Homeless Leadership Alliance of Pinellas (HLA) Monitoring?	3 pts.	91-100%
	2 pts.	81-90%
	1 pts.	71-80%
	0 pts.	Below 71%
Was there a plan due to the most recent HLA Monitoring?		Not scored
If Yes, were the agency's resulting actions fully responsive?	2 pts.	Yes
	0 pts.	No
Did the organization attach their eLOCCS screens to show timely financial drawdowns for the last fiscal year?	3 pts.	Yes all timely
	2 pts.	One quarter late
	1 pts.	Two quarters late
	0 pts.	Missing or more than two quarters late
Points Possible:	16	

Budget and Cost Effectiveness	Scoring Rubric	
Is the budget complete and was it calculated correctly?	Scale of 1 (low) -2 (high) points	
Does the budget explain how the amount of funding being requested and/or listed as match in each section was calculated?	Scale of 1 (low) -2 (high) points	
What percentage match will be provided?	3 pts.	50-100%
	2 pts.	25-50%
	0 pts.	Below 25%
Is the project is cost-effective, including operations and supportive services, with such costs not deviating substantially from the norm in our CoC for the program type and population served?	Scale of 1 (low) -2 (high) points See DSP Committee Recommendations	
Points Possible:	9	

Organizational Capacity and Experience Narrative	Scoring Rubric
Does the organization have a history of providing services to low-income individuals/households?	Scale of 1 (low) -3 (high) points
Does the organization have experience operating the proposed or similar projects?	Scale of 1 (low) -3 (high) points
Does the organization have the capacity to operate the proposed program, including having an assigned staff person to monitor program regulations and requirements, financial processing and billing, and data accuracy and reporting? If not, does the proposal describe the agency's plans to get to capacity?	Scale of 1 (low) -3 (high) points
Is the organization financially sound? Do they describe their organizational liquidity, percent of liabilities and assets, and percent of program expenses and relation to their total expenses?	Scale of 1 (low) -3 (high) points
Points Possible:	12

Project Description Narrative	Scoring Rubric
Does the description provide sufficient information about the full scope of the project?	Scale of 1 (low) -2 (high) points
Does the description sufficiently explain how advocacy will focus on addressing the needs identified by victims and tailor services to meet their unique needs?	Scale of 1 (low) -2 (high) points
Does the description explain how the project will improve the performance of the community's overall system, fill a gap/need within our system, and move the community forward to make homelessness rare, brief and a one-time experience?	Scale of 1 (low) -2 (high) points
Is there sufficient explanation about how the design and operation of the project will be approached with an understanding of trauma, and the impact trauma has on those receiving services, as well as victim-centered practices?	Scale of 1 (low) -2 (high) points

Does the description explain how staff are trained in best practices from the perspective of trauma informed care and victim-centered practices?	Scale of 1 (low) -2 (high) points
Is there a good explanation for why support is needed and critical to assist survivors of domestic violence, dating violence, sexual assault, or stalking?	Scale of 1 (low) -2 (high) points
<i>Rapid Rehousing Projects Only:</i>	
Does the description provide a good explanation of the housing stabilization plan?	Scale of 1 (low) -2 (high) points
Is there an explanation of how the project will ensure critical supports and services needed to achieve housing stability and increasing income?	Scale of 1 (low) -2 (high) points
Does the description indicate a collaboration with PHAs?	Scale of 1 (low) -4 (high) points
Does the description indicate a good collaboration with healthcare providers, including formal agreements?	Scale of 1 (low) -4 (high) points
Does the description indicate fully using mainstream resources?	Scale of 1 (low) -2 (high) points
<i>Coordinated Entry Projects Only:</i>	
Is there sufficient explanation of how the project will implement policies, procedures, and practices that equip the CoC's Coordinated Entry System (CES) to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking?	Scale of 1 (low) -14 (high) points
Points Possible:	26

Lived Experience Narrative	Scoring Rubric
Does the organization incorporate the input and experience of people with lived experience into their structure, decision making, and quality improvement efforts?	Scale of 1 (low) -7 (high) points
Points Possible:	7

Race Equity Narrative	Scoring Rubric
Does the Race Equity Narrative reference the CoC's Race Equity Tool	1 pts. Yes

Kit?	0 pts. No
Has the organization taken steps to secure a commitment to race equity from the board of directors, funders, community stakeholders, volunteers, employees, and clients?	Scale of 1 (low) -2 (high) points
Has the organization adopted a racial equity approach through policies and procedures, assessments, planning, and/or tools?	Scale of 1 (low) -2 (high) points
Has the organization created an informal, equitable, inclusive environment for staff and/or communities served?	Scale of 1 (low) -2(high) points
Points Possible:	7

Summary	Points Possible
Expected Project Outcomes	23
Drawdowns and Monitoring	16
Budget and Cost Effectiveness	9
Organizational Capacity and Experience	12
Project Description Narrative	26
Lived Experience Narrative	7
Race Equity Narrative	7
Total Available Points	100

1E-2a

SCORED FORMS FOR ONE PROJECT

Reviewer: Chinault

FL-502 Renewal Project Scoring Tool

Organization: Boley Centers
Project: Preserves at Clam Bayou

Project Type: PSH
Request: \$822,294

Race Equity Narrative	Scoring Rubric	
Does the Race Equity Narrative reference the CoC's Race Equity Tool Kit?	5 pts. Yes 0 pts. No	5
Has the organization taken steps to secure a commitment to race equity from the board of directors, funders, community stakeholders, volunteers, employees, and clients?	Scale of 1 (low) -5 (high) points	5
Has the organization adopted a racial equity approach through policies and procedures, assessments, planning, and/or tools?	Scale of 1 (low) -5 (high) points	5
Has the organization created an informal, equitable, inclusive environment for staff and/or communities served?	Scale of 1 (low) -5 (high) points	4
Points Available	20	

Timely Drawdowns and Recaptured Funds (See Note)	Scoring Rubric	
Note: For projects that have been operating less than a year, full points will be awarded.		
Drawdowns as evidenced by eLOCCS for the past year	5 pts.	Yes and all timely
	4 pts.	One quarter late
	3 pts.	Two quarters late
	2 pts.	Three quarters late
	0 pts.	All quarters late or missing
In the past 3 years has the organization's HUD CoC budget been fully spent? (No CoC funds were recaptured)	5 pts.	Yes
	0 pts.	No
What was the overall monitoring score from the most recent Homeless Leadership Alliance of Pinellas (HLA) Monitoring?	5 pts.	91-100%
	4 pts.	81-90%
	3 pts.	71-80%
	2 pts.	61-70%
	1 pt.	51-60%
	0 pts.	Below 50%
Points Available	15	

Project Performance for Type of Intervention (See Notes)

Notes:

- (1) For projects that have been operating less than one full year, the full available points will be awarded.
 (2) For percentages, if the denominator was zero and therefore percentage cannot be computed, all available points will be awarded.

Permanent Supportive Housing Criteria		Scoring Rubric	
Average length of stay in program	≥ 365 days	13 pts.	13
	< 365 days	0 pts.	
Percent of participants who remain housed in PSH or exit to PH	≥ 90%	20 pts.	20
	< 90%	0 pts.	
New or increased employment income for project stayers	≥ 10%	8 pts.	8
	< 10%	0 pts.	
New or increased non-employment income for project stayers	≥ 30%	8 pts.	8
	< 30%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 10%	8 pts.	8
	< 10%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 30%	8 pts.	8
	< 30%	0 pts.	
Points Available		65	
Transitional Housing Criteria		Scoring Rubric	
Average number of days between entry and residential move-in	≤ 180 days	13 pts.	
	> 180 days	0 pts.	
Percent of individuals in TH projects who moved to permanent housing at exit	≥ 50%	20 pts.	
	< 50%	0 pts.	
New or increased employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
New or increased non-employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 35%	8 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	8 pts.	
	< 35%	0 pts.	

Points Available		65
Rapid Rehousing Criteria	Scoring Rubric	
Average number of days between project entry to residential move-in	≤ 30 days	13 pts.
	> 30 days	0 pts.
New or increased employment income for project stayers	≥ 15%	13 pts.
	< 15%	0 pts.
New or increased non-employment income for project stayers	≥ 20%	13 pts.
	< 20%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 20%	13 pts.
	< 20%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 15%	13 pts.
	< 15%	0 pts.
Points Available		65
Safe Haven Criteria	Scoring Rubric	
Percent move to permanent housing	≥ 75%	21 pts.
	< 75%	0 pts.
New or increased employment income for project stayers	≥ 10%	11 pts.
	< 10%	0 pts.
New or increased non-employment income for project stayers	≥ 35%	11 pts.
	< 35%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit.	≥ 25%	11 pts.
	< 25%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 60%	11 pts.
	< 60%	0 pts.
Points Available		65
Joint TH/RRH Criteria	Scoring Rubric	
Participants spend ____ days from project entry to residential move-in	≤ 180 days	13 pts.
	> 180 days	0 pts.
Percent move to permanent housing	≥ 50%	20 pts.
	< 50%	0 pts.
New or increased employment income for project stayers	≥ 35%	8 pts.
	< 35%	0 pts.
New or increased non-employment income for project stayers	≥ 35%	8 pts.
	< 35%	0 pts.

Percent of individuals who maintained employment income during the reporting period or at exit.	≥ 35%	8 pts.
	< 35%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	8 pts.
	< 35%	0 pts.
Points Available	65	
HMIS	Scoring Rubric	
HMIS collects all Universal Data Elements as set forth in the HUD HMIS Data Standards	Yes	20 pts.
	No	0 pts.
HMIS has the ability to deduplicate client records	Yes	15 pts.
	No	0 pts.
HMIS produces all HUD-required reports	Yes	15 pts.
	No	0 pts.
HMIS produces reports as needed for monitoring and tracking performance data	Yes	15 pts.
	No	0 pts.
Points Available	65	
Coordinated Entry	Scoring Rubric	
There is a standardized assessment process	Yes	17 pts.
	No	0 pts.
There is a process in place to prioritize households that meet specified vulnerability criteria	Yes	16 pts.
	No	0 pts.
The system refers participants to appropriate housing and services that fit their needs and preferences	Yes	16 pts.
	No	0 pts.
There is a strategy for advertising that is designed to reach homeless persons with the highest barriers	Yes	16 pts.
	No	0 pts.
Points Available	65	

Summary	Points Available
Race Equity	20
Timely Drawdowns and Recaptured Funds	15
Project Performance	65
Subtotal	100

Discretionary Bonus Points

Up to 10 bonus points may be awarded based on the RRC's judgment regarding a project's importance in the CoC system of care, the consequences of funding loss, and/or a focus on subpopulations with the most severe barriers to obtaining and retaining housing stability.

Scale 0-10

Points Available	10
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Total Available Points Including Bonus	110
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Reviewer: Cooley

FL-502 Renewal Project Scoring Tool

Organization: Boley Centers	Project Type: PSH
Project: Preserves at Clam Bayou	Request: \$822,294

Race Equity Narrative	Scoring Rubric	
Does the Race Equity Narrative reference the CoC's Race Equity Tool Kit?	5 pts. Yes 0 pts. No	5
Has the organization taken steps to secure a commitment to race equity from the board of directors, funders, community stakeholders, volunteers, employees, and clients?	Scale of 1 (low) -5 (high) points	4
Has the organization adopted a racial equity approach through policies and procedures, assessments, planning, and/or tools?	Scale of 1 (low) -5 (high) points	4
Has the organization created an informal, equitable, inclusive environment for staff and/or communities served?	Scale of 1 (low) -5 (high) points	4
Points Available	20	17

Timely Drawdowns and Recaptured Funds (See Note)	Scoring Rubric	
Note: For projects that have been operating less than a year, full points will be awarded.		
Drawdowns as evidenced by eLOCCS for the past year	5 pts.	Yes and all timely
	4 pts.	One quarter late
	3 pts.	Two quarters late
	2 pts.	Three quarters late
	0 pts.	All quarters late or missing
In the past 3 years has the organization's HUD CoC budget been fully spent? (No CoC funds were recaptured)	5 pts.	Yes
	0 pts.	No
What was the overall monitoring score from the most recent Homeless Leadership Alliance of Pinellas (HLA) Monitoring?	5 pts.	91-100%
	4 pts.	81-90%
	3 pts.	71-80%
	2 pts.	61-70%
	1 pt.	51-60%
	0 pts.	Below 50%
Points Available	15	10

Project Performance for Type of Intervention (See Notes)

Notes:

- (1) For projects that have been operating less than one full year, the full available points will be awarded.
 (2) For percentages, if the denominator was zero and therefore percentage cannot be computed, all available points will be awarded.

Permanent Supportive Housing Criteria	Scoring Rubric		DSP Review
Average length of stay in program	≥ 365 days	13 pts.	13
	< 365 days	0 pts.	
Percent of participants who remain housed in PSH or exit to PH	≥ 90%	20 pts.	20
	< 90%	0 pts.	
New or increased employment income for project stayers	≥ 10%	8 pts.	8
	< 10%	0 pts.	
New or increased non-employment income for project stayers	≥ 30%	8 pts.	8
	< 30%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 10%	8 pts.	8
	< 10%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 30%	8 pts.	8
	< 30%	0 pts.	
Points Available		65	65
Transitional Housing Criteria	Scoring Rubric		
Average number of days between entry and residential move-in	≤ 180 days	13 pts.	
	> 180 days	0 pts.	
Percent of individuals in TH projects who moved to permanent housing at exit	≥ 50%	20 pts.	
	< 50%	0 pts.	
New or increased employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
New or increased non-employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 35%	8 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	8 pts.	
	< 35%	0 pts.	

Points Available		65
Rapid Rehousing Criteria	Scoring Rubric	
Average number of days between project entry to residential move-in	≤ 30 days	13 pts.
	> 30 days	0 pts.
New or increased employment income for project stayers	≥ 15%	13 pts.
	< 15%	0 pts.
New or increased non-employment income for project stayers	≥ 20%	13 pts.
	< 20%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 20%	13 pts.
	< 20%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 15%	13 pts.
	< 15%	0 pts.
Points Available		65
Safe Haven Criteria	Scoring Rubric	
Percent move to permanent housing	≥ 75%	21 pts.
	< 75%	0 pts.
New or increased employment income for project stayers	≥ 10%	11 pts.
	< 10%	0 pts.
New or increased non-employment income for project stayers	≥ 35%	11 pts.
	< 35%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit.	≥ 25%	11 pts.
	< 25%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 60%	11 pts.
	< 60%	0 pts.
Points Available		65
Joint TH/RRH Criteria	Scoring Rubric	
Participants spend ____ days from project entry to residential move-in	≤ 180 days	13 pts.
	> 180 days	0 pts.
Percent move to permanent housing	≥ 50%	20 pts.
	< 50%	0 pts.
New or increased employment income for project stayers	≥ 35%	8 pts.
	< 35%	0 pts.
New or increased non-employment income for project stayers	≥ 35%	8 pts.
	< 35%	0 pts.

Percent of individuals who maintained employment income during the reporting period or at exit.	≥ 35%	8 pts.
	< 35%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	8 pts.
	< 35%	0 pts.
Points Available	65	
HMIS	Scoring Rubric	
HMIS collects all Universal Data Elements as set forth in the HUD HMIS Data Standards	Yes	20 pts.
	No	0 pts.
HMIS has the ability to deduplicate client records	Yes	15 pts.
	No	0 pts.
HMIS produces all HUD-required reports	Yes	15 pts.
	No	0 pts.
HMIS produces reports as needed for monitoring and tracking performance data	Yes	15 pts.
	No	0 pts.
Points Available	65	
Coordinated Entry	Scoring Rubric	
There is a standardized assessment process	Yes	17 pts.
	No	0 pts.
There is a process in place to prioritize households that meet specified vulnerability criteria	Yes	16 pts.
	No	0 pts.
The system refers participants to appropriate housing and services that fit their needs and preferences	Yes	16 pts.
	No	0 pts.
There is a strategy for advertising that is designed to reach homeless persons with the highest barriers	Yes	16 pts.
	No	0 pts.
Points Available	65	

Summary	Points Available	
Race Equity	20	17
Timely Drawdowns and Recaptured Funds	15	10
Project Performance	65	65
Subtotal	100	92

Discretionary Bonus Points

Up to 10 bonus points may be awarded based on the RRC's judgment regarding a project's importance in the CoC system of care, the consequences of funding loss, and/or a focus on subpopulations with the most severe barriers to obtaining and retaining housing stability.

Scale 0-10

Points Available	10
Total Available Points Including Bonus	110

Reviewer: Picard

FL-502 Renewal Project Scoring Tool

Organization: Boley Centers
Project: Preserves at Clam Bayou

Project Type: PSH
Request: \$822,294

Race Equity Narrative	Scoring Rubric	
Does the Race Equity Narrative reference the CoC's Race Equity Tool Kit?	5 pts. Yes 0 pts. No	5
Has the organization taken steps to secure a commitment to race equity from the board of directors, funders, community stakeholders, volunteers, employees, and clients?	Scale of 1 (low) -5 (high) points	3
Has the organization adopted a racial equity approach through policies and procedures, assessments, planning, and/or tools?	Scale of 1 (low) -5 (high) points	3
Has the organization created an informal, equitable, inclusive environment for staff and/or communities served?	Scale of 1 (low) -5 (high) points	5
Points Available	20	16

Timely Drawdowns and Recaptured Funds (See Note)	Scoring Rubric	
Note: For projects that have been operating less than a year, full points will be awarded.		
Drawdowns as evidenced by eLOCCS for the past year	5 pts.	Yes and all timely
	4 pts.	One quarter late
	3 pts.	Two quarters late
	2 pts.	Three quarters late
	0 pts.	All quarters late or missing
In the past 3 years has the organization's HUD CoC budget been fully spent? (No CoC funds were recaptured)	5 pts.	Yes
	0 pts.	No
What was the overall monitoring score from the most recent Homeless Leadership Alliance of Pinellas (HLA) Monitoring?	5 pts.	91-100%
	4 pts.	81-90%
	3 pts.	71-80%
	2 pts.	61-70%
	1 pt.	51-60%
	0 pts.	Below 50%
Points Available	15	9

Project Performance for Type of Intervention (See Notes)

Notes:

- (1) For projects that have been operating less than one full year, the full available points will be awarded.
- (2) For percentages, if the denominator was zero and therefore percentage cannot be computed, all available points will be awarded.

Permanent Supportive Housing Criteria	Scoring Rubric		DSP Review
Average length of stay in program	≥ 365 days	13 pts.	13
	< 365 days	0 pts.	
Percent of participants who remain housed in PSH or exit to PH	≥ 90%	20 pts.	20
	< 90%	0 pts.	
New or increased employment income for project stayers	≥ 10%	8 pts.	8
	< 10%	0 pts.	
New or increased non-employment income for project stayers	≥ 30%	8 pts.	8
	< 30%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 10%	8 pts.	8
	< 10%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 30%	8 pts.	8
	< 30%	0 pts.	
Points Available	65		65
Transitional Housing Criteria	Scoring Rubric		
Average number of days between entry and residential move-in	≤ 180 days	13 pts.	
	> 180 days	0 pts.	
Percent of individuals in TH projects who moved to permanent housing at exit	≥ 50%	20 pts.	
	< 50%	0 pts.	
New or increased employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
New or increased non-employment income for project stayers	≥ 35%	8 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 35%	8 pts.	
	< 35%	0 pts.	
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	8 pts.	
	< 35%	0 pts.	

Points Available		65
Rapid Rehousing Criteria	Scoring Rubric	
Average number of days between project entry to residential move-in	≤ 30 days	13 pts.
	> 30 days	0 pts.
New or increased employment income for project stayers	≥ 15%	13 pts.
	< 15%	0 pts.
New or increased non-employment income for project stayers	≥ 20%	13 pts.
	< 20%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit	≥ 20%	13 pts.
	< 20%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 15%	13 pts.
	< 15%	0 pts.
Points Available		65
Safe Haven Criteria	Scoring Rubric	
Percent move to permanent housing	≥ 75%	21 pts.
	< 75%	0 pts.
New or increased employment income for project stayers	≥ 10%	11 pts.
	< 10%	0 pts.
New or increased non-employment income for project stayers	≥ 35%	11 pts.
	< 35%	0 pts.
Percent of individuals who maintained employment income during the reporting period or at exit.	≥ 25%	11 pts.
	< 25%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 60%	11 pts.
	< 60%	0 pts.
Points Available		65
Joint TH/RRH Criteria	Scoring Rubric	
Participants spend ____ days from project entry to residential move-in	≤ 180 days	13 pts.
	> 180 days	0 pts.
Percent move to permanent housing	≥ 50%	20 pts.
	< 50%	0 pts.
New or increased employment income for project stayers	≥ 35%	8 pts.
	< 35%	0 pts.
New or increased non-employment income for project stayers	≥ 35%	8 pts.
	< 35%	0 pts.

Percent of individuals who maintained employment income during the reporting period or at exit.	≥ 35%	8 pts.
	< 35%	0 pts.
Percent of individuals who maintained non-employment income during the reporting period or at exit	≥ 35%	8 pts.
	< 35%	0 pts.
Points Available	65	
HMIS	Scoring Rubric	
HMIS collects all Universal Data Elements as set forth in the HUD HMIS Data Standards	Yes	20 pts.
	No	0 pts.
HMIS has the ability to deduplicate client records	Yes	15 pts.
	No	0 pts.
HMIS produces all HUD-required reports	Yes	15 pts.
	No	0 pts.
HMIS produces reports as needed for monitoring and tracking performance data	Yes	15 pts.
	No	0 pts.
Points Available	65	
Coordinated Entry	Scoring Rubric	
There is a standardized assessment process	Yes	17 pts.
	No	0 pts.
There is a process in place to prioritize households that meet specified vulnerability criteria	Yes	16 pts.
	No	0 pts.
The system refers participants to appropriate housing and services that fit their needs and preferences	Yes	16 pts.
	No	0 pts.
There is a strategy for advertising that is designed to reach homeless persons with the highest barriers	Yes	16 pts.
	No	0 pts.
Points Available	65	

Summary	Points Available	
Race Equity	20	16
Timely Drawdowns and Recaptured Funds	15	9
Project Performance	65	65
Subtotal	100	90

Discretionary Bonus Points

Up to 10 bonus points may be awarded based on the RRC's judgment regarding a project's importance in the CoC system of care, the consequences of funding loss, and/or a focus on subpopulations with the most severe barriers to obtaining and retaining housing stability.

Scale 0-10

Points Available	10	3
Total Available Points Including Bonus	110	93

1E-5

NOTIFICATION OF PROJECTS REJECTED-REDUCED

2023 HUD CoC NOFO Award Notification

Inbox x



Carly Pannella

to Cynthia, Sezen, Monika, Victoria

2:17 PM (6 minutes ago)



Hello,

Thank you for submitting your organization's applications for the 2023 Continuum of Care Competition Notice of Funding Opportunity. The CoC Review and Rank Committee finalized project rankings on August 30th, and the Executive Committee of the Continuum of Care's Board of Directors ratified that decision on August 30th.

Please see the attached document for the final CoC ranking and list of awardees. This document and further instructions are also available on our website homepage: <https://www.pinellashomeless.org/>

Congratulations on the acceptance of your applications for the below projects!

(a) Project Name: **Coordinated Entry Expansion**

(b) Project ranking: 6
(c) Project score: 93%
(d) Funding amount: \$157,103.52

(a) Project Name: **HMIS Renewal**

(b) Project ranking: 7
(c) Project score: 93%
(d) Funding amount: \$240,372.00

(a) Project Name: **Coordinated Entry Renewal**

(b) Project ranking: 4
(c) Project score: 94%
(d) Funding amount: \$168,211.00

(a) Project Name: **HMIS Expansion**

(b) Project ranking: 2
(c) Project score: 95%
(d) Funding amount: \$73,106.59

In order to complete the NOFO process, all approved projects must be submitted in E-snaps no later than 4:00 p.m. on Friday September 15, 2023. Once submitted, projects will be reviewed by HLA staff and you will be notified if any amendments. Amendments must be completed by 5:00 p.m. on September 20, 2023.

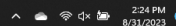
We greatly appreciate the time and effort your organization dedicated to your application to ensure that homelessness is rare, brief, and a one-time experience!

Thank you,

Carly Pannella, JD (she/her/hers)
Director of CoC Strategy and Performance



Search



2:24 PM
8/31/2023

2023 HUD CoC NOFO Award Notification

Inbox x

Pinellas - HLAP x



Carly Pannella

to dmorje@brookwoodflorida.org, Cheryl, Monika

2:17 PM (7 hours ago)



Hello,

Thank you for submitting your organization's application for the 2023 Continuum of Care Competition Notice of Funding Opportunity. The CoC Review and Rank Committee finalized project rankings on August 30th, and the Executive Committee of the Continuum of Care's Board of Directors ratified that decision on August 30th.

Please see the attached document for the final CoC ranking and list of awardees. This document and further instructions are also available on our website homepage: <https://www.pinellashomeless.org/>

Congratulations on the acceptance of your application for the below projects!

(a) Project Name: **Brookwood Transitional Housing**

(b) Project Ranking: 12
(c) Project Score: 75%
(d) Funding Amount: \$79,085.00

In order to complete the NOFO process, all approved projects must be submitted in E-snaps no later than 4:00 p.m. on Friday September 15, 2023. Once submitted, projects will be reviewed by HLA staff and you will be notified if any amendments. Amendments must be completed by 5:00 p.m. on September 20, 2023.

We greatly appreciate the time and effort your organization dedicated to your application to ensure that homelessness is rare, brief, and a one-time experience!

Thank you,

Carly Pannella, JD (she/her/hers)
Director of CoC Strategy and Performance
Homeless Leadership Alliance of Pinellas, Inc.

CPannella@HLAPinellas.org

Mailing Address: 740 4th Street North, Suite 206, St. Petersburg, FL 33701



The vision of the Homeless Leadership Alliance of Pinellas is to ensure that homelessness is rare, brief, and a one-time experience.

[Help end homelessness in Pinellas County by donating today!](#)

...

[Message clipped] [View entire message](#)

One attachment • Scanned by Gmail



Search



9:27 PM
8/31/2023

C

Carly Pannella
to Sam, daisy@evdpsp.org, Michael, Monika ▾

7:57 PM (1 hour ago) ☆ ↶ ⋮

Hello,

Thank you for submitting your organization's application for the 2023 Continuum of Care Competition Notice of Funding Opportunity. The CoC Review and Rank Committee finalized project rankings on August 30th, and the Executive Committee of the Continuum of Care's Board of Directors ratified that decision on August 30th.

Please see the attached document for the final CoC ranking and list of awardees. This document and further instructions are also available on our website homepage: <https://www.pinellashomeless.org/>


Congratulations on the acceptance of your application for the below project!

(a) Project Name: **Returning Home Pinellas**
(b) Project Ranking: 18
(c) Project Score: 87%
(d) Funding Amount: \$380,515.78

In order to complete the NOFO process, all approved projects must be submitted in E-snaps no later than 4:00 p.m. on Friday September 15, 2023. Once submitted, projects will be reviewed by HLA staff and you will be notified if any amendments. Amendments must be completed by 5:00 p.m. on September 20, 2023.

We greatly appreciate the time and effort your organization dedicated to your application to ensure that homelessness is rare, brief, and a one-time experience!

Thank you,
Carly Pannella, JD (she/her/hers)
Director of CoC Strategy and Performance
Homeless Leadership Alliance of Pinellas, Inc.
CPannella@HLAPinellas.org
Mailing Address: 740 4th Street North, Suite 206, St. Petersburg, FL 33701



The vision of the Homeless Leadership Alliance of Pinellas is to ensure that homelessness is rare, brief, and a one-time experience.

[Help end homelessness in Pinellas County by donating today!](#)

...

[Message clipped] [View entire message](#)

One attachment • Scanned by Gmail

C

Carly Pannella
to Judith, Monika ▾

8:09 PM (1 hour ago) ☆ ↶ ⋮

Hello,

Thank you for submitting your organization's application for the 2023 Continuum of Care Competition Notice of Funding Opportunity. The CoC Review and Rank Committee finalized project rankings on August 30th, and the Executive Committee of the Continuum of Care's Board of Directors ratified that decision on August 30th.

Please see the attached document for the final CoC ranking and list of awardees. This document and further instructions are also available on our website homepage: <https://www.pinellashomeless.org/>


Congratulations on the acceptance of your application for the below project!

(a) Project Name: **HVA'S The Haven – RRH Case Management**
(b) Project Ranking: 19
(c) Project Score: 90%
(d) Funding Amount: \$142,302.00

In order to complete the NOFO process, all approved projects must be submitted in E-snaps no later than 4:00 p.m. on Friday September 15, 2023. Once submitted, projects will be reviewed by HLA staff and you will be notified if any amendments. Amendments must be completed by 5:00 p.m. on September 20, 2023.

We greatly appreciate the time and effort your organization dedicated to your application to ensure that homelessness is rare, brief, and a one-time experience!

Thank you,
Carly Pannella, JD (she/her/hers)
Director of CoC Strategy and Performance
Homeless Leadership Alliance of Pinellas, Inc.
CPannella@HLAPinellas.org
Mailing Address: 740 4th Street North, Suite 206, St. Petersburg, FL 33701



The vision of the Homeless Leadership Alliance of Pinellas is to ensure that homelessness is rare, brief, and a one-time experience.

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2023 HUD CoC NOFO Award Announcement

Inbox

C

Carly Pannella

to Kevin, Jen, Monika

5:13 PM (4 hours ago)

✕ ⌵ ⌵

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Warmly,

Carly Pannella, JD (she/her/hers)

Director of CoC Strategy and Performance



Search



C

Carly Pannella

to Jill, Lariana, Monika

8:20 PM (1 hour ago)

✕ ⌵ ⌵

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9:29 PM
8/31/2023

C

Carly Pannella






to Judith

4:03 PM (30 minutes ago)

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Carly Pannella

to Sam, daisy@svdpsp.org, Michael, Monika

4:04 PM (29 minutes ago)

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Carly Pannella

to dmonje@brookwoodflorida.org, Cheryl, Monika


4:07 PM (25 minutes ago)

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CPannella@HLAPinellas.org

Search



4:33 PM
9/5/2023

C

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to Cynthia, Sezen, Monika, Victoria

4:08 PM (26 minutes ago)

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4:34 PM
9/5/2023

1E-5a

NOTIFICATION OF PROJECTS ACCEPTED

2023 HUD CoC NOFO Award Notification

Inbox x



Carly Pannella

to Cynthia, Sezen, Monika, Victoria

2:17 PM (6 minutes ago)



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Congratulations on the acceptance of your applications for the below projects!

(a) Project Name: **Coordinated Entry Expansion**

(b) Project ranking: 6
(c) Project score: 93%
(d) Funding amount: \$157,103.52

(a) Project Name: **HMIS Renewal**

(b) Project ranking: 7
(c) Project score: 93%
(d) Funding amount: \$240,372.00

(a) Project Name: **Coordinated Entry Renewal**

(b) Project ranking: 4
(c) Project score: 94%
(d) Funding amount: \$168,211.00

(a) Project Name: **HMIS Expansion**

(b) Project ranking: 2
(c) Project score: 95%
(d) Funding amount: \$73,106.59

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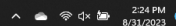
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Director of CoC Strategy and Performance



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2:24 PM
8/31/2023

2023 HUD CoC NOFO Award Notification

Inbox x

Pinellas - HLAP x



Carly Pannella

to dmorje@brookwoodflorida.org, Cheryl, Monika

2:17 PM (7 hours ago)



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(a) Project Name: **Brookwood Transitional Housing**

(b) Project Ranking: 12
(c) Project Score: 75%
(d) Funding Amount: \$79,085.00

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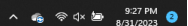
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9:27 PM
8/31/2023

C

Carly Pannella
to Sam, daisy@evdpsp.org, Michael, Monika ▾

7:57 PM (1 hour ago) ☆ ↶ ⋮

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Congratulations on the acceptance of your application for the below project!

(a) Project Name: **Returning Home Pinellas**
(b) Project Ranking: 18
(c) Project Score: 87%
(d) Funding Amount: \$380,515.78

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9:28 PM
8/31/2023

C

Carly Pannella
to Judith, Monika ▾

8:09 PM (1 hour ago) ☆ ↶ ⋮

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Congratulations on the acceptance of your application for the below project!

(a) Project Name: **HVA'S The Haven – RRH Case Management**
(b) Project Ranking: 19
(c) Project Score: 90%
(d) Funding Amount: \$142,302.00

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9:28 PM
8/31/2023

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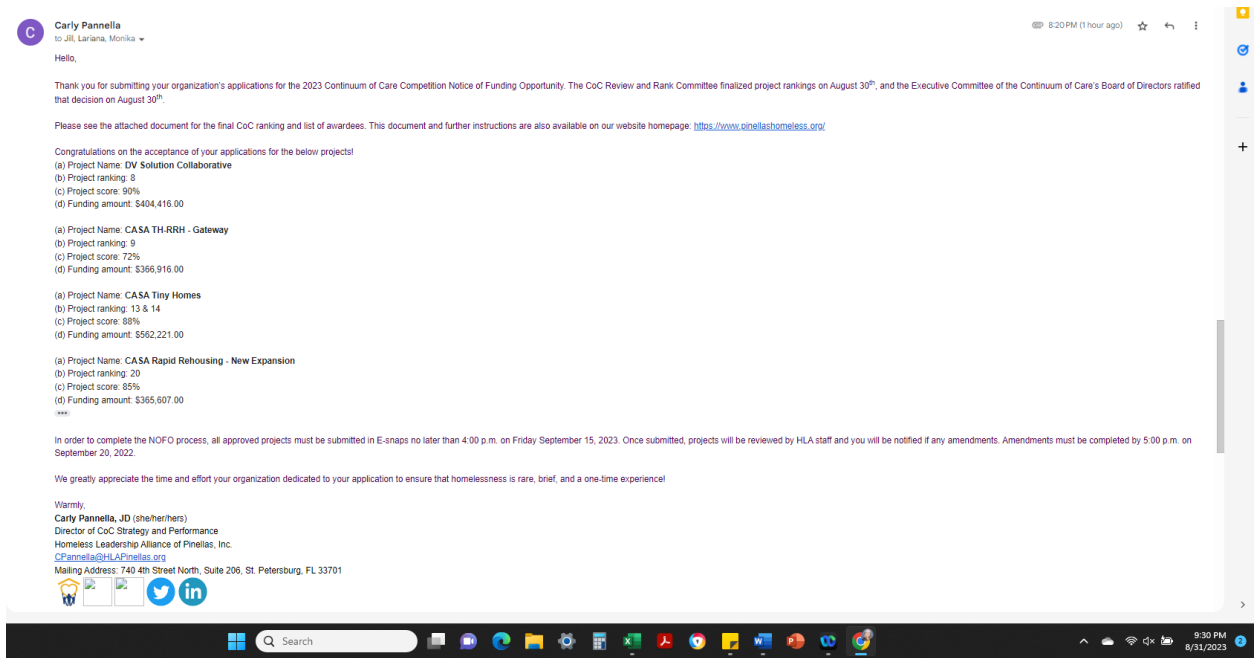
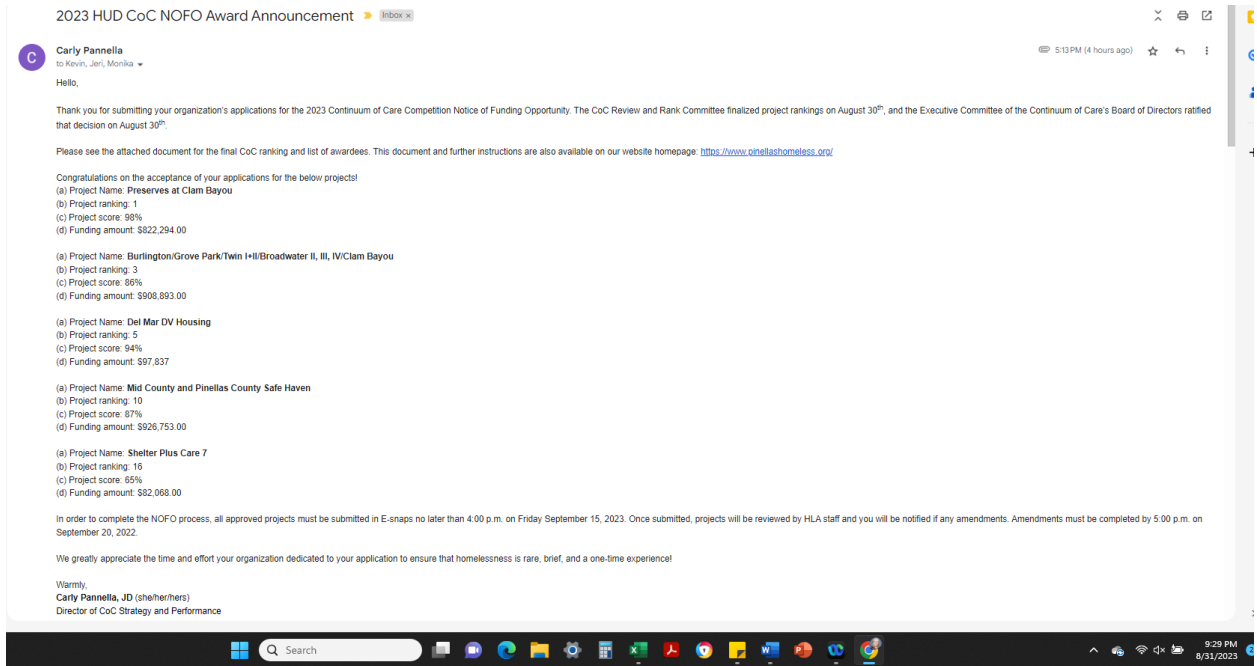
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4:34 PM
9/5/2023

1E-5b

LOCAL COMPETITION SELECTION RESULTS

Organization	Project Name	Project Score	Accepted or Rejected	Rank if Accepted	Funding Request	Reallocations from Renewals
Boley Centers	Preserves at Clam Bayou	98%	Accepted	1	\$ 822,294.00	
Homeless Leadershi	Pinellas HMIS	95%	Accepted	2	\$ 73,106.59	
Boley Centers	Burlington/Grove Park//Twin i+II/Broadwater	86%	Accepted	3	\$ 908,893.00	
Homeless Leadershi	FL 502 Coordinated Entry	94%	Accepted	4	\$ 168,211.00	
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CASA	CASA TH-RRH Gateway	72%	Accepted	9	\$ 366,916.00	
Boley Centers	Mid County and Pinellas County Safe Haven	87%	Accepted	10	\$ 926,753.00	
Boley Centers	S+C 62	94%	Accepted	11	\$ 273,604.00	\$ 80,000.00
Brookwood Florida	Brookwood Transitional Housing	75%	Accepted	12	\$ 79,085.00	
CASA	CASA Tiny Homes	88%	Accepted	13	\$ 562,221.00	
Homeless Empower	Baty Villas and Carlton Home	67%	Accepted	14	\$ 100,938.00	
Boley Centers	Shelter Plus Care 7	65%	Accepted	15	\$ 82,068.00	
CASA	CASA Rapid Rehousing Expansion	64%	Accepted	16	\$ 171,666.11	\$ 150,239.89
St. Vincent de Paul	Returning Home Pinellas 2023	87%	Accepted	17	\$ 380,515.78	
Hope Villages of Am	HVA's The Haven RRH Case Management	90%	Accepted	18	\$ 142,302.00	
CASA	CASA Rapid Rehousing New Expansion	85%	Accepted	19	\$ 365,607.00	
Homeless Leadershi	2023 Planning Project	N/A	Accepted	N/A	\$ 271,776.00	
Directions for Living	Rapid Rehousing	87%	Rejected			
Catholic Charities	Pinellas Pathways RRH	86%	Rejected			
Family Promise	FPPC Prevention and Stabilization	N/A	Rejected (ineligible)			
Family Support Serv	Keeping Families Together	N/A	Rejected (ineligible)			
Tarpon Springs Sheç	RRH for Northern Pinellas	N/A	Rejected (ineligible)			

2A-6

HDX COMPETITION REPORT

2023 HDX Competition Report

PIT Count Data for FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	2226	2307	1985	2144
Emergency Shelter Total	1,049	1,069	1,034	1186
Safe Haven Total	67	44	49	58
Transitional Housing Total	302	192	258	254
Total Sheltered Count	1418	1305	1341	1498
Total Unsheltered Count	808	1002	644	646

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	592	213	483	573
Sheltered Count of Chronically Homeless Persons	213	213	201	214
Unsheltered Count of Chronically Homeless Persons	379	0	282	359

2023 HDX Competition Report

PIT Count Data for FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	118	108	139	143
Sheltered Count of Homeless Households with Children	114	108	139	124
Unsheltered Count of Homeless Households with Children	4	0	0	19

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	431	265	285	310	292
Sheltered Count of Homeless Veterans	313	215	285	229	217
Unsheltered Count of Homeless Veterans	118	50	0	81	75

*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report

HIC Data for FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	1,545	1,428	1,545	92.43%	0	0	NA	1,428	92.43%
SH Beds	70	70	70	100.00%	0	0	NA	70	100.00%
TH Beds	371	348	371	93.80%	0	0	NA	348	93.80%
RRH Beds	667	473	667	70.91%	0	0	NA	473	70.91%
PSH Beds	1,641	1,641	1,641	100.00%	0	0	NA	1,641	100.00%
OPH Beds	187	108	187	57.75%	0	0	NA	108	57.75%
Total Beds	4,481	4,068	4,481	90.78%	0	0	NA	4,068	90.78%

2023 HDX Competition Report

HIC Data for FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

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Notes

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

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

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

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	1433	1440	1443	1400

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

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	184	152	160	394

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	583	665	636	667

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FY2022 - Performance Measurement Module (Sys PM)

Summary Report for FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	5373	5991	67	90	23	35	46	11
1.2 Persons in ES, SH, and TH	5725	6392	95	107	12	48	57	9

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

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

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

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	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	5892	6492	364	407	43	177	193	16
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	7130	6865	368	414	46	183	198	15

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	52	15	29%	4	8%	1	2%	20	38%
Exit was from ES	1208	179	15%	85	7%	121	10%	385	32%
Exit was from TH	195	18	9%	8	4%	21	11%	47	24%
Exit was from SH	49	5	10%	9	18%	5	10%	19	39%
Exit was from PH	494	18	4%	24	5%	26	5%	68	14%
TOTAL Returns to Homelessness	1998	235	12%	130	7%	174	9%	539	27%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	2307	1985	-322
Emergency Shelter Total	1069	1034	-35
Safe Haven Total	44	49	5
Transitional Housing Total	192	258	66
Total Sheltered Count	1305	1341	36
Unsheltered Count	1002	644	-358

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	5829	6550	721
Emergency Shelter Total	5417	6046	629
Safe Haven Total	143	167	24
Transitional Housing Total	486	631	145

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	179	211	32
Number of adults with increased earned income	9	9	0
Percentage of adults who increased earned income	5%	4%	-1%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	179	211	32
Number of adults with increased non-employment cash income	84	79	-5
Percentage of adults who increased non-employment cash income	47%	37%	-10%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	179	211	32
Number of adults with increased total income	87	84	-3
Percentage of adults who increased total income	49%	40%	-9%

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Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	154	89	-65
Number of adults who exited with increased earned income	26	20	-6
Percentage of adults who increased earned income	17%	22%	5%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	154	89	-65
Number of adults who exited with increased non-employment cash income	49	13	-36
Percentage of adults who increased non-employment cash income	32%	15%	-17%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	154	89	-65
Number of adults who exited with increased total income	68	31	-37
Percentage of adults who increased total income	44%	35%	-9%

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	5298	5769	471
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1756	1752	-4
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	3542	4017	475

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	5819	6438	619
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1975	2091	116
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	3844	4347	503

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

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

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	1674	1853	179
Of persons above, those who exited to temporary & some institutional destinations	997	915	-82
Of the persons above, those who exited to permanent housing destinations	100	58	-42
% Successful exits	66%	53%	-13%

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

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FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	4742	5040	298
Of the persons above, those who exited to permanent housing destinations	1354	1433	79
% Successful exits	29%	28%	-1%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	1179	1307	128
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1130	1273	143
% Successful exits/retention	96%	97%	1%

2023 HDX Competition Report FY2022 - SysPM Data Quality

FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	1389	1091	1245	371	299	369	1629	1622	1851	463	525	404			
2. Number of HMIS Beds	1389	949	1245	322	262	328	1629	1622	1635	463	525	404			
3. HMIS Participation Rate from HIC (%)	100.00	86.98	100.00	86.79	87.63	88.89	100.00	100.00	88.33	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	6047	5522	5576	619	499	631	1327	1467	1422	1763	2105	1849	1997	2026	1630
5. Total Leavers (HMIS)	5381	4436	4668	438	310	384	154	146	108	728	1191	1009	1791	1751	1417
6. Destination of Don't Know, Refused, or Missing (HMIS)	2920	2541	2625	44	17	37	15	11	15	66	89	92	13	288	566
7. Destination Error Rate (%)	54.27	57.28	56.23	10.05	5.48	9.64	9.74	7.53	13.89	9.07	7.47	9.12	0.73	16.45	39.94

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Submission and Count Dates for FL-502 - St. Petersburg, Clearwater, Largo/Pinellas County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/25/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/28/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/27/2023	Yes