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 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
 2. The FY 2022 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 2022 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
   - 24 CFR part 578;
    - FY 2022 CoC Application Navigational Guide;
   - Section 3 Resources;
   - PHA Crosswalk; and
    - Frequently Asked Questions

1A-1. CoC Name and Number: CA-512 - Daly City/San Mateo County CoC

1A-2. Collaborative Applicant Name: San Mateo County Human Services Agency

1A-3. CoC Designation: CA

1A-4. HMIS Lead: San Mateo County Human Services Agency

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.	

	In the chart below for the period from May 1, 2021 to April 30, 2022:
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.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	Disability Advocates	Yes	Yes	Yes
5.	Disability Service Organizations	Yes	Yes	Yes
6.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
7.	Homeless or Formerly Homeless Persons	Yes	No	No
8.	Hospital(s)	Yes	Yes	Yes
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
10.	Law Enforcement	Yes	No	No
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
12.	LGBTQ+ Service Organizations	Yes	Yes	Yes
13.	Local Government Staff/Officials	Yes	Yes	Yes
14.	Local Jail(s)	Yes	No	Yes
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	Yes

17.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
18.	Organizations led by and serving LGBTQ+ persons	No	No	No
19.	Organizations led by and serving people with disabilities	No	No	No
20.	Other homeless subpopulation advocates	Yes	Yes	Yes
21.	Public Housing Authorities	Yes	Yes	Yes
22.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
23.	State Domestic Violence Coalition	No	No	No
24.	State Sexual Assault Coalition	No	No	No
25.	Street Outreach Team(s)	Yes	Yes	Yes
26.	Substance Abuse Advocates	Yes	Yes	Yes
27.	Substance Abuse Service Organizations	Yes	Yes	Yes
28.	Victim Service Providers	Yes	Yes	Yes
29.	Domestic Violence Advocates	Yes	Yes	Yes
30.	Other Victim Service Organizations	Nonexistent	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.	Veteran Service Providers	Yes	Yes	No
35.				

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.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 with individuals with disabilities, including the availability of accessible electronic formats;
	3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

(limit 2,500 characters)

(1) The CoC Steering Committee represents a range of stakeholders and regularly adds new members to ensure continued representation by a diversity of stakeholders. The San Mateo County Human Services Agency (HSA, the CoC Lead Agency) and the Steering Committee Chair review membership and solicit new members for vacancies due to resignations or term limits, as well as identify individuals to represent additional stakeholder groups. Outreach includes contacting individuals who have experienced homelessness, service providers, community-based organizations, City and County departments, and other stakeholder groups. A standing invitation to apply is posted on the CoC website, including general information on the CoC Steering Committee and how to request to become a member. Interested individuals can also contact HSA or the Steering Committee Chair to request to join the committee. Thirteen new members have been added since 2019.

(2) HSA ensures that all CoC information is accessible via its public website, including meeting dates, CoC contact information, and all NOFO-related notifications. The website also hosts machine-readable PDFs. Information is also communicated via email. In person CoC meetings are held in ADA-accessible locations. Since the onset of the pandemic, all CoC meetings have been held virtually, further expanding accessibility. Virtual meeting access information are posted on the CoC website prior to each meeting date.

(3) HSA and the Steering Committee Chair and members utilize their connections in the community to identify and recruit committee members from organizations serving culturally specific communities. Currently, there are seats held by three organizations that work in communities of color with a high number of people experiencing homelessness: Project WeHOPE, Retraining the Village and Coastside Hope. Additionally, one seat is held by an organization that provides intensive LGBTQ+ services in the community: StarVista, and multiple seats is also held by an organization that serves people with disabilities: Mental Health Association, Behavioral Health and Recovery Services.

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

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

(limit 2,500 characters)

(1) The San Mateo County Human Services Agency (HSA, the CoC Lead Agency) involves an array of stakeholders with an interest in preventing and ending homelessness. The CoC Steering Committee includes members with varying levels of expertise, including people with lived experience, staff from private sector, non-profit and governmental entities. All members are encouraged to make presentations or provide updates on topics they think are relevant to the work of the CoC. Recently, HSA made a presentation on the CoC's Strategic Plan to End Homelessness and gathered input from homelessness response system stakeholders and persons with lived experience. CoC members have also recently made presentations on: WIOA-funded employment services, DV services, services for students experiencing homelessness, TANF benefits, presentation regarding the Emergency Housing Voucher (EHV) program, and emergency rental assistance.

(2) CoC meetings are open to the public and non-members are welcome. HSA maintains a list of community members who are notified of CoC meetings and provided information on CoC activities, trainings, and system updates. Interested parties are encouraged to participate, regardless of whether they are voting members. Meeting agendas are sent in advance and include opportunities for attendees to provide input on CoC policies.

(3) HSA gathers input from entities and planning bodies working to address homelessness through public meetings of the HOPE Interagency Council (a city/county/stakeholder coordinating body), the Community Action Agency, providers, and a range of local elected officials. Recently, HSA worked with a consulting firm to conduct a series of focus groups with homelessness response system stakeholders and people experiencing homelessness to gather input used to develop the CoC's Strategic Plan to End Homelessness. In 2022, the CoC has been the co-lead in a county-wide summit on ending homelessness to engage public and private partners. This summit consisted of virtual events and involved the business community, cities, community groups and provider agencies. An in-person event is planned to be held in October with the goal of gathering input on how to address challenges in ending homelessness in San Mateo County.

	1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
		NOFO Section VII.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.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,500 characters)

(1) San Mateo County Human Services Agency (HSA, the CoC Lead Agency) announced CoC funding availability via email blasts on August 10, 2022, and on the agency website on August 11, 2022. Advance notice of the expected opening of the CoC competition was sent out via email over the summer. HSA encourages new organizations to apply for CoC funding. Preferential scoring is not given to existing grantees. CoC funding availability was broadly announced to both CoC funded and non-CoC funded organizations. An informational session was announced on August 11 via email and public posting. The session was held on August 15, resulting in attendance from CoC-funded and non-CoC funded agencies. Materials from the session were publicly posted on August 22 to be available for any CoC-funded and non-CoC funded agencies who may not have attended the live session.

(2) Information about the process and timeline for submission of proposals for both new and renewal funding was emailed broadly on August 10 and posted to the HSA website on August 11. An informational meeting for applicants was held on August 15 in which HSA staff and the CoC's TA provider reviewed the process and responded to questions. The CoC's TA provider responded to emailed questions from potential applicants, including organizations not currently funded, and conducted Zoom meetings with two non-funded organizations to help with navigation in e-snaps and respond to questions about application requirements.

(3) The CoC's written Project Review and Ranking Policy was approved on August 10, 2022, at a publicly announced meeting of the CoC Steering Committee. A meeting announcement and draft of the Policy was broadly distributed via email blast and posted to the HSA website. The Policy document describes how the CoC will score and rank both new and renewal projects.

(4) CoC information is readily accessible via the HSA public website, including CoC contact information, NOFO-related notifications, and machine-readable PDFs of all materials relating to the CoC competition.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 CoC Application Navigational Guide;
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  - PHA Crosswalk; and
   - Frequently Asked Questions

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

		In the chart below:
	1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or
	2.	select Nonexistentif 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	Nonexistent
2.	Head Start Program	No
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)	No
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		

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

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

(limit 2,500 characters)

(1) The San Mateo County Department of Housing (DOH) is the only entity within the CoC that receives an ESG allocation. DOH is also the administrative entity for CDBG, ESG-CV and State ESG and ESG-CV funds received by San Mateo County. CoC and DOH staff collaboratively design the local application processes for ESG and ESG-CV and jointly establish funding priorities, ensuring alignment with the CoC's strategic plan, key program performance metrics, and system performance measures. CoC staff review funding applications along with DOH staff and provide input on ESG funding allocations. ESG allocations are approved by the Housing and Community Development Committee (HCDC), which includes representation from the CoC Steering Committee. For ESG-CV, DOH sent out a survey requesting feedback from the public and stakeholders regarding immediate needs in the community because of COVID-19, which was used to help prioritize needs.

(2) HSA provides performance data from HMIS on ESG-funded programs to DOH. HSA and DOH staff discuss program performance, strengths, and challenges of ESG-funded programs. As part of the continuous monitoring process, HSA and DOH review data from ESG and ESG-CV-funded programs, which include evaluating the specific projects staffing, organizational structure, and service delivery. HSA and DOH incorporate performance measurements within their contracts with ESG-funded shelters and RRH programs. Contracts are monitored on a quarterly basis. HSA also collaborates with DOH staff on evaluating each program's role in the homelessness system, including how they receive referrals from CES. Through the ongoing evaluation, it has been identified that ESG funds have been critical to increasing shelter capacity, specifically regarding non-congregate shelter options.

(3) HSA responds to requests for HMIS, PIT and HIC data as needed by all partners, including the 3 Con. Plan jurisdictions in the County geography.

(4) The Con. Plan jurisdictions all reach out to HSA when information is needed for Con Plan updates. HSA prepares data from a range of sources, including from the PIT count, HMIS, and other local data sources; HSA also supports with drafting or editing narratives relating to the County's overall homelessness response, Strategic Plan, and other topics.

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

	Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported 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 AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	
	Non separation policy included in CoC Policies in Governance Charter and in operational standards for shelter, transitional, and PSH	Yes

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

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

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

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section VII.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 San Mateo County Human Services Agency (the CoC lead agency) maintains a strong relationship with the San Mateo County Office of Education (SMCOE), which is the LEA and coordinates with the CA Dept. of Education (SEA), to remove educational barriers for homeless children, assist children with accessing education and understanding their educational rights, and supporting the academic success of homeless children. The SMCOE Homeless Liaison holds a seat on the CoC Steering Committee and communicates about data on homeless students, resources for students who are homeless, and ensuring a coordinated system of care. The Homeless Liaison is a resource for the CoC, homeless service providers, and other stakeholders about the educational rights of families and supportive services available for children experiencing homelessness. HSA coordinates with providers of services for youth and provides information to our CoC member agencies on how to access these services, including mental health counseling for young people through StarVista and Behavioral Health and Recovery Services. HSA contracts with LifeMoves and the Core Service Agencies to provide services to families experiencing homelessness, inclusive of services for children. HSA has regular meetings with the SMCOE Homeless Liaison to coordinate to address needs of children in local school districts.

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

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

(limit 2,500 characters)

The CoC's written policies, as incorporated in the CoC Governance Charter, require all providers of services, shelter and housing for families with children must inform residents about their eligibility for educational services. Providers are also expected to ensure children are enrolled in school or an early childhood education program and connected to appropriate community services. All family shelters have Children's Services Coordinators whose role is to assist parents and children with understanding their rights and ensuring they are able to access the services for which they are eligible. During the shelter intake process for families, shelter staff assesses each child's academic needs, screen them for special education needs, provide school supplies, and inform the families of their educational rights, including transportation assistance. Shelter staff also assist the family in completing the school enrollment process. Shelters have identified that some aspects of the school enrollment process can be challenging for homeless families (for example, gathering documentation of immunization requirements and birth certificates) so the shelters have established processes to assist families with completing the school enrollment process as quickly as possible. Shelter staff also maintain close connections with the local homeless education liaisons for their local schools to address any challenges that arise with school enrollment or accessing educational services. Children's Services Coordinators focus on providing developmentally appropriate services for children to enhance their academic progress.

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

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

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

	Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:
1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

(1) San Mateo County's sole provider of domestic violence-specific services is the nonprofit agency Community Overcoming Relationship Abuse (CORA). CORA is a CoC grantee, long-standing member of the CoC Steering Committee, and regular participant in other CoC committees, including the CoC Performance Measurement Subcommittee and the Rapid Rehousing Workgroup. The San Mateo County Human Services Agency (HSA, the CoC Lead Agency) meets with CORA to provide technical assistance and to learn about the needs of DV survivors in the community. Additionally, HSA staff sit on the County's DV Council, alongside CORA and other community partners, to review DV services and needs. San Mateo County's Human Trafficking Coordinator has attended CoC Steering meetings and, in 2021 provided information on the need for services for human trafficking victims as part of the planning process for implementing the Emergency Housing Voucher program.

The CoC Steering Committee is responsible for updating CoC-wide policies regarding victim services and housing, in consultation with CORA and other community providers. HSA and its technical assistance provider regularly review the governance charter for areas that need updates to ensure community needs are met and the CoC remains in compliance with HUD regulations. HSA, also the HMIS Lead, pulls and reviews HMIS data, including data on the number of people fleeing DV who access Coordinated Entry.

(2) HSA provides CoC-wide trainings on trauma-informed care for service providers to ensure all CoC services are trauma-informed. HSA has also provided technical assistance to assist agencies in ensuring their client processes are trauma-informed. HSA also organizes regular CoC-wide trainings by CORA on trauma-informed care for DV survivors, including topics on safety planning and accessing CORA's services, so that all providers are equipped to support DV providers.

CoC housing providers must inform clients of their rights under VAWA and are required under the CoC Governance Charter to document this. Additionally, HSA provides trainings on VAWA and other CoC compliance topics and has provided technical assistance and sample documents such as lease addenda to support providers in VAWA compliance. CoC housing providers must accommodate emergency transfer requests. CoC providers refer to CORA both for safe housing where a confidential location is warranted and to connect survivors to counseling and other survivor-targeted services.

	1C-5a.	Annual Training on Safety and Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
		NOFO Section VII.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) Homeless service programs train staff on an annual basis regarding best practices in effectively supporting DV survivors, dating violence, sexual assault, and stalking, including trauma-informed and victim-centered practices. CORA, the CoC's DV services provider, conducts a bi-annual 40-hour training for homeless service providers regarding the dynamics of relationships involving DV and supporting DV survivors through cultural humility and trauma-informed care. The training also provides hands-on skills in peer counseling, crisis intervention, assessment, and advocacy. At a recent Steering Committee meeting, CORA presented on DV-specific services (including the 24-hour hotline, emergency shelter, and subsidy) and connecting DV survivors to CORA. In June 2019, HSA provided a training centered on implementing the Violence Against Women Act (VAWA) into homeless service providers' policies, including adhering to the Emergency Transfer Plan. CORA participated in the training to offer additional information about best practices.

(2) The Coordinated Entry Services (CES) provider agency (Samaritan House) has an MOU with CORA (the CoC's victim services provider) to conduct bi-annual training for CES staff on DV intervention and prevention conducts and quarterly in-service trainings on identified topics as needed. Trainings cover CES procedures, safety screenings and the safety protocol designed by CORA, trauma-informed care, DV screening questions, interviewing, and safety planning. Via the CES DV protocol, clients identified as having a potential safety issue are immediately connected to CORA's DV hotline for DV assessment and connection to shelter, housing, and services. CES provider leadership maintain a close collaboration with CORA program leadership to continually communicate and refine procedures as needed. The CES provider also holds biweekly CES staff meetings to discuss how the processes are going with relation to DV clients, resources, and referrals.

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

	Describe in the field below:	
	1.	the de-identified aggregate data source(s) your CoC uses 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 Human Services Agency (HSA, the CoC Lead Agency) holds ultimate responsibility for assessing community needs related to DV. Alongside partners, HSA staff sit on the County's DV Council to review DV services and needs. To assess community needs related to DV, the CoC looks to Community Overcoming Relationship Abuse (CORA), the community's only provider of domestic violence-specific services and a long-standing HUD CoC Steering Committee member.

CORA operates many programs, including a DV shelter and DV housing programs. CORA's data is entered into and managed through Apricot by Social Solutions, an HMIS-compliant database. CORA also uses its Apricot database to assess the needs of DV victims in the community. For example, during San Mateo County's affordable housing and COVID crises, CORA has seen an increase in mental health issues, legal issues, and number of clients in crisis; many victims are choosing to stay with their abuser longer rather than face homelessness due to the economic situation and public health emergency, as well as all the threats that accompany those added stressors. CORA employs a full-time Data Analyst responsible for managing, evaluating, and reporting on data in Apricot. As needed, CORA's Data Analyst provides the CoC with DV-specific data to assess the needs of the community.

(2) In 2021, HSA and CORA collaborated to develop an assessment of need for Emergency Housing Vouchers (EHVs) for domestic violence survivors. CORA extracted data from Apricot and other data sources to quantify how many DV households were served in emergency shelter, how many were on waiting lists for shelter, how many were referred to other organizations due to there not being a DV shelter bed available. They found there were 121 such households in the period from October 1, 2019, to September 30, 2020. HSA compared this information to HMIS data on the overall numbers of people experiencing homelessness in the CoC to determine how many of the community's EHVs to set aside for DV households. HSA plans to use similar data again in planning for the upcoming stability voucher program.

| 1C-5c. | Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. | |
| | NOFO Section VII.B.1.e. | |

	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:
1.	the emergency transfer plan policies and procedures; and
2.	the process for individuals and families to request an emergency transfer.

(limit 2,500 characters)

(1&2) As is outlined in the CoC Governance Charter, CoC housing providers must document that clients were informed of their rights to request and receive an emergency transfer under the Violence Against Women Act (VAWA), and were provided with copies of the notices. A signed copy of acknowledgement must be maintained in client files. Clients may request an emergency transfer plan in writing or verbally to receive a transfer from their current unit to another unit. At the time of the request, provider case management staff work with the client to assess for immediate safety needs, and refer to the CoC's victim services provider, CORA, for safety planning and potential referral to CORA's confidential emergency shelter program if necessary to ensure immediate safety needs are met. Otherwise, for TH and project-based PSH, the program would work with CE to identify another shelter unit at another site, and to arrange for transportation as needed.

For tenant-based housing programs, the provider accommodates the request by working with the households to transfer the rental assistance to a new unit of the client's choosing. Housing navigation assistance may be provided to assist with locating a new unit. Providers must accept oral statements from program participants as certification of incidents of domestic violence, dating violence, sexual assault, or stalking in the absence of other documentation, and may not require third-party verification of an incident of domestic violence, stalking, etc., to enact VAWA protections. The CoC Governance Charter also requires that programs have a HUD-compliant written policy on Emergency Transfers. Further, the ability to request a transfer must be available regardless of sex, gender identity, or sexual orientation. In June 2019, HSA, the CoC Lead Agency, provided a training centered on implementing VAWA into homeless service providers' policies, including adhering to the Emergency Transfer Plan and provided sample lease addendum language. HSA also makes technical assistance available to providers in the CoC on VAWA.

1C-5d.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area.

(limit 2,500 characters)

The CoC ensures that CES is widely marketed and available to all populations and subpopulations in the CoC's geographic area, including survivors of domestic violence, dating violence, sexual assault, or stalking. The San Mateo County Human Services Agency (as the CoC Lead Agency) developed detailed Domestic Violence policies with CORA (the local victim services provider) that align with the CoC policies. The San Mateo County CoC provides individuals and families fleeing domestic violence access to housing and trauma-informed, victim-centered services that prioritize the survivor's safety needs, accommodate their unique circumstances, and maximize client choice. CES ensures equal access to homeless system programs for any households fleeing domestic violence, regardless of whether they initially contact a victim services provider or other homeless system provider, per the CES policies. HSA also makes technical assistance available to providers in the CoC about complying with VAWA, including supporting them to ensure their policies comply regarding emergency transfers to allow victims of domestic violence and/or sexual violence to move to another safe and available unit if they are concerned for their safety in the current unit/program.

	1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
		NOFO Section VII.B.1.e.	

		Describe in the field below how your CoC's coordinated entry includes:
	1.	safety protocols,
	2.	planning protocols, and
	3.	confidentiality protocols.

(limit 2,500 characters)

The CoC is committed to ensuring the safety of households fleeing domestic violence (DV) while respecting housing choice.

(1) If a household directly contacts CORA (the local victim services provider), CORA offers a trauma-informed, victim-centered 24-hour hotline with access to safe housing options, and other services. The hotline provides access to CORA's services, including emergency shelter, housing, legal services, and mental health services. These programs are designed to connect survivors to individualized supportive services while restoring their sense of safety, choice, and control. Households contacting the Coordinated Entry (CE) system are screened using victim-centered practices to determine safety concerns and receive referrals to DV or non-DV shelter and housing. Clients are referred to housing based on their unique circumstances (e.g., safety needs, income level, behavioral health needs, proximity to schools).

(2) The CoC has adopted a set of policies to support DV victims, which includes an Emergency Transfer Plan. The CoC ensures that covered programs maintain procedures in compliance with VAWA and HUD's DV Rule, including how programs offer tenants the ability to transfer to another unit for safety reasons. All providers have received training from HSA and CORA on how to comply with HUD's DV rule.

(3) Confidentiality is ensured regardless of how clients initially contact the homeless system. Both CORA and the CE system make referrals to DV-specific housing programs, including those receiving ESG, CoC, DOJ/OVW, HHS and other funds, as well as to non-DV-specific programs. If a client identifies as a DV survivor in response to the CE process, the CE provider will refer and connect the client to CORA. CORA assesses the client's needs and safety and offers them housing in a CORA shelter in a confidential location if appropriate. For clients served by CORA, data is securely entered into an HMIS-compatible database. DV households in homeless programs are never denied assistance if they do not wish to participate in HMIS.

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

	1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that 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 VII.B.1.f.	

Describe in the field below:	

	1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
	2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
	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 the CoC-wide anti-discrimination policy on an as-needed basis, utilizing stakeholder and CoC feedback.

(2) The CoC provides technical assistance support to providers as they develop or update their project-level anti-discrimination policies that align with the CoC-wide anti-discrimination policy. The CoC-wide anti-discrimination policy states that all homeless system providers and programs receiving federal CoC and/or ESG funds, or who contract with the San Mateo County Human Services Agency, shall affirmatively market their housing, shelter and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability and who are least likely to apply in the absence of special outreach, and maintain records of those marketing activities. The policy also states that housing and services must be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105 (a)(2). The policy also states that programs shall adopt written policies ensuring that LBGTQ+ individuals and families may receive supportive services, shelter and housing free from discrimination and that all programs shall comply with all applicable state and Federal civil rights and fair housing laws and requirements.

(3) The CoC evaluates whether project-level anti-discrimination policies comply with the CoC-wide anti-discrimination policies via program compliance check-ins or site visits. The CoC reviews the project's anti-discrimination policy and discusses the contents with program leadership.

(4) If a program were to be out of compliance with the CoC-wide anti-discrimination policies, the CoC would address the noncompliance with program leadership, offer technical assistance to the program to support the revision of their policies and practices, and take corrective action as necessary.

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

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.
Enter information in the chart below for the two largest PHAs highlighted in gray on the FY 2021 CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with–if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2021 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Housing Authority of the County of San Mateo	79%	Yes-HCV	Yes

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

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

(limit 2,500 characters)

The Housing Authority of the County of San Mateo (HACSM) is the sole Public Housing Authority in the CoC's geographic area. HACSM has implemented a homeless admission preference in their Moving to Work-Housing Readiness Program (MTW-HRP). MTW-HRP is a voucher program designed to provide homeless individuals and families with rental assistance for up to 5 years.

Additionally, HACSM provides a focus on self-sufficiency to support households in being successful without subsidy following graduation from the program. For the first 18 months in the program, participants receive case management from a homeless services provider within the CoC, before a transition into HACSM's self-sufficiency services. Eligibility requirements for MTW-HRP include that the applicants must be experiencing homeless as defined by HACSM's policy. Collaboration between HACSM and the CoC led to the referral process for MTW-HRP to be integrated into the Coordinated Entry System, which ensures prioritization of households who are experiencing the greatest vulnerabilities and most extensive histories of homelessness. In 2020, 10 new households joined the MTW-HRP, with a total of 184 households served by the program.

Starting in 2021, HACSM collaborated with the CoC to roll out the Emergency Housing Voucher (EHV) program. San Mateo County paired housing navigation services and additional supportive services through nonprofit service providers, including the victim services provider, to utilize EHVs. The CoC elected to set a preference for households experiencing homelessness at entry for EHVs. Our community has the highest EHV utilization rate in California as of mid-September 2022.

Additionally, HACSM operates a Project-Based Voucher (PBV) program which designates funds to existing or newly constructed housing units. Eligibility requirements for funding for some PBV units include housing individuals/families who are homeless, which requires selection preference for the specified units to include the criteria of homelessness. Various project-based sites in the CoC have a total of 11 PBV units set aside for residents experiencing homelessness prior to entry. In addition, HACSM has elected to contribute 30 PBV units to support the state-funded Mental Health Services Act (MHSA) program to house people experiencing or are at risk of experiencing homelessness and have a serious mental illness.

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

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

1.	Multifamily assisted housing owners	No
2.	PHA	Yes
3.	Low Income 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 VII.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)	No
5.	Mainstream Vouchers	No
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 VII.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)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Mainstream Vouchers

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

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

1C-7e.1.	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
Housing Authority...

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

Name of PHA: Housing Authority of San Mateo County

1D. Coordination and Engagement Cont'd

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

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

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1D-2.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition.	11
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 2022 CoC Program Competition that have adopted the Housing First approach.	11
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 2022 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 VII.B.1.i.	

	Describe in the field below:
1.	how your CoC evaluates every recipient–that checks Housing First on their Project Application–to determine if they are actually 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 the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

The CoC has adopted a systemwide policy on housing first stating that "the system prioritizes rapid placement and stabilization in permanent housing and there is an expectation that programs will not have service participation requirements or preconditions such as sobriety or a minimum income threshold." Operational program standards for ES, TH, RRH and PSH include expectations that align with Housing First. The CoC provides written guidance to all CoC-funded providers on how to align their policies to CoC standards.

(1&2) Each CoC-funded program provider's housing first policies and procedures are reviewed as part of the CoC rating process; points are awarded to projects that are consistent with CoC requirements. Renewal project performance data are incorporated into the scoring process, which can indicate whether programs are aligning with Housing First principles in assisting households to access and retain housing.

The CoC examines exits to permanent housing, housing retention, average length of stay, returns to homelessness, and increases to or stable income. Projects are expected to document how they are not screening participants out based on having too little income, actively using or having a history of substance use, having a criminal record, or having a history of domestic violence; and how they are not terminating participants for failure to participate in services, failure to progress on a service plan, loss of income, or being a victim of domestic violence. Renewal projects are scored based on whether their written program guidelines align with these criteria.

(3) The Human Service Agency (HSA, the CoC lead) manages a central referral list for CE placement. HSA tracks the rate of acceptance of CES referrals and reasons for refusal and can identify whether a program is creating barriers to program entry. Programs identified as having challenges with housing first principles in their program eligibility/screening are invited to meet with HSA to problem solve to lower barriers. HSA also reviews project performance data regularly, including exit destinations. Programs with high rates of exits to unsheltered locations are identified. Programs identified as having challenges with employing housing first principles are invited to meet with HSA and a technical assistance provider to problem solve to improve their ability to help participants secure housing and avoid returns to homelessness.

1D-3.	Street Outreach–Scope.	
	NOFO Section VII.B.1.j.	

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

(limit 2,500 characters)

(1) San Mateo County Human Services Agency (HSA, the CoC Lead Agency) funds and oversees three Homeless Outreach Teams (HOT) – 1 countywide team and 2 additional teams targeting areas of the community where there are disproportionally higher numbers of unsheltered people including BIPOC. HOT conducts intensive engagement and assists clients with connecting with other services to meet their needs. HOT coordinates with Coordinated Entry (CE) to ensure that any unsheltered person can participate in the CE process in the field- including, diversion, referral to shelters, housing intervention assessment, document prep assistance, and housing navigation. HOT workers create and implement a housing and services plan. HOT staff use HMIS to track contacts and performance outcomes. HOT partners with/refers to Street Medicine, Behavioral Health and Recovery Services (BHRS), safety net, homeless, and medical and behavioral health providers, substance use treatment programs, and law enforcement to meet peoples varied needs. The CoC is developing a Homeless Outreach App to help with more effective identification of homeless individuals and encampments. These rapid response tools provide a mechanism for community members to request for homeless outreach staff to make contact and assist in identifying/engaging new unsheltered households.

(2) HOT covers the whole county (100% of the CoC geographic area).

(3) Outreach is regularly scheduled for M-F 8am-5pm. There are some rapid response services by phone during the evenings, weekends, and holidays.

(4) HOT tailors outreach to those least likely to request assistance by maintaining multilingual staff, meeting with clients where they are living, and providing transportation as needed. For clients with cognitive or physical disabilities, HOT coordinates with the Street Medicine Team and the PATH program to access clinical specialists. HOT provides case management for those who are assessed through CE with highest needs. To build trust and rapport with people and meet their immediate needs, HOT repeats engagement attempts. Additionally, HOT staff receive training in topics such as motivational interviewing, trauma-informed care, and other topics to best equip them to serve clients with high needs. HOT receives info from city staff and other stakeholders about new encampments or locations of unsheltered people that may be difficult to locate, and then HOT conducts outreach to those locations.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section VII.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:

		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)		

1D-5.		Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
		NOFO Section VII.B.1.l.	

		2021	2022
	Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of "Current."	387	482

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section VII.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:	

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	No
3.	TANF–Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section VII.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, 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) HSA offers homelessness response system providers regular training on mainstream benefits, health, and employment services, including enrollment processes and application tips for program participants as well as service providers. HSA facilitated quarterly trainings at emergency shelters for families on how to enroll families in TANF, and coordinates to help all homelessness response system providers to access SOAR training.

(2) HSA works closely with the Healthcare for the Homeless program, which is part of the County's Health Department, to ensure people experiencing homelessness are enrolled in Medicaid (Medi-Cal) or other health insurance programs for which they are eligible. All providers of services in the homelessness response system can direct clients to HSA to assist with enrollment. HSA works hand in hand with Healthcare for the Homeless (HCH) to ensure that people experiencing homelessness are able to use their Medicaid and other health benefits. HCH operates mobile clinics and vans that bring health services to people who are unsheltered or living in shelters. The County also operates Street Medicine (providing primary care and psychiatric services) and a HEAL (mental health clinicians serving people who are unsheltered), which both serve people who are unsheltered and work closely with homeless programs. Health Department leadership and CoC staff meet on a regular basis to ensure that structures are in place for people experiencing homelessness to receive health care services, including substance abuse treatment, mental health treatment, and physical health treatment.

(3) HSA coordinates to help all homelessness response system providers to access SOAR training. HSA also receives state Housing and Disability Advocacy Program funding, which is used to provide eligible, Coordinated Entry-referred households with SSI/SSDI benefits advocacy in conjunction with housing navigation, rental subsidy, and supportive services during the benefits application process.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section VII.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 launched and increased non-congregate shelter capacity, starting from early COVID-19 and continuing through now. Prior to COVID, the community's adult shelters were all congregate. Beginning early in COVID, the CoC and shelter providers implemented temporary non-congregate shelter programs in hotels, providing safe shelter, housing-focused case management and other supportive services. The programs began serving people who were at high risk for serious medical complications if they were exposed to COVID and these programs were key to both creating safe shelter for this population and also allowing the existing congregate shelters to reduce their on-site capacity, in order to maintain social distancing. Over time, the temporary programs served additional populations, including serving as overflow for existing shelters, including when the congregate shelters were experiencing COVID outbreaks. In more recent times, there has been a specialized non-congregate shelter program to provide safe places to isolate for people who become COVID positive while in a congregate shelter.

In addition to these temporary non-congregate shelter programs that began in early 2020, the CoC also opened 2 new ongoing shelter programs that are non-congregate shelters in 2021, and is going to be launching 2 additional non-congregate shelters later in 2022. These new non-congregate shelters have significantly expanded the shelter resources.

These non-congregate shelters serve people experiencing homelessness, providing safe, private shelter space, and supportive services, and serve many people who are experiencing unsheltered homelessness who have been hesitant to access the congregate shelters.

The County has purchased three former motels/hotels for conversion into non-congregate shelter. Two became operational in 2021 and one will open in fall 2022: (a) Coast House, 51 units, launched in 2021; (b) Pacific Shelter, 74 units, launched in 2021; and (c) El Camino House, 44 units, to begin taking clients in Fall 2022. Additionally, a 240-unit Navigation Center is currently under construction will provide non-congregate shelter and intensive services for individuals and couples. The Navigation Center is expected to begin serving clients in Dec 2022.

The CoC has invested federal, state (including competitive Homekey state grants) and local funds towards non-congregate shelters.

| | ID-8. | Partnerships with Public Health Agencies--Collaborating to Respond to and Prevent Spread of Infectious Diseases. | |
| | | NOFO Section VII.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) The pandemic made it necessary for the CoC, in close collaboration with the Health Department, homeless programs and County leadership, to mobilize and sustain a highly complex and ongoing response to COVID, which is still continuing today. Responding to COVID deepened the connections and integration between HSA as the CoC lead agency and the County's Health Department, including both Public Health/Communicable Diseases and Health Care for the Homeless programs within the Health Department. Public Health issues (and updates as needed) CDC guidance and other protocols on preventing and responding to infectious diseases within homeless programs and among the population of people experiencing homelessness, and the CoC has worked closely with Public Health and homeless programs to ensure smooth communication of the protocols and to create venues for questions and additional guidance for homeless service programs. When there was an emerging challenge, such as the shelter outbreaks driven by the Omicron surge in early 2022, the CoC and Public Health held a series of meetings with shelter providers and together created a response specifically for the shelters. The ongoing communication between CoC staff and the Health Department, including Public Health and executive Health leadership, allows for the identification and response to any new challenges related to infectious disease outbreaks. The structure of CoC and Public Health coordination was strengthened by the COVID response process, and is utilized for all infectious disease response including flu, M-Pox, etc.

(2) The CoC works with Public Health to ensure that programs serving people experiencing homelessness are aware of Public Health guidance regarding infectious diseases, and have resources needed. Examples of resources that the CoC and Public Health have worked together to provide include: flu vaccines, PPE and COVID tests for people experiencing homelessness and staff of programs that serve them, information on COVID vaccines and boosters, specialized clinics and resources to provide vaccines at homeless programs, and programs to provide isolation for people experiencing homelessness who become COVID-positive. Also, the Street Medicine outreach team and other Health services are able to provide additional specific services to people experiencing homelessness who are exposed to infectious diseases.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section VII.B.1.o.	

	Describe in the field below how your CoC effectively equipped providers to prevent or limit infectious disease outbreaks among program participants by:
1.	sharing information related to public health measures and homelessness, and
2.	facilitating 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) Throughout the COVID-19 pandemic, the San Mateo County Human Service Agency (HSA, the CoC Lead Agency) has worked closely with the County's Health Department (including both Public Health and Healthcare for the Homeless (HCH) programs within Health) to communicate with homeless service providers. Health developed guidance documents and emails, with input from the CoC, to transmit to homeless service providers, with a particular focus on outreach teams and emergency shelters. All materials developed incorporate guidance from the CDC, State of CA and local Public Health. The CoC ensured that the Health communication reached all relevant providers, and the CoC also functions as a liaison between homeless programs and Health, flagging when additional guidance or communication is needed and helping to bring together responses to emerging challenges.

(2) CoC staff have ongoing coordination with both Public Health and HCH regarding infectious disease prevention and response and communication to programs that serve people experiencing homelessness. The CoC, Public Health, and HCH worked together to provide COVID-19 guidance, resources (PPE and test kits), and vaccine information. The CoC has provided input to Public Health and HCH regarding best strategies for communicating to homeless programs. The CoC has also coordinated a number of meetings for Public Health, HCH, homeless programs and the CoC to discuss COVID response, infectious disease prevention, vaccine resources, and shelter protocols. Public Health has also provided vaccine resources specifically at shelter programs and to homeless outreach programs. HCH also has requested input from homeless providers to help craft COVID-19 education materials for people experiencing homelessness.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section VII.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 (CE) system covers the entire CoC geographic area and all populations. Access points are any of the eight Core Service Agencies, which are geographically dispersed to cover all regions of the CoC. The Homeless Outreach Team (HOT) is a designated access point for any household living outdoors who are not able or do not wish to go to a Core Service Agency. HOT coordinates with CE staff to ensure that any unsheltered person can access CE process steps in the field.

(2) CE uses a locally designed, standardized assessment process, known as the CES assessment. The CES/Diversion specialists first attempt to provide diversion services to every individual or family who is connected to CE. If the diversion specialist determines that there are no viable diversion options available to the individual or family at that time, then the diversion specialist will provide the individual or family with the CES assessment. The questions within the CES assessment are consistent for all individuals or families receiving the assessment. The diversion specialists also receive training on methods of administering the assessment to maintain consistency.

(3) The CoC has hosted CE system evaluations and focus groups in which participating projects and households had the opportunity to provide feedback on CE policies and practices. For the CE system evaluations, participants included Core Service Agency, shelter, CES/Diversion staff, and other staff from homeless system programs, as well as individuals and families who were unsheltered, sheltered, or recently housed. Recently, the CoC hosted several focus groups with unsheltered and sheltered participants from congregate and non-congregate shelters to request feedback, including but not limited to the CE system. The CoC has also launched a lived experience advisory group comprised of participants with current or former lived experience of homelessness. The lived experience advisory group will be providing feedback on CE policies and practices. The CoC will continue to request feedback and incorporate revisions to policies and practices on an ongoing, as-needed basis.

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

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

(limit 2,500 characters)

(1) The CE system is widely marketed and available, including to people experiencing chronic homelessness, veterans, families with children, youth, survivors of DV, and people with language barriers and physical or mental disabilities. Special outreach is conducted by the 8 Core Service Agencies directly and through partnerships in their geographic areas to populations least likely to seek assistance. Outreach is conducted through partners such as clinics, schools, and other community-based organizations. HOT conducts outreach throughout the community, focusing on areas with high numbers of unsheltered people. HOT works with the County Health Dept. Street Medicine team to identify and serve medically vulnerable homeless individuals and connect them to shelter and housing via CE.

(2) As an initial step, the CES/Diversion team conducts a diversion conversation with each household to determine if an immediate solution to their housing crisis can be identified. For households that cannot be diverted, the CES/Diversion team uses a locally designed assessment tool that collects information about length of time homeless, vulnerability, and barriers to housing. Households assessed as being high-need based on these factors are prioritized for a housing program.

(3) The CE system matches households to a permanent housing program (using the results of the assessment to identify people most in need of assistance), and ensures that a service provider (outreach, shelter, or Housing Voucher Navigation case manager) is available to assist the household in connecting with the housing provider as quickly as possible. A Housing Voucher Navigator can be matched to a household upon housing program match if the household is not already connected to a case manager through an outreach or shelter program.

(4) The CES/Diversion team strives to reduce burdens on people accessing CE. For example, since many individuals accessing CE may have challenges staying in contact with the CE system via phone, CES/Diversion staff gather as many potential points of contact as possible and make multiple attempts to contact individuals. CES/Diversion staff also work closely with outreach workers who go into the community to contact people. Some individuals accessing CE face challenges getting to a physical location to meet with CES/Diversion staff, so the CoC has developed a policy in which CES/Diversion staff provide CES assessments via phone to bring services to the individual.

	1D-10.	Promoting Racial Equity in Homelessness–Conducing Assessment.	
		NOFO Section VII.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.	08/30/2022

1D-10a.	Process for Analyzing Racial Disparities–Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section VII.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)

In the past year, HSA (CoC Lead Agency) has conducted two assessments to identify racial disparities in the homelessness response systems. The first racial disparities assessment was conducted as part of a planning process, conducted in Spring 2022, that informed the community's strategic plan as well as an application for state funding to support homelessness response efforts. In August 2022, HSA further analyzed HMIS and PIT data to identify racial disparities as part of an initiative to better understand existing disparities, led by the CoC's Racial Equity Committee.

(1) For the assessment informing the strategic planning process, the CoC utilized PIT and HMIS data to identify subpopulations overrepresented in the homelessness response system. The CoC assessed for disparities and overrepresentation in rates of unsheltered homelessness, rates of first-time homelessness, rates of exits to permanent housing, length of time spent homeless, and proportion of people accessing programs via street outreach. The racial disparities assessment conducted for the Racial Equity Committee utilized local HMIS data and PIT data as well as census data to compare people below 125% of the poverty level to those identified through the PIT and to those served by the homelessness response system in San Mateo County. In addition to looking broadly at disparities between these sources of data, the assessment also examined disparities in exits to permanent housing.

(2) These racial disparity assessments identified that American Indian/Alaska Native, Black/African American, Native Hawaiian and OPI, and Hispanic/Latinx people are over-represented in the homeless population. Black households are also overrepresented among those experiencing homelessness for the first time (18% of the first-time homeless population). Hispanic/Latinx households are disproportionately represented among households experiencing unsheltered homelessness (47% of households experiencing unsheltered homelessness). In addition, the assessments identified that people who are Native Hawaiian or OPI have a longer time spent homelessness (231 days compared to 175 days for all person). Finally, the assessments identified that American Indian or Alaska Native individuals experience permanent housing exits at lesser rates and Native Hawaiian and OPI individuals experience exits to permanent housing at higher rates than other subpopulations.

1D-10b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.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.	No
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.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

	Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.	

(limit 2,500 characters)

The San Mateo County CoC Steering Committee and Human Services Agency (as the CoC lead) are committed to identifying a strong set of strategies to promote racial equity in the homelessness response system. HSA is working to understand the causes of racial disparities in who experiences homelessness in the County and using that analysis to advance racial equity. HSA staff and consultants have conducted multiple analyses of homeless system data by race and ethnicity and presented the results of these analyses to the Racial Equity Committee and the CoC Steering Committee, most recently in June and August 2022. HSA also developed a Racial Equity analysis tool for providers in the CoC to use to analyze their own agency-level data.

At the April 2021 CoC Steering Committee meeting, the Steering Committee approved the formation of a Preliminary Planning Committee (PPC) where representatives from organizations working in the homelessness response system would review data analyses and develop initial recommendations for a CoC-level, systemwide plan to advance racial equity in the San Mateo County homelessness response system. The PPC was convened and held five meetings between May and October 2021. The group reviewed the CoC's analyses on racial equity in the homelessness response system, including available data on racial disparities in access and outcomes, discussed what additional qualitative and quantitative information would be important to gather, and developed initial recommendations for activities to include in the CoC's racial equity workplan for 2022. In 2022, the CoC began convening quarterly meetings of the Racial Equity Committee. The Racial Equity Committee is charged with overseeing the following strategies for the CoC: gathering qualitative information to better understand racial disparities; developing and releasing regular reports on racial disparities and racial equity; providing systemwide training for service providers and landlords; and enhancing representation of those with Lived Experience in CoC and agency leadership.

1D-10d.	Tracking Progress on Preventing or Eliminating Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The San Mateo County CoC Committee on Racial Equity meets on a regular basis, and its activities include reviewing metrics that are used to track the progress of preventing disparities in homeless assistance. The Committee has determined that one of the most impactful metrics is centered on racial and ethnic composition of people experiencing homelessness, compared with the general population. This metric specifically measures what disproportionalities exist among racial and ethnic subpopulations among all persons, those below 125% of the federal poverty level, and those experiencing homelessness as measured by the point in time count. The second measure uses the most recent point-in-time count data and the FY 2022 service access data compared to the overall population within the County/CoC as described by the census to understand the rate of those experiencing homelessness per 1,000 individuals, otherwise known as the rate of homelessness. The CoC also reviews the disparities in permanent housing outcomes that currently exist among racial/ethnic subpopulations in rates of exit to permanent housing. In addition to the CoC Committee on Racial Equity's reviews, the CoC has created a program equity data review tool which allows providers to view the racial and ethnic composition of their clients by project, including comparisons to other projects and the general population. The CoC provides updates to the general population and CoC data in this tool for programs' use of the built-in comparison benchmark tool for their analysis.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC's Outreach Efforts.	
	NOFO Section VII.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 has implemented numerous ways that people with lived experience of homelessness are involved in service delivery and decision making, including focus groups, surveys, and participation in the CoC Steering Committee and other committees/boards. Recent examples include surveys of people who are unsheltered, identified through extensive outreach from trained outreach case managers throughout the CoC, with a special focus on areas that have higher numbers of people who are unsheltered. Also, when the CoC participated in the planning of a new large non-congregate shelter, there were focus groups with people currently experiencing homelessness, and County executives and other program managers were able to hear directly their input on the new program. The focus group participants were identified through targeted outreach by shelter, safe parking and outreach programs. CoC member organizations also include people with lived experience in decision making, including by seeking to hire and promote people with lived experience of homelessness as staff in programs providing direct services.

The CoC has also launched the Lived Experience Advisory Group (LEAG), comprised of people with current or past experience of homelessness. Members were identified by extensive targeted outreach to staff and leadership of homeless programs and other related systems (employment programs, re-entry programs, etc.). The purpose of LEAG is to obtain lived expertise for incorporation into decision on homeless system and program policies and funding priorities. A CoC Steering Committee member who has lived experience also is a member of LEAG.

In addition, the Lead CoC Agency has hired a Lived Experience Analyst focused specifically on developing and implementing further strategies for incorporating lived experience into the CoC's planning and policymaking. This staff, who has lived experience of homelessness, will review existing engagement efforts, research best practices in the field, lead the implementation of planned strategies and structures, provide input on how policies can be more person-centered, and make recommendations to the CoC and to provider agencies.

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	31	6
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	1	0
3.	Participate on CoC committees, subcommittees, or workgroups.	7	0
4.	Included in the decisionmaking processes related to addressing homelessness.	1	0
5.	Included in the development or revision of your CoC's local competition rating factors.	1	0

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

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

(limit 2,500 characters)

CoC membership agencies provide employment and professional development to individuals with lived experience in a variety of ways. Membership agencies employ people with lived experience in many roles in many programs. Examples include changes to the hiring and recruiting processes to increase diversity and representation among staff (changing language in hiring documents, paying attention to bias/racism, identifying skills and abilities that are useful but that may not be highlighted in "traditional" job interview questions). Agencies also implement strategies to support the professional development of staff who have lived experience of homelessness, including providing training and supporting people in advancing through the organization into more senior roles.

In addition, the CoC Lead Agency recently hired a Lived Experience Analyst, who has lived experience of homelessness and will work with the CoC, CoC membership organizations and other stakeholders focused specifically on lived experience. This Analyst will review existing engagement efforts, research best practices in the field, lead the implementation of planned strategies and structures, provide input on how policies can be more person-centered, make recommendations to the CoC and to provider agencies, and implement new strategies, which may include additional ways that the CoC and membership organizations can provide professional development and employment opportunities to people with lived experience of homelessness.

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

	Describe in the field below how your CoC:
1.	how your CoC routinely gathered feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance; and
2.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness

(limit 2,500 characters)

(1) The CoC has routinely gathered feedback from people experiencing homelessness, including those receiving CoC/ESG-funded assistance. The CoC has also launched the Lived Experience Advisory Group (LEAG), comprised of people with current or past experience of homelessness to obtain lived expertise for incorporation into decisions on homeless system and program policies and funding priorities. Renewal projects are required to describe how the project involves people with lived experience, including project participants, in providing input on program planning and evaluation, development of policies and procedures, and decision-making. The CoC also solicits feedback from people with lived expertise as part of various planning processes. For instance, in the past year, the CoC conducted surveys among people with lived experience related to accessing and staying in shelters and conducted focus groups of unsheltered and sheltered people to inform the CoC's strategic plan. HSA, the CoC Lead Agency, has expanded its capacity to address challenges raised by people with lived experience by hiring in September 2022 a Lived Experience Analyst who will help enhance how the CoC and providers incorporate the expertise of people experiencing homelessness into program, agency, and CoC decision-making. This includes proactively soliciting information regarding the challenges people are raising regarding navigating the homelessness response and housing systems and working with system leaders and stakeholders to address those challenges.

(2) The CoC actively works to address the challenges identified by people with lived expertise. A recently-conducted survey revealed many people do not stay in shelters because of other people in their space, the shelter feeling too crowded, and safety concerns. The CoC is addressing these challenges by expanding non-congregate shelter capacity, which provides additional privacy and security.

Another challenge noted by people who participated in focus groups was related to communication and transparency of processes for accessing shelter and housing. The CoC incorporated this feedback into the strategic plan, with a goal dedicated to listening and responding to the voices of people with lived experience. Strategies related to this goal include identifying how to streamline access to housing and services, enhancing a "customer service" orientation throughout the system, and reviewing existing grievance processes.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	

	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

(limit 2,500 characters)

(1&2) The CoC is committed to expanding the supply of affordable housing and engages with elected officials and agency staff with influence over the development process. CoC representatives of government and nonprofit providers have, through participation in the Home for All (HfA) initiative, promoted policies that support affordable housing. HfA is a collaborative initiative comprised of the County, cities/towns, school districts, community-based organizations, advocacy groups and businesses. The mission of HfA is to establish a climate in the county where a diversity of housing is produced and preserved to provide a culturally, generationally, and economically diverse community with housing for all. It is supported and funded by the County. The County also funds TA to jurisdictions updating their Housing Elements to improve their quality, including as it relates to equity and fair housing.

Over the past year, the HfA Steering Council met with city councilmembers and staff to discuss opportunities to improve and expand the HfA Community Engagement program by using inclusive and innovative community engagement strategies. With the goal of engaging a wider audience of community members in creating a vision towards a livable community, this Program was designed as a collaborative learning exchange. This framework can inform community engagement efforts in local cities and towns, including regarding current Housing Element update efforts.

HfA unveiled its toolkit, which identifies recommendations and best practices related to zoning, housing policies. Included in the toolkit is information on inclusionary zoning and using public land for housing as ways to increase affordable housing stock. Also included are policy reform ideas for reducing regulatory obstacles to building housing, such as reducing parking requirements. Together, these tools and this effort may help to build public support for affordable housing development. Additionally, HfA reconvened its Educator and Workforce Housing Taskforce comprised of cities and school districts to discuss strategies and policies and identify resources to build affordable housing for school and local government employees. HSA, the CoC Lead, convened elected officials, decisionmakers and community-based organizations in 2022 to develop a plan to end homelessness in the county. HfA is a key partner in the effort and will be launching a task force at the end of 2022 to carry forward the plan.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 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 VII.B.2.a. and 2.g.	
	You must upload the Local Competition Deadline attachment to the 4B. Attachments Screen.	

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC's local competition.	08/11/2022

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 VII.B.2.a., 2.b., 2.c., and 2.d.	

	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

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 VII.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)?	100
	2.	How many renewal projects did your CoC submit?	10
	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 VII.B.2.d.	

		Describe in the field below:
	1.	how your CoC collected and 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 relies on Annual Performance Report (APR) data to score renewal project applications. Renewal projects are informed of the time period for which APR data (this year May 2021 through April 2022) will be analyzed and informed of the specific date the HMIS Lead will pull APR data from HMIS to inform the competition process. Housing project applications are scored on exits to permanent housing and/or retained permanent housing. The CoC establishes a minimum standard for these and other performance measures, and renewal projects are scored based on whether they met the minimum CoC standard.

(2) The CoC scores the renewal transitional housing project on the length of stay of program participants. Data for this measure come from the APR, using the process outlined above.

(3) The CoC's Coordinated Entry (CE) system uses an assessment tool and process that prioritizes households with the highest needs, as measured by their length of time homeless, barriers to housing, and vulnerability. CoC-funded projects are expected to have low barriers (only funder-mandated eligibility requirements are permitted) and to accept all referrals from CE that meet their criteria. Projects are evaluated in the rating and ranking process based on whether they have a policy to accept all CE referrals and to document any reason for a rejection. These requirements ensure that projects are serving the highest need households.

An additional scoring factor in the project ranking process is whether the project ensures that participants are not screened out, and not terminated from programs, based on having low/no income, current/past substance abuse, criminal histories, experience of domestic violence, or lack of participation in supportive services. This scoring factor is applied to both renewal and new projects. Projects that do not have each of these barriers, and that document that in their policies and procedures, receive higher scores.

(4) Projects serving high-need, vulnerable populations are rated as indicated above. The high-need scoring factor and the factors related to housing first and low/no barriers to participation allow the CoC to assess applicants for actual use by, and prospective accessibility to, high-need populations.

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

		Describe in the field below:
	1.	how your CoC obtained input and included persons of different races, particularly those over-represented in the local homelessness population;
	2.	how the input from persons of different races, particularly those over-represented in the local homelessness population, affected how your CoC determined the rating factors used to review project applications;
	3.	how your CoC included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; and
	4.	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 2022 Project Review and Ranking Process was developed with input from and approval by the CoC Steering Committee, which includes representation of people of races and ethnicities as well as organizations that work with groups that are over-represented in the population of people experiencing homelessness, such as Project WeHOPE (predominantly serves East Palo Alto community) and Coastside Hope (predominantly serves Latinx households and agricultural workers living in coastal San Mateo County).

(2) The CoC Steering Committee is responsible for reviewing and approving the rating factors used to score project applications. The Steering Committee met to review the rating factors, providing an opportunity to have any questions answered and offer suggestions for modifying proposed rating factors. No proposed modifications were made and the rating factors for the 2022 competition were approved unanimously

(3) The Review Panel for the 2022 competition included individuals who are participating in the CoC's Racial Equity Planning Committee, which is working on developing a one-year work plan for the CoC to advance racial equity in the homelessness response system. Several of these panel members are staff of organizations that serve communities where there is an over-representation of people experiencing homelessness.

(4) In 2021 the CoC added rating factors for renewal projects considering the degree to which the projects had identified barriers to participation by people of different races and ethnicities particularly those over-represented in the homelessness population and steps the projects have taken or will take to address identified barrier. These rating factors remained for the 2022 competition. New projects are evaluated on their proposed processes and strategies to identify and address barriers. These factors were taken into consideration by the Review Panel in determining the final rank order of projects on the Priority List. In 2022, the CoC provided additional guidance for project applicants to respond to questions regarding barriers to participation, including examining and responding to barriers to accessing the program, barriers due to disparities in the experience of participating in the program, and barriers in program outcomes.

1E-4.	Reallocation–Reviewing Performance of Existing Projects.	
	NOFO Section VII.B.2.f.	

		Describe in the field below:
	1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
	2.	whether your CoC identified any projects through this process during your local competition this year;
	3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; 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) As indicated in the CoC's written Project Review and Ranking Process (PRRP), the CoC Review Panel actively reviews performance of all renewal projects through the project ranking process. All projects are scored using objective performance criteria, as outlined in the PRRP. Projects falling into Tier 2 based on their score are candidates for reallocation. Any grants with significant underspending are also candidates for reallocation.

(2) No projects were identified as candidates for reallocation in the FY 2022 competition.

(3) No projects were reallocated.

(4) The Review Panel assessed that the lower ranked projects were still performing at a high enough rate and filled critical needs in the community for rapid rehousing and permanent supportive housing. Re-allocating permanent housing units to create different permanent housing units would not create any positive system level impacts on the numbers of people experiencing homelessness.

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	No

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

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/14/2022

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section VII.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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/14/2022

1E-5b.	Local Competition Selection Results–Scores for All Projects.	
	NOFO Section VII.B.2.g.	
	You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes

1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	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.	09/14/2022

1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section VII.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 has been posted on the CoC's website or partner's website.	

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
  - FY 2022 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.	Bitfocus

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

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

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

	Enter the date your CoC submitted its 2022 HIC data into HDX.	04/30/2022

2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section VII.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 databases that meet HUD's comparable database requirements; and	
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.	

(limit 2,500 characters)

(1) There is only one DV housing and service provider in San Mateo County – Community Overcoming Relationship Abuse (CORA). CORA's data is entered into and managed through Apricot by Social Solutions, an HMIS-compliant database. The San Mateo County Human Services Agency (HSA, the HMIS Lead) includes CORA in HMIS User group meetings and communications. Through these meetings, HSA provides information and guidance regarding data collection best practices and upcoming HMIS Data Standards changes. HSA also provides resources to the HMIS User group, including CORA, including sample data collection materials, data entry guide featuring data item definitions, and links to applicable HUD resources.

HSA has invited CORA to attend HMIS System Admin webinars, which CORA has, and HSA has shared applicable resources from HUD for their review. As part of its data quality monitoring as the HMIS Lead, HSA has met with CORA and confirmed that CORA is collecting the required data elements and is able to report on them using Apricot.

(2) The San Mateo County CoC is compliant with the 2022 HMIS Data Standards in both the HMIS and the one HMIS-comparable database in the CoC. Apricot collects the same data elements required in the 2022 HMIS data standards.

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

Enter 2022 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	655	13	624	97.20%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	165	0	165	100.00%
4. Rapid Re-Housing (RRH) beds	482	29	453	100.00%
5. Permanent Supportive Housing	1,057	0	914	86.47%
6. Other Permanent Housing (OPH)	649	26	544	87.32%

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

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

(limit 2,500 characters)

Not applicable

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

Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?	Yes

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	02/23/2022

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	04/30/2022

2B-3.	PIT Count–Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	

	Describe in the field below how during the planning process for the 2022 PIT count your CoC:
1.	engaged stakeholders that serve homeless youth;
2.	involved homeless youth in the actual count; and
3.	worked with stakeholders to select locations where homeless youth are most likely to be identified.

(limit 2,500 characters)

San Mateo County Human Services Agency (HSA, the CoC Lead Agency) implemented specific measures to effectively count youth experiencing homelessness during the 2022 PIT count.

(1) StarVista is a non-profit that provides services to youth experiencing homelessness in San Mateo County and receives funding for shelter, RRH, and other youth services through the County. StarVista is the only provider of youth-specific shelter or transitional beds and was responsible for reporting complete data for the sheltered PIT. In preparation for the 2022 unsheltered count, HSA worked with StarVista to plan for counting unsheltered youth. As in the prior unsheltered PIT count, HSA and StarVista determined that the most effective strategies for the CoC were to include youth-specific questions in the PIT survey to get more information about youth identified during the count. HSA worked closely with StarVista program managers to get feedback on the youth-specific questions in the unsheltered survey to ensure that the questions were youth-friendly, and that youth would understand the intent of the questions. HSA also incorporated learnings from the 2019 PIT count efforts, in which StarVista also provided input on the training materials that were provided to each PIT volunteer, with a focus on ensuring volunteers understood best practices for counting and surveying youth.

(2) San Mateo County has traditionally identified only a small number of youth to be experiencing homelessness in our community, both during the PIT counts and through service provider outreach and Coordinated Entry access, and therefore did not actively involve youth in the actual count.

(3) San Mateo County's PIT count method involves a count of the full geographic area by census tract. StarVista was involved in the outreach and recruitment process for enumerators for the day of the count. Additionally, HSA gathered information from StarVista program managers on known locations and hotspots where unsheltered homeless youth reside and provided this information to the enumerators covering those census tracts to ensure an accurate count. HSA also did targeted outreach to safe parking programs that serve individuals and families with children to obtain their program's PIT count data.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section VII.B.5.a and VII.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 2021 and 2022, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, 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 2022.

(limit 2,500 characters)

(1) In 2019 and in prior counts, San Mateo County conducted both the sheltered PIT count and sheltered PIT survey with willing shelter participants. In 2022, San Mate County did not conduct a sheltered PIT survey as it had in prior counts, as changes were made to increase the number and quality of unsheltered surveys. Otherwise, the sheltered PIT count methodology remained the same and data quality was comparable, with the vast majority of data coming from HMIS.

(2) The methodology for the 2022 unsheltered count and survey differed from the 2019 and 2017 counts where the count and unsheltered survey occurred simultaneously. Instead, the 2022 count used a methodology that separated the unsheltered count from the survey in an effort to increase the number of surveys completed by people experiencing homelessness. The methodology consisted of the observational count conducted on one day and sample survey of the unsheltered population conducted over a period of seven days following the observational count.

Separating the sample survey from the observational count allowed for more surveys to be collected over a seven-day period. The known locations of unsheltered individuals that were collected during the observational count were then used to assist survey teams with knowing which areas of the county to prioritize. Survey teams were also provided with "hotspot" information of previously known encampments and areas with unsheltered individuals. This information allowed teams to go directly to these areas rather than having to search again for individuals.

Additionally, homeless service providers host regularly occurring events for people experiencing homelessness (e.g., free meals, shower services, etc.), and survey teams specifically targeted these events to gather more survey responses.

(3) By separating the count and survey, targeting hotspots, and meeting people where they are at, this greatly increased the volume of surveys collected in the 2022 PIT count and led to more representative and accurate data than what had been collected in previous PIT counts.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
  - FY 2022 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 VII.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)

As part of its Strategic Plan on Homelessness, the San Mateo County Human Services Agency (HSA, the CoC Lead Agency) is committed to preventing homelessness whenever possible.

(1)HSA analyzes data from Core Service Agencies (8 geographically distributed safety net agencies funded by HSA) and the Homeless Outreach Team to determine factors predictive of homelessness. The Core Service Agencies assess households seeking services (food, clinic, legal, tax preparation, or financial assistance regarding a range of needs) and can identify those households behind on rent or utility bills who are more likely to be at risk of homelessness. The CoC Performance Measurement Committee has also reviewed HMIS first-time homelessness data to identify other prevention strategies. The CoC saw a decrease in first-time homelessness correlated with the pandemic-era increase in available rental assistance and marketing thereof, and with the eviction moratoria.

(2)HSA provides funding to safety net and homelessness prevention services to help at-risk residents maintain their housing, and for shelter diversion as part of Coordinated Entry. During COVID-19, significant new resources were distributed to prevent homelessness for people who lost income due to the pandemic (e.g. ERAP). Prevention services include financial assistance for deposit, rent, and utilities back-pay; transportation assistance; mediation services for negotiating stays; tenants' rights education; and referral to legal services. The CoC is actively working to maintain system capacity to provide emergency financial assistance to help households maintain housing. HSA also facilitates a monthly workgroup with system partners (foster care, hospital, mental health system, jail) on system alignment and housing for individuals and families at risk of homelessness. HSA supports these systems by sharing information about housing resources and best practices to enhance discharge planning services, supporting family reunification, and providing diversion training. HSA, in partnership with the jail and public hospitals, started a new program for institutional diversion to connect people to housing prior to exiting the County jail or the County hospital. HSA continues to work with these partners to refine strategies to prevent discharge from institutions to homelessness.

(3)HSA's Center on Homelessness Manager and Analyst are responsible for the CoC's implementation of strategies to reduce first-time homelessness.

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

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

(limit 2,500 characters)

(1 & 2) As part of the design of CES, the San Mateo County Human Services Agency (HSA, the CoC Lead Agency), developed a locally designed assessment tool that gathers information on people's length of time homeless (LOTH). This data helps prioritize those families and individuals with the longest LOTH and refer them to available housing interventions as quickly as possible. HSA prioritizes available PSH and other housing programs for those with the highest housing barriers and needs, including consideration of the longest LOTH. HSA also invests local funds in Homeless Outreach Teams that develop housing plans for unsheltered homeless individuals, targeting those who have long LOTH. HSA prioritizes Veterans with the longest LOTH and the highest needs for housing resources using the CoC's by-name Master List of Veterans for referrals to SSVF RRH. HSA facilitates a monthly case conference to discuss Veterans whom they have had difficulty connecting to services or housing, including Veterans with the longest LOTH. In addition to prioritizing those with longest LOTH through CES, HSA works to reduce LOTH, by funding a variety of services within shelters and also in other programs, such as housing programs and homeless outreach programs, that assist people with moving into housing. HSA funds housing-focused case managers at all shelters and works with shelters on strategies to support shelter residents to identify and move into permanent housing as quickly as possible. HSA and the Housing Authority fund housing locator staff that support households experiencing homelessness who are matched to a housing voucher, to help them find a rental unit within the very competitive local rental market. HSA also works with partners to expand the housing resources available to people experiencing homelessness, including prioritizing EHVs for people experiencing homelessness and maximizing the number of units in affordable housing programs that are set aside for people experiencing homelessness. HSA also convened meetings with shelter, outreach, housing programs, substance abuse treatment, mental health services, older adult programs, and others to discuss individuals who are experiencing homelessness and have significant needs (many of whom have long LOTH) and how homeless programs and partner programs can enhance the ways that they are served and assisted with housing.

(3) The HSA Center on Homelessness Management Analyst is responsible for overseeing these strategies.

	2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing–CoC's Strategy	
		NOFO Section VII.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 CoC has implemented various strategies to increase housing placements and retention. The San Mateo County Human Services Agency (HSA, the CoC Lead Agency) requires that all programs, including shelters receiving local or ESG funding, offer housing-focused case management and implement housing first practices. ESG-CV funds have been used to target people living in non-congregate shelter for rapid rehousing assistance and additional housing location supports. HSA has provided CoC-wide trainings focused on housing-focused case management, building effective landlord partnerships, and motivational interviewing. Providers receive annual, individualized technical assistance to help improve housing outcomes. The CoC has also invested local resources and increased the inventory of RRH, PSH, and housing locator services. The CoC has also paired locally funded supportive services with utilized Emergency Housing Vouchers to house CES-referred households, and has utilized over 95% of the vouchers to date. Additionally, using funding through the State of CA Project Homekey, five hotels/motels were acquired, including two for immediate use as permanent supportive housing for households experiencing homeless. A robust CES for all populations (families, youth, and adults) is in place, connecting households to shelter and to housing interventions, such as RRH and PSH, and utilizes the CES assessment to connect households with the highest need to appropriate services to help them re-enter housing.

(2) HSA works closely with permanent housing projects to maintain and improve high housing retention outcomes. The CoC provides training on tenants' rights and mainstream benefits to permanent housing programs. HSA also assists housing programs with connecting with other systems, such as medical care, mental health services, and employment services, to connect their residents with other supportive services designed to help them maintain housing stability. HSA implemented an employment program for people experiencing homelessness, as well as RRH and PSH program participants. HSA hosts bimonthly RRH workgroups where the CoC's five RRH providers convene to share resources and successful practices, and invites outside speakers to share information on supportive services resources of interest to RRH providers.

(3) The HSA Center on Homelessness Management Analyst is responsible for overseeing these strategies.

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

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

(limit 2,500 characters)

(1) The CoC identifies common factors of households that return to homelessness by reviewing HMIS data, including via the HUD Stella Performance tool, regarding clients who return to homelessness compared to clients who do not return. This comparison data allows the CoC to identify trends in returns to homelessness, such as the trend that adult-only households have the highest rate of returns to homelessness. The CoC reviews additional data from providers who conduct follow-up outreach to clients after they leave programs.

(2) The CoC implements multiple strategies to prevent returns to homelessness. The CoC provides training to housing programs on mainstream benefits and services, including mental health services, employment services, and public benefits (such as SNAP and Medicaid) to help clients to stabilize in housing. Coordinated Entry prioritizes the available capacity of intensive housing programs, such as PSH for households with longest length of homelessness and highest needs, so they avoid returning to homelessness. HSA funds HOME, an employment program providing intensive vocational and employment services to individuals experiencing homelessness and those in RRH or PSH who have recently re-entered housing, to increase housing stability. The CoC Performance Measurement Committee identified key strategies to reduce returns to homelessness: linking households to mainstream services to ensure housing stability and establishing policies for people in housing with time-limited subsidies to receive support if they need to relocate to another housing unit following initial placement. The CoC has convened meetings with leadership from the behavioral health system, as well as RRH and PSH providers, to discuss best practices to support clients with behavioral health challenges. HSA is planning to develop a shallow subsidy program to support households assisted with disability benefits assistance through the State Housing and Disability Advocacy Program. HSA hosts bimonthly RRH workgroups where the CoC's five RRH providers convene to share resources and successful practices, and where outside speakers are invited to share information on resources that program participants may continue to access after the end of the RRH program. The CoC has seen successive decreases in rates of return to homelessness in recent years.

(3) The HSA Center on Homelessness Management Analyst is responsible for overseeing these strategies.

2C-5.	Increasing Employment Cash Income–CoC's Strategy.	
	NOFO Section VII.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 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 & 2) The San Mateo County Human Services Agency (HSA, the CoC Lead Agency) implements a number of strategies to increase employment income as part of its work to increase exits to housing and housing stability among program participants. The CoC Performance Measurement Committee actively monitors systemwide performance, including increases in employment income. Among its performance standards, the CoC measures increased employment income when evaluating CoC-funded projects for renewal or reallocation. Additionally, HSA provides resources to service providers for boosting participant income. HSA operates HOME, a locally funded employment program providing intensive vocational and employment services to individuals experiencing homelessness and those in RRH or PSH who have recently re-entered housing, with the goal of increasing employment income and housing stability. Outreach, shelter, RRH, and PSH programs can refer clients. The HOME program offers a paid, on-the-job training program with flexible schedules to engage participants with barriers to employment. To assist participants entering mainstream employment, the HOME program also offers individualized job placement and job coaching services. HSA also provides information to homeless services providers on additional subsidized childcare resources available in the community. The CoC trains provider agencies on the benefits available to TANF recipients, which includes cash income as well as employment services, job training, assistance covering educational costs and employment materials, transportation, and childcare. HSA also operates employment resource centers which include access to technology to search for and apply for jobs, and also helps people connect to community-based agencies for additional individualized employment services, including WIOA-funded services.

(3) The HSA Center on Homelessness Manager is responsible for overseeing these strategies.

2C-5a.	Increasing Non-employment Cash Income–CoC's Strategy	
	NOFO Section VII.B.5.f.	

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

(limit 2,500 characters)

(1) The San Mateo County Human Services Agency (HSA, the CoC Lead Agency) implements various strategies to increase non-employment income to promote exits to housing and housing stability among program participants. The CoC Performance Measurement Committee actively monitors systemwide performance, including increases in non-employment and overall income. The CoC includes among its performance standards a measure of increased non-employment income when evaluating CoC-funded projects for renewal or reallocation. The CoC provides resources to service providers for boosting participant income. The CoC provides training and support to homeless services and housing programs on accessing mainstream benefits, including General Assistance, TANF, SSI and SSDI, employment services, SNAP, and Medicaid. The CoC also provided a training to homeless services and housing programs related to accessing child support benefits. In addition to training, HSA funds and oversees direct services for connecting individuals to additional income sources. HSA funds eight (8) Core Services Agencies, located throughout the CoC to ensure access in all geographic regions, to provide safety net services, which include providing free tax return filing assistance annually to ensure that low-income community members receive all refundable tax credits for which they are eligible. The Core Service Agencies also assist people with applying for mainstream benefits, including unemployment, SNAP, Medicaid, etc. HSA also administers the Housing and Disability Advocacy Program, a state-funded program designed to provide SSI-eligible or SSDI-eligible individuals experiencing homelessness with disability benefits advocacy (including intensive SSI/SSDI application support), housing-focused case management, and housing location services. The CoC has also implemented a strategy providing information sessions for family homeless shelters and other homeless service programs for staff regarding the TANF benefits eligibility process and application process so the staff can assist clients with accessing services.

(2) The HSA Center on Homelessness Manager is responsible for overseeing these strategies.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
   - 24 CFR part 578;
     - FY 2022 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 VII.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?	Yes

3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section VII.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?	Yes

3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.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
Permanent Support...	PH-PSH	11	Both

3A-3. List of Projects.

1. What is the name of the new project?   Permanent Supportive Housing (SP23)

2. Enter the Unique Entity Identifier (UEI):   QMPKJMKNELB8

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 11

5. Select the type of leverage: Both

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

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

	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and	
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.	

(limit 2,500 characters)

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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  - FY 2022 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 VII.C.	

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

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	

	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)

4A. DV Bonus Project Applicants

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
  - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
  - Frequently Asked Questions

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

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

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

| | 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 2022 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 II.B.11.(e)(1)(c) | |

1.	Enter the number of survivors that need housing or services:	253
2.	Enter the number of survivors your CoC is currently serving:	158
3.	Unmet Need:	95

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(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 number of DV survivors needing housing or services was calculated by summing the following data points for the period from July 1, 2021, through June 30, 2022: (i) total people staying in shelter or permanent housing beds designated for DV survivors; (ii) people who were added to the waiting list for emergency shelter or permanent housing programs for DV survivors during this period and were still on the waiting list after June 30, 2022; and (iii) people who were not able to access our community's interim or permanent housing for DV survivors and were referred to other organizations for interim or permanent housing. Clients who called the hotline anonymously and requested DV shelter but did not go on to receive services through CORA were not included, as these clients could not be deduplicated. The number of survivors currently being served is based on the total number of individuals staying in shelter or permanent housing beds designated for DV survivors during the same time period.

(2) The data source for these numbers is data extracted by CORA, San Mateo County's victim services organization and operator of DV shelter, from Apricot, their HMIS-comparable database, which includes custom fields for data collection beyond the HMIS-required fields.

(3) The CoC does not yet have sufficient capacity to provide rapid rehousing or other forms of affordable housing for survivors of DV who experience homelessness. The primary barrier to creating sufficient housing is availability of resources. Our CoC is submitting an application for a DV RRH bonus project expansion to serve 3 households (6 beds) to fill a portion of the identified gap.

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)	

	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
CORA (Community O...

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 2022 Priority Listing:	

1.	Applicant Name	CORA (Community Overcoming Relationship Abuse)
2.	Project Name	DV Bonus DVRRH CORA FY2022
3.	Project Rank on the Priority Listing	12
4.	Unique Entity Identifier (UEI)	S7AJH436N32
5.	Amount Requested	$301,854
6.	Rate of Housing Placement of DV Survivors–Percentage	100%
7.	Rate of Housing Retention of DV Survivors–Percentage	90%

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

	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) Rate of housing placement was calculated by looking at all clients of CORA (the community's sole DV services provider) who were active in any of CORA's permanent housing programs between July 1, 2021 and June 30, 2022, and calculating the percent that had moved into permanent housing during the program (or at exit, if exited before move-in). Rate of housing retention was calculated by looking at all individuals exiting permanent housing projects between July 1, 2021 and June 30, 2022, and calculating the percentage that exited to permanent housing.

(2) Temporary safe houses were excluded from the rate calculations; safe and permanent housing destinations were included.

(3) The data source used was Apricot, CORA's HMIS-comparable database.

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 II.B.11.e.(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)CORA has extensive experience in operating shelter and housing programs for DV survivors. CORA staff provide housing location services as needed to ensure clients are able to quickly secure safe and affordable housing of their choosing. CORA's housing advocates use a client-centered approach that encourages and empowers clients to identify where they want to live and the type of housing best fitting their unique needs.

(2)CORA's programs only serve survivors. Survivors call CORA's 24-hour hotline to access assistance, including housing and emergency shelter. CORA also accepts referrals from all partner agencies in San Mateo County for survivors eligible for available housing programs, including referrals from the Coordinated Entry (CE) System. For all referred households, CORA assesses for safety concerns and conducts housing assessments to identify the barriers they face in pursuing housing stability. The assessment helps the client and staff determine what housing program is best for them, from among CORA's programs and the CE system's programs, for which households are referred to into the CE if not already assessed.

(3&4)CORA provides survivors of intimate partner abuse with effective supportive services during this difficult period in their lives. Participants in CORA safe houses and housing programs receive survivor-driven advocacy services from skilled advocates, as well as connections to a range of services and supports including 24-hour crisis, legal, and law enforcement referral hotlines; legal services; mental health support; children's programming; community advocacy; and community education. Clients work with advocates on an individualized service plan. It is in this plan that the clients and advocates identify which supportive services are needed so the client can obtain and sustain housing.

(5)CORA's housing programs all have high rates of successful exit to PH, including a rate of 100% for the existing CoC RRH. A primary objective of all programs is ensuring households secure income so that they may sustain their housing when the rental subsidy ends. Each client is paired with a family advocate who helps with connecting to resources, helping clients with understanding their lease and building relationships with their landlords, and providing services on and off site. Off-site services are provided by community partners committed to helping CORA clients. Supportive services continue for up to six months after the subsidy ends.

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

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

(limit 2,500 characters)

(1) Confidential space is offered at CORA's main office. When intakes are completed virtually (i.e., via teleconferencing or by phone), advocates are trained to help the client determine if the space they are in is confidential/private before the intake/interview begins.

(2) The CORA housing team explores a variety of questions with clients in an effort to help them think through what is safe for them when it comes to where they will live. Included in the issues explored are geographic location, connecting with family, reasonable accommodations, security measures, finding jobs and housing in low-crime areas.

(3) At intake, staff discuss the importance of confidentiality concerning the people at the safe house and its location. Disclosure of information to family, friends, law enforcement, other organizations/agencies or inquiring individuals is prohibited. When the client arrives at the safe house, they receive introductions, a clarification on the length of stay available, information about who to call in an emergency, and an explanation of procedures and confidentiality.

(4) All staff, interns and volunteers are provided initial and ongoing training on safety planning by managers and collaborative partners as well as training from professionals in the field, including the California Partnership to End Domestic Violence, the National Network to End Domestic Violence, and the Department of Justice. Topics include how to coach clients on remaining safe during a violent incident, safety with a protection order, safety on the job or volunteer setting and in public, and others.

(5) For clients who live in housing subsidy programs, CORA has built into its housing contracts flex funds which, among other things, cover the costs of changing locks and security systems to ensure support survivors' physical safety. In addition, to contribute to location confidentiality, during the intake/interview process, the advocates talk to the clients about the importance of limiting who knows the location of their new home and discusses the importance of sharing only on a "need to know" basis. The advocate also partners with the clients to help ensure the client's children are also aware it is important to keep the location of their home confidential. CORA staff have been trained about tech safety and, as such, they communicate to clients the different ways they can protect their location from being disclosed by their technological devices.

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 II.B.11.e.(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)

CORA continuously assesses its work with clients. As client safety is critical, the housing team regularly tracks/reviews:

-Confirming upon intakes that clients have a safety plan. If clients have not already created a safety plan with a crisis counselor from the hotline, the housing advocate will create one with the client. The advocate and client revisit the safety plan as needed to make changes over time as needed to reflect current situations.
- Reviewing at intake the cities that are safe for the clients (e.g., those that are likely to be unknown to an abusive partner.)
-Whether clients are placed in units where they can reasonably be expected to afford the rent after their time in the program so that they are self-sufficient.
-Whether they are continuing to explore different housing options with clients, including looking at relocation if available/comfortable, placing clients in safe cities unknown to abusive partners.
- Advocates meet weekly as a team for case consultation. Whether there are challenges or successes in serving clients, advocates share with each other to learn and problem solve.

 In addition to the above, quantitative evaluation of RRH efforts to ensure the safety of clients include:
-Percentage of clients that secure permanent housing while in the program.
-Percentage of clients reporting they are stably housed in permanent housing one year after exit from the program.
-Percentage of clients who had to relocate due to safety issues.

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 II.B.11.e.(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) CORA's housing programs strive to support participants to secure and stabilize in permanent housing as rapidly as possible. Staff use a client-centered approach that encourages and empowers clients to identify where they want to live and the type of housing that best meets their self-identified needs. All participants receive survivor-driven client advocacy by CORA's trained and experienced client advocates. A client advocate is assigned to each client and their family. The advocate and survivor work together to ensure that the family can maintain permanent housing after the financial assistance and supportive services of their program end. Participants also receive support to secure employment so that they have income to sustain housing. They can also receive mental health services provided by a clinician so that they can address issues that might be posing barriers to housing stability.

(2) CORA's survivor-driven advocacy model is trauma-informed and client-led and does not resort to punitive methods. Client advocates meet regularly with each family to develop and implement an individual care plan that builds upon the client's self-identified goals for attaining safe, independent housing and financial self-sufficiency. Service participation is voluntary, and advocates are trained in and use motivational interviewing and other techniques to engage clients and support clients in taking steps to achieve their goals. Advocates encourage participation in services and workshops offered by CORA and community partners. To increase participation in wrap-around services, CORA provides on-site child watch services.

(3) All of CORA's staff are certified domestic violence counselors with experience and skill in providing trauma-informed care. As part of their work with clients, advocates provide accessible information about how past or recent trauma plays out in a person's reactions and responses, relationships, decisions, and other areas. This framing informs all the work between the advocate and client. Staff continually build on their skills with on-going trainings both on-site at CORA and off-site with partner agencies, so they are equipped with the most current trauma informed best practices.

(4) CORA's values, which guide all their work, include being client-centered; committed to serving the unique needs of each individual, family and community; and valuing each other. Each client works with a skilled advocate to develop a strengths-based care plan. This plan guides the work done collaboratively between the advocate and client. Consistent with that frame, advocates emphasize clients' strengths – asking them about their talents, skills, knowledge and experience so they are able to view themselves through a positive lens, developing case plans that focus on client-defined goals and aspirations.

(5) CORA is a multicultural agency. As such, 65% of the staff, 55% of the Board of Directors and nearly 85% of clients identify as a person of color. CORA is committed to serving survivors regardless of age, ethnicity/race, financial status, language, sexual orientation, immigration status, class, religion, gender, mental or physical ability. CORA provides free and confidential emergency, intervention and prevention services, including the county's only emergency shelter for survivors with all services provided in Spanish and English. CORA hires staff with bilingual capacities in the two primary languages clients speak--Spanish and English. Currently, 45% of staff are bilingual and three additional languages outside of English are spoken by CORA staff. In August 2021, CORA rolled out staff trainings and "conscious" and "courageous conversations" about race and

equity throughout the organization. The agency hired the Courageous Conversation Academy, which uses an award-winning protocol for effectively engaging, sustaining and deepening interracial dialogue.

(6) CORA's client advocates help clients access a range of programs and services to support connection – including support groups, volunteer and mentorship opportunities, and information on activities and services offered by faith congregations. Workshops and mental health/support workshops are provided by CORA staff and community partners on topics such as: goal setting, job interviewing skills, resume building, parenting, communication, conflict resolution, safety planning, stress management, healthy cooking, exercise, tenant rights and responsibilities, budgeting, tax filing tips, credit consultation, developing a housing resume, financial services, and other topics as needed.

(7) As noted above, CORA's service options for participants include workshops on parenting and legal services. CORA provides child watch as needed so parents can participate in service offerings.

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 II.B.11.e.(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)

All of CORA's services are tailored to the needs of victims (e.g., those who are currently in an abusive relationship) and survivors (i.e., those who have fled an abusive partner) of domestic violence (also called intimate partner abuse). CORA's services are tied to an evidence-based theory of change developed by the Domestic Violence (DV) Evidence Project. This initiative, from the National Resource Center on Domestic Violence, combines what is known from research, evaluation, practice and theory to inform critical decision-making by intimate partner abuse programs and allies. Based on the DV Evidence Project's findings, there are several indicators that can predict well-being and are focal points for CORA's work. Key among these indicators are: (1) Self-sufficiency, (2) Social connectedness and positive relationships; (3) Economic stability; (4) Safety; and (5) Positive physical, emotional and spiritual behaviors.

During funding year 2022, CORA staff provided the following supportive services to DV survivors:

- Legal Services - CORA's legal department assisted DV survivors to secure restraining orders, which also included "move-out orders", custody, visitation, child support orders and help with keeping survivors' pets. In addition, the legal services included court accompaniment so clients would have a support person present when facing their abuser in court.

- Credit Repair - CORA connected clients in need credit repair services to Consumer Credit Counseling Services (CCCS) of San Francisco. CCCS is a non-profit service and a member of the Association of Independent Consumer Credit Counseling Agencies (AICCCA). They are certified by the United States Department of Housing and Urban Development (HUD) to provide comprehensive housing counseling services. Due to financial abuse, many clients need this assistance in order to obtain affordable housing.

- Financial Literacy and Assistance - CORA advocates work with clients to review their financial situation and guide them through helpful resources and budget planning. The advocate helps clients to understand their bills and expenses. The advocate also helps clients create a plan for financial success, making sure they understand their budget so it becomes a tool for clients to figure out how to spend their money and not run out. Advocates also connect clients to money-saving resources and offer information about how to stretch their dollars.

- Housing Search and Counseling - CORA's housing team helps clients with finding local apartments and establishing a connection with landlords who are willing to work with clients whose financial profile is not as competitive as others in San Mateo County.

- Crisis DV Services - CORA staffs a 24/7 DV crisis hotline with trained advocates who ensure clients are provided with access to services they need in a timely fashion. The advocates provide trauma-informed support, including safety planning and helping clients to understand the next steps to keep them and their children safe.

- Long-term housing stability safety planning - CORA works with clients to develop long-term housing and safety plans, individual service plans; tenant education; build self-advocacy skills. In addition, advocates provide ongoing services, including financial counseling and access to flex funds.

- Mental Health Services - CORA provides a broad array of mental health services, including groups (e.g., parenting, school age, DBT, DV psycho-ed, Tween Boys, Tween Girls, Teen, poetry & art therapy, adult expressive arts, men's DV101), LGBTQ-specific counseling, eye movement desensitization and reprocessing (EMDR) therapy, support groups, and individual counseling.

- Safety Net Resources - CORA is also able to connect clients to the array of social services throughout San Mateo County. Some of these many services include: food, clothing, medical, dental (Samaritan House), food (Second Harvest), child care services (Child Care Coordinating Council), health services (County of San Mateo Health Department).

- Employment Services - In response to client input, beginning next program year CORA will begin offering in-house job training, development and support.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(e)	

		Provide examples in the field below of how the new project 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 works 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)

The new proposed DV RRH program is an expansion of CORA's existing RRH program, so the services, approaches and models will be very similar to what is currently in place.

(1) Participants in the new project will be assisted in their search for safe and affordable housing of their choosing, with the goal of securing and stabilizing in housing as rapidly as possible. Program staff will use a client-centered approach that encourages and empowers clients to identify where they want to live and the type of housing that best meets their self-identified needs. All participants will receive survivor-driven client advocacy by CORA's well-trained and experienced client advocates. A client advocate will be assigned to each client and their family. The advocate and survivor will work together to ensure the family can maintain permanent housing after the financial assistance and supportive services of their program end. Participants will also receive support to secure employment so that they have income to sustain housing. Clients will also have access to mental health services provided by CORA mental health staff so they can address issues that might be posing barriers to housing stability.

(2) CORA's survivor-driven advocacy model is trauma-informed and client-led and does not resort to punitive methods. Client advocates in the proposed program will meet regularly with each family to develop and implement an individual care plan that builds upon the client's self-identified goals and objectives for attaining safe, independent housing and financial self-sufficiency. Service participation is voluntary, and advocates use motivational interviewing and other techniques to engage clients and support them to take steps to achieve their goals.

(3) Staff in the proposed program are certified domestic violence counselors with experience and skill in providing trauma-informed care. As part of their work with clients, advocates provide accessible information about how past or recent trauma plays out in a person's reactions and responses, relationships, decisions, and other areas. This framing informs all the work between the advocate and client. Staff will continually build on their skills with on-going trainings both on-site at CORA and off-site with partner agencies, so they are equipped with the most current trauma informed best practices to ensure optimum service delivery.

(4) CORA's values are infused in all its programs; paramount among the agency's values is client-centered, trauma informed services. As such, program staff focus on serving the unique needs of each client. Each participant benefits from a strengths-based care plan they jointly work on with their advocate. Advocates are taught active listening skills and one primary use of these skills is to help clients to identify their strengths and resources.

(5) CORA has recently put in motion a renewed agency-wide effort to promote racial equity in CORA's operations and services, which will have a significant impact on the proposed new program. This effort began in August 2021 when CORA rolled out staff trainings and "conscious" and "courageous conversations" about race and equity throughout the organization. The agency hired the Courageous Conversation Academy, which uses an award-winning protocol for effectively engaging, sustaining and deepening interracial dialogue. Their work helps individuals and organizations to address persistent racial disparities intentionally, explicitly, and comprehensively. Out of these trainings and

conversations, staff representing all levels of the agency and board members have gone to work in operationalizing what was learned in these courageous conversations and trainings, including forming a team specifically concerned with issues of racial equity at CORA. Some of the anticipated deliverables to be produced include enhanced staff/board trainings, development of tools/resources around hiring and promotion and program-specific strategies to promote equity.

(6) CORA's client advocates will help clients access a range of programs and services to support connection – including support groups, volunteer and mentorship opportunities, and information on activities and services offered by faith congregations. Workshops and mental health/support workshops will be provided by CORA staff or others from the community on topics such as: goal setting, job interviewing skills, resume building, parenting, communication, conflict resolution, safety planning, stress management, healthy cooking, exercise, tenant rights and responsibilities, budgeting, tax filing tips, credit consultation, developing a housing resume, financial services, and other topics as needed.

(7) CORA's service options for participants include workshops on parenting. In addition, legal services are provided for clients as previously noted. To ensure clients can participate in these services, CORA provides on-site child watch services as needed.

4A-3h.	Plan for Involving Survivors in Policy and Program Development of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(f)	

Describe in the field below how the new project(s) will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.

(limit 2,500 characters)

CORA, the DV Bonus project applicant, involves people with lived experience of homelessness at several levels of operations. Some of the many ways CORA involves this population in the agency at all levels includes:

-Working as program staff at the shelter, housing program, and the agency's 24-hour hotline staff (who are often the first contact for clients seeking services.) These staff are multilingual, multiracial, LGBTQIQ and with lived experience.

-Surveying/keeping an open line of communication with clients, hearing what works and what doesn't in receiving/participating in services. Programs and protocols are adapted as needed to meet the evolving needs of clients.

-Providing a vehicle for volunteerism among those who have lived experience and want to "give back," including those who serve on CORA's board. Volunteer members will be increasing this coming year as CORA has hired a Volunteer Manager who is able to better recruit, support and cultivate such volunteers in service of CORA's clients.

-Proactively soliciting input about program services from clients currently in CORA programs either through 1:1 meetings or evaluations/surveys.

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.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/26/2022
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/26/2022
1E-1. Local Competition Deadline	Yes	Local Competition...	09/26/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/26/2022
1E-2a. Scored Renewal Project Application	Yes	Scored Forms for ...	09/26/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/26/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/26/2022
1E-5b. Final Project Scores for All Projects	Yes	Final Project Sco...	09/26/2022
1E-5c. Web Posting–CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/26/2022

3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores for All Projects

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Housing Leveraging Commitments

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	09/25/2022
1B. Inclusive Structure	09/26/2022
1C. Coordination and Engagement	09/26/2022
1D. Coordination and Engagement Cont'd	09/26/2022
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/26/2022
2B. Point-in-Time (PIT) Count	09/26/2022
2C. System Performance	09/26/2022
3A. Coordination with Housing and Healthcare	09/26/2022
3B. Rehabilitation/New Construction Costs	09/26/2022
3C. Serving Homeless Under Other Federal Statutes	09/26/2022

4A. DV Bonus Project Applicants	09/26/2022
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

1C-7. PHA HOMELESS PREFERENCE

Per HUD's Detailed Instructions, this attachment is our PHA Administrative Plan - Homeless Preference (Chapter 18 – Housing Readiness Program). The highlighted sections document the Homeless Preference.

Housing Authority of the County of San Mateo

ADMINISTRATIVE PLAN

FOR

HOUSING VOUCHER AND

MOVING TO WORK PROGRAMS

July 1, 2021

Chapter 18

HOUSING READINESS PROGRAM

I. INTRODUCTION

The Housing Authority of the County of San Mateo (HACSM) has been a participant in HUD's Moving to Work (MTW) demonstration program since the execution of its MTW Agreement in May 2000. The demonstration exempts HACSM from many of the regulatory requirements that would otherwise apply to these families.

This chapter states provisions unique to the MTW Housing Readiness Program (HRP). For items not addressed in this chapter, the Housing Voucher Program policies shall apply as stated in other chapters of this Plan.

II. PARTICIPANT SELECTION

Admission

The MTW-HRP has two components. The first component is to assist eligible individuals and families with their rent payments. The second component is to provide and coordinate a full range of supportive services for the individuals and families so that they may obtain self-sufficiency at the end of the contract term. The program relies upon the existing supportive services offered in San Mateo County. Some of these services are job training and placement, child care, transportation, education, homeownership education, alcohol and drug rehabilitation, domestic violence counseling, and other services that promote self-sufficiency.

Eligibility

The applicants must meet the same income and other eligibility requirements as the Housing Voucher Program applicants. In addition, applicants must meet the following HRP eligibility requirements:

- Applicants must be homeless as defined by HACSM's policy;
- The applicant must be receiving case management services from a HACSM-approved Community Based Assistance Program, and the applicant must follow the requirements of those programs;
- Applicants must agree to participate in the required case management, throughout the duration of their participation, with the goal of becoming self-sufficient.

HACSM Homeless Definition:
Applicants are considered homeless if they are:

- In places not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings (on the street).
- In an emergency shelter.
- In transitional or supportive housing for homeless persons who originally came from the streets or emergency shelters.
- In any of the above places but spending a short time (up to 30 consecutive days) in a hospital or other institution.
- Being discharged within 30 calendar days from an institution, such as a mental health or substance abuse treatment facility or a jail/prison, in which the person has been a resident for more than 30 consecutive days and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing.
- Fleeing a domestic violence housing situation and no subsequent residence has been identified and lacks the resources and support networks needed to obtain housing.

Preference

HACSM has established a system of preferences for the selection of individuals or families admitted to the program. These preferences are based on local housing needs and priorities and are consistent with the program goals and objectives. The selection preferences affect only the order of selecting applicants. They do not make any individual or family ineligible which would otherwise be eligible. Preference will be given to individuals and families that:

- Have members who reside, work, or are hired to work in San Mateo County.
- Are not a prior MTW participant.
- Are currently receiving case management services from an HACSM-approved CBO.

One preference point will be given for each of the verifiable preferences. HACSM will select families with the highest total preference points for eligibility interviews first. Families who have the same total preference points will be selected based on the time and date that the completed referral packet was received by HACSM.

Applicants who claim a preference must submit verifiable documents with their referral packet. Below are some examples of acceptable documents:

- Residency: signed lease, utility bills, governmental benefit notices prior to becoming homeless.

- Certification from supportive service agencies.

- <mark>First time program participant: HACSM will use its database to verify this preference.</mark>

III. TIME-LIMITED ASSISTANCE

Participants in the MTW Housing Readiness Program have up to 60 months (five years) of rental assistance.

When applicants receive their vouchers, they will be given an MTW addendum describing time limits on MTW assistance and other aspects of the program that differ from the Housing Voucher Program. MTW families will also be required to sign a statement regarding time remaining in the program at each reexamination.

IV. PORTABILITY

MTW Housing Readiness program participants may only use their rental assistance in the County of San Mateo. The HRP vouchers are not portable.

V. VOUCHER ISSUANCE

All applicants selected to receive MTW-HRP vouchers will receive a briefing on how the program operates and what he/she as an applicant must do to achieve and maintain eligible status. Whether delivered individually or in a group setting, the briefing will contain all pertinent information about the voucher program in general and the MTW program in particular. The staff member conducting the briefing will place special emphasis on non-traditional aspects of the program, particularly:

- The time limited feature of the program.
- The fact that MTW-HRP vouchers are not portable.
- The requirement of having case management.
- The HACSM hardship policy.

To ensure that the applicant fully understands the differences between an MTW-HRP voucher and a Housing Voucher, the applicant must sign the MTW Voucher Addendum.

VI. SUBSIDY CALCULATION

All definitions in subsidy calculation used in the Housing Voucher Program will apply to MTW-HRP participants (see Chapter 7).

VII. TERMINATION OF ASSISTANCE

In addition to compliance with Voucher program polices, MTW-HRP participants may have their assistance terminated for failure to comply with case management services.

1C-7. MOVING ON PREFERENCE

Per HUD's Detailed Instructions, this attachment is our PHA Administration Plan - Moving On Preference (Chapter 4 – Applications, Waiting List and Tenant Selection). The highlighted section documents the Moving On Preference.

Housing Authority of the County of San Mateo

ADMINISTRATIVE PLAN

FOR

HOUSING VOUCHER AND

MOVING TO WORK PROGRAMS

July 1, 2021

Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

MTW Waiver: *The Agency is authorized to determine waiting list procedures, tenant selection procedures and criteria and preferences…This authorization waives certain provisions of Sections 8(o)(6), 8(o)(13)(J) and 8(o)(16) of the 1937 Act and 24 C.F.R. 982 Subpart E, 982.305 and 983 Subpart F as necessary to implement the Agency's Annual MTW Plan.*

I. INTRODUCTION

When a family wishes to receive assistance under the Voucher program, the family must submit a pre-application that provides HACSM with the information needed to determine the family's eligibility. HACSM determines how and when it will collect applications and establish a waiting list. When Voucher assistance becomes available, HACSM will select families from the waiting list in accordance with HUD requirements and HACSM policies as stated in the Administrative Plan and the MTW Annual Plan.

HACSM is required to adopt a clear approach to accepting pre-applications, placing families on the waiting list, selecting families from the waiting list and must follow this approach consistently.

HUD regulations require that all families have an equal opportunity to apply for and receive housing assistance and that HACSM affirmatively further fair housing goals in the administration of the program.

When HUD awards funding that is targeted for families with specific characteristics or families living in specific units, HACSM will apply those funds according to HUD guidelines. Persons qualifying for special purpose funding from HUD may be placed on, and selected from, the waiting list over other applicants on the list.

Examples of special funding include programs targeting the homeless and persons with disabilities and families or youths that qualify for the Family Unification program.

II. THE APPLICATION PROCESS

Applying for Assistance

Any family that wishes to receive HCV assistance must apply for admission to the program. HACSM has an online pre-application portal for anyone interested in the program.

The application process will involve the following three phases:

1.   The *first phase* is the "pre-application" to be placed on the waiting list. Families who wish to apply for any one of HACSM's Voucher programs must complete a pre-application.

         The purpose of the pre-application is to permit HACSM to preliminarily assess

IV. SELECTION FOR ASSISTANCE

VOUCHER PROGRAM

Local Preferences

HACSM will assign preference to families who live, work or are hired to work in San Mateo County. Work or hired to work does not include volunteer work, internships, being an independent contractor or employment with temporary agencies.

PSH Moving On

HACSM will assign preference to current Permanent Supportive Housing (PSH) Program participants who meet the eligibility criteria of the PSH Moving-On policy as stated in HACSM's PSH Policy and Procedure manual. HACSM will limit the number of PSH Moving On preference up to 5 per calendar year, subject to availability of Section 8 Vouchers.

Order of Selection

HACSM will use a lottery system to select families from the Interest List for its Voucher waiting list. HACSM will pre-determine the total number of applicants it needs to select to maintain a waiting list to utilize the number of vouchers that have become available due to turnover. The draw will randomly assign a placement order for the applicant households. The resulting placement order along with the applicant's qualifying preferences will determine the order in which applicants will be scheduled for an eligibility interview.

SPECIAL ADMISSION

Pursuant to HUD requirements that special purpose programs be targeted to families with specific characteristics, HACSM will use targeted funds solely for their intended purpose(s). Therefore, families with targeted characteristics may be selected from the waiting list before non-targeted families who applied before them. In the selection of families with targeted characteristics within the overall group of other families with similar targeted characteristics, families will be selected in the same order of preference as are those families on the regular waiting list.

V. NOTIFICATION OF SELECTION

HACSM will notify the family by email or US first-class mail when it is selected from the waiting list. The notice will inform the family of the following:

> -Date, time, and process for the scheduled application interview, including any procedures for rescheduling the interview;
>
> -Who is required to attend the interview;
>
> -Documents and information that must be provided at the interview.

1E-1. Local Competition Deadline

Screenshot of the public posting of the 2022 CoC
Competition – Project Review and Ranking Process

Local Competition Deadline Posted on CoC Website

Continuum of Care NOFA/NOFO ✕

smcgov.org/hsa/continuum-care-nofanofo

Projector   eSnaps   Quickbooks   Dropbox   MURAL   Vanguard   Zoom   SMC Team - NOFO   Outlook   Microsoft Office   Asana   HUD Resources   Continuum of Care...   Continuum of Care...

New Project Applications

New project applications are due by August 30, 2022, at 5:00 p.m. to HSA_Homeless_Programs@smcgov.org and Hana Gossett hana@focusstrategies.net. Information about the funding available and application process may be found in the document below titled Availability of New Project Funding 2022 Annual CoC NOFO. The application template is available below, titled New Project Narrative Application Template 2022.

On August 11, 2022, HUD released bonus funding information for CoC's. San Mateo County is eligible to apply for:

Bonus funding for New Permanent Housing Projects	**$657,685**
Bonus funding specifically for Domestic Violence Projects	**$301,854**

Availability of New Project Funding 2022 Annual CoC NOFO

New Project Narrative Application Template 2022

Renewal Applications

Renewal project applications are due by August 30, 2022, at 5:00 p.m. to HSA_Homeless_Programs@smcgov.org and Hana Gossett hana@focusstrategies.net . Information about the renewal process may be found in the document below titled Information for Renewal Applicants 2022 Annual CoC NOFO. Guidance on completing the Renewal Application in e-snaps will be provided soon.

Information for Renewal Applicants 2022 Annual CoC NOFO

2022 Project Review and Ranking Process

The Project Review and Ranking Process for 2022 is also available below, titled 2022 Annual NOFO Project Review and Ranking Process Final. This document was approved by the CoC Steering Committee meeting on August 10, 2022.

2022 Annual NOFO Project Review and Ranking Process Final

1E-2. Local Competition Scoring Tool

CA-512: Daly City/San Mateo County CoC

LOCAL COMPETITION SCORING TOOL

Per HUD's Detailed Instructions, these documents comprise the required Local Competition Scoring Tool attachment.

Included are:

Section 1: Maximum Points Available and Specific Criteria detail from Review and Ranking Policy

Section 2: Points awarded to individual project applications for each criterion

ATTACHMENT B
SCORING FACTORS FOR RENEWAL PROJECTS

The scoring system for renewal projects is based on objective criteria, including a consideration of past performance as demonstrated by the project APR, HMIS data, budget data, CoC Project Applications and supplemental project narratives. The scoring system also takes into consideration the severity of needs and vulnerabilities experienced by program participants, and the extent to which projects are aligned with Housing First principals (low barriers to participation, no service participation requirements or preconditions).

Projects applying for consolidation will each be scored and ranked separately, as per HUD requirements.

Scoring Factor		Maximum and Minimum Scores		
		TH	RRH	PSH
1	1a. Exits to Permanent Housing (up to 15 pts)	Exceeds standard by more than 10% = 15 points Meets standard or exceeds by up to 10% = 9 points Within 10% of standard = 6 points More than 10% below standard = 0 points		Not Applicable
	1b. Exits to Permanent Housing/Retain Housing (up to 17 pts)	Not Applicable		Exceeds standard by more than 10% = 17 points Meets standard or exceeds by up to 10% = 12 points Within 10% of standard = 8 points More than 10% below standard = 0 points
2	Length of Stay (up to 6 pts)	Exceeds standard by more than 10% = 6 points Meets standard or exceeds by 10% = 4 points Within 10% of standard = 2 points	Not Applicable	
3	Returns to Homelessness (up to 4 pts)	Achieves standard = 4 points		Not Applicable
4	Increased Employment Income (up to 5 pts)	Exceeds standard by more than 5% = 5 points Meets standard or exceeds by up to 5% = 4 points Within 5% of standard = 2 points More than 5% below standard = 0 points		Not Applicable
5	Increased Non-Employment Income (up to 7 pts)	Exceeds standard by more than 5% = 7 points Meets standard or exceeds by up to 5% = 4 points Within 5% of standard = 2 points More than 5% below standard = 0 points		

Scoring Factor		Maximum and Minimum Scores		
		TH	RRH	PSH
6	Utilization Rate (up to 6 pts)	Meets standard or exceeds = 6 points Within 5% of standard = 2 points More than 5% below standard = 0 points	Not Applicable	Meets standard or exceeds = 6 points Within 5% of standard = 2 points More than 5% below standard = 0 points
7	CoC Grant Spending (up to 6 pts)	Meets standard or exceeds = 6 points Within 5% of standard = 3 points More than 5% below standard = 0 points		
8	HMIS Data Quality (up to 12 pts)	All Data Elements Less Than 5% Missing/Don't Know = 12 points 1-2 Data Elements More Than 5% Missing/Don't Know = 6 points More Than 2 Data Elements More Than 5% Missing/Don't Know = 0 points		
9	Housing First (up to 16 points)	Does the project ensure participants are not screened out based on the following criteria? A) Having too little or no income B) Active or history of substance abuse C) Having a criminal record with exceptions for state-mandated restrictions D) History of domestic violence If yes, then 0.5 points for each (possible total of 2 points). Does the project ensure that participants are not terminated from the program for the following reasons? A) Failure to participate in supportive services B) Failure to make progress on a service plan C) Loss of income or failure to improve income D) Being a victim of domestic violence If yes, then 0.5 points for each (possible total of 2 points). Does the project have these Housing First approaches documented in project manual or other project documentation? If yes, then 1.5 points for each approach documented in submitted documents (up to 12 points).		
10	Promoting Racial Equity (up to 6 points)	Has the project provider identified any barriers to participation faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has or will take steps to eliminate identified barriers? Project has taken steps to identify whether there are barriers = 3 points Project has taken steps to address identified barriers or, if no barriers have been identified, to ensure the project promotes racial equity = 3 points Project has not taken any steps to identify or address barriers = 0 points		

Scoring Factor		Maximum and Minimum Scores		
		TH	RRH	PSH
11	Documentation of Referral/ Enrollment Process (up to 6 pts)	Does the project have policies and procedures for accepting and enrolling referrals from CES? Does the project have clear protocols for why referrals may be denied and for what reason? Does the project have these policies and procedures documented in project manual or other project documentation? Project has policies and procedures documented, including protocols for why referrals may be denied = 6 points Project has policies and procedures documented = 3 points Project does not have policies and procedures documented = 0 points		
12	Grants Monitoring/ Compliance (up to 4 pts)	a) Project submitted APR on time= 1 point If not = 0 points b) Project had sufficient LOCCS drawdown frequency for executed contracts (at least quarterly) = 1 point If not = 0 points c) Project did not return funds to HUD = 2 point If returned funds = 0 points d) Project serves CoC-eligible participants (as demonstrated in written policies/procedures on eligibility, screening and admission) = 1 point If not = 0 points e) Serious unresolved compliance finding from HUD would result in up to 8 points subtracted from project's score		
13	Cost Effectiveness for PH exits or PSH units (up to 7 points)	Cost per exit to permanent housing is reasonable for project type = 7 points Cost per exit to permanent housing is not reasonable for project type = 3 points		Cost per unit served is reasonable for project type = 7 points Cost per unit served is not reasonable for project type = 3points
14	Policy Priorities (up to 13 points)	Not Applicable	Rapid Re-Housing = 12 points	Permanent Supportive Housing = 13 points
Maximum Score		100	100	100

ATTACHMENT C
SCORING FACTORS FOR NEW PROJECTS:
Re-Allocation, Bonus and DV Bonus Projects

The review panel may reject an application if threshold criteria are not met, including the following:
- Applicant is not eligible for CoC funds
- Applicant is applying for an ineligible project type
- Project does not serve an eligible population
- Project is not willing to participate in coordinated entry
- Project is not willing to use HMIS (or, for domestic violence [DV] survivor providers, a comparable data system)
- Project is not willing to incorporate identified healthcare leverage into project application or utilize healthcare services or resources once operational

Rating Factor	Score Range

1. HUD System Performance Objectives and Strategies to Advance System Performance:
  a. The project identifies performance targets that contribute to advancing system performance measures.
  b. The project articulates how it will advance the system performance objectives set forth by HUD:
    • Reduce new entries into homelessness
    • Reduce the length of time people are homeless
    • Reduce returns to homelessness
    • Increase participant income
  c. Type, scale, location of the supportive services fit the needs of the program participants, are readily accessible, and advance system performance objectives. This includes services funded by the CoC grant and other project funding sources.
    • For SSO projects, project describes how they will connect people to permanent housing and the coordinated entry system
    • For RRH projects, project meets National Alliance to End Homelessness (NAEH) RRH standards as outlined in Performance-Benchmarks-and-Program-Standards.pdf (endhomelessness.org)
    • For PSH projects, there are sufficient services to ensure participants are successfully supported to access and sustain housing
    • There is a specific plan to ensure participants are individually assisted to obtain the benefits of the mainstream health, social, and employment programs for which they are eligible
    • There is a specific plan to ensure participants are assisted to secure services from the healthcare system.
    • There is a specific plan to ensure participants are assisted to obtain and remain in permanent housing in a manner that fits their needs
    • There is a specific plan to ensure participants are assisted to increase their incomes and live independently
	0-25

Rating Factor	Score Range
2. Program Planning • Applicant has demonstrated how they will conduct ongoing assessment to ensure the project is promoting racial equity and described how they will take steps to address any identified disparities in how people of different races and ethnicities access the program, experience the program once enrolled, and the outcomes of the program • There is a specific plan to ensure there are no barriers to participation faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population • Applicant has described how the project will involve people with lived experience of homelessness in providing input on program planning and evaluation, development of policies and procedures, and decision-making structures and processes • For applicable housing programs (scattered site PSH, RRH, or TH-RRH), the applicant has described how they recruit and work with landlords	0-10
3. Appropriateness of Housing • Type, scale, and location of the housing fit the needs of the program participants • Participants are assisted to secure housing as quickly as possible • Programs and activities are offered in a setting that enables homeless people with disabilities to fully interact with others without disabilities possible	0-10
4. Housing First Model • Project will have low barriers to entry and does not screen out applicants based on having no or low income, active or history of substance use, criminal record (except for State mandated requirements), history of domestic violence) or lack of willingness to participate in services • Project prioritizes rapid placement and stabilization in permanent housing • Project will not terminate participation for: failure to participate in services, failure to make progress on service plan, loss of income or failure to improve income; being a victim of domestic violence, or other activities not covered in the lease agreement	0-15
5. Timing • Applicant has a clear plan to begin operations when the contract is executed. Within six months of contract execution may be awarded up to 10 points and within one year of contract execution may be awarded up to 5 points	0-10
6. Applicant Capacity • Recent relevant experience in providing housing to people experiencing homelessness • Recent data submitted demonstrates strong performance for relevant services and/or housing provided • Relevant experience in operation of housing projects or programs, administering leasing or rental assistance funds, delivering services and entering data and ensuring high-quality data in a system (HMIS or a similar data system) • Organization has track record of involving people with lived experience of homelessness	0-10

Rating Factor	Score Range
• Organizational and finance capacity to track funds and meet all HUD reporting and fiscal requirements • If application has sub recipients, applicant organizations have experience working together • Any outstanding monitoring or audit issues or issues are explained • For DV bonus project applicants: experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and ability to house survivors and meet safety outcomes.	
7. Financial Feasibility and Effectiveness • Costs appear reasonable and adequate to support proposed program • Match requirement is met • Additional resources leveraged	0-10
8. Project Type Prioritization • TH/RRH - 0 points • Supportive Services Only (SSO) Projects for Coordinated Entry for survivors of Domestic Violence - 0 points • Transition projects that create a new TH/RRH project through re-allocation- 3 points • PSH/DedicatedPLUS - 10 points • RRH – 10 points • PSH Dedicated to Chronically Homeless People – 20 points	0-20
TOTAL	**110**
BONUS POINTS	
In the FY 2022 NOFO, HUD will provide points in the overall CoC application for communities that include one or more permanent housing projects (PSH or RRH) on the Project Priority List demonstrating coordination with housing providers and health care organizations. To align with this HUD priority, bonus points will be awarded to new PSH or RRH projects with the following features:	
Bonus: Project utilizes housing subsidies or subsidized housing units not funded through the CoC or ESG program, such as through private organizations, State or local government (including HOME funds from the American Rescue Plan), Public Housing Agencies, faith-based organizations or federal programs other than CoC or ESG. • For PSH this should provide at least 25% of the units included in the project application. • For RRH this should serve at least 25% of the program participants anticipated to be served by the project, as noted in the project application. This bonus is not available for other program types. To receive the bonus points, applicants must provide written documentation of commitment of resources from the housing provider.	10
To receive bonus points, applications must provide written documentation of commitment of resources from the housing or healthcare provider.	
Maximum Total Bonus Points	**10**
Maximum Project Application Total	**120**

Renewal Projects Scoring Calculations

Project Name	Provider	Type	Beds	Units	1a. Exits to PH	1B. Exit to/Retain PH	2. LOS	3. Returns to Homelessness	4. Increase Employment Income	5. Increase Non-Employment Income	6. Utilization	7. Spending	8. Data Quality	9. Housing First	10. Racial Equity	11. CES	12. Grant Management	13. Cost-Effectiveness	14. Policy Priorities	Total Score
Redwood Family House	LifeMoves	TH	27	9	9		2	4	5	0	6	6	12	11.5	6	6	4	7	0	78.5
SAFE	LifeMoves	RRH	43	17	0			0	5	0		6	12	11.5	6	6	4	7	12	69.5
RRH 2021	LifeMoves	RRH	80	30	0			4	2	2		6	12	11.5	6	6	4	7	12	72.5
DV RRH	CORA	RRH	12	6	15			N/A	5	7		6	12	16	6	6	3	7	12	95
Shelter Plus Care Sponsor Based (SP15)	Housing Authority of the County of San Mateo	PSH	15	15		17				7	6	0	12	5.5	6	6	4	7	13	83.5
Shelter Plus Care Sponsor Based (SP2)	Housing Authority of the County of San Mateo	PSH	66	57		17				7	6	0	12	5.5	6	6	4	7	13	83.5
Shelter Plus Care Belmont Apartments	Housing Authority of the County of San Mateo	PSH	18	18		12				7	6	3	12	5.5	6	6	4	7	13	81.5
Permanent Supportive Housing Consolidated (SP19)	Housing Authority of the County of San Mateo	PSH	149	132		12				7	6	0	12	5.5	6	6	4	7	13	78.5
Permanent Supportive Housing Consolidated (SP20)	Housing Authority of the County of San Mateo	PSH	109	109		17				7	6	3	12	5.5	6	6	4	7	13	86.5
Vendome 2021	LifeMoves	PSH	12	12		17				7	6	0	12	11.5	6	6	4	7	13	89.5
SAYAT 2021	Mental Health Association of San Mateo County	PSH	30	30		12				7	0	6	12	10	6	6	4	0	13	76

New Project Scoring Calculations

Project Name	Agency Name	Project Type	CoC or DV Bonus		1. HUD System Performance Objectives and Strategies to Advance System Performance	2. Program Planning	3. Appropriateness of Housing	4. Housing First Model	5. Timing	6. Applicant Capacity	7. Financial Feasibility and Effectiveness	8. Project Type Prioritization	Bonus Points	Total Points for Application
Permanent Supportive Housing (SP23)	Housing Authority of the County of San Mateo	PSH	No		21.2	7.8	8.2	12.2	8.2	8	8.2	20	10	103.8
DV Bonus DVRRH CORA FY2022	CORA	RRH	Yes		21.6	8.4	8.2	12.6	8.4	9.2	7.8	10	0	86.2
RTV 2022 Joint Transitional Housing/Rapid Re-Housing	Retraining the Village	TH-RRH	No		19.6	8.4	8.6	13.4	9	8.4	8.6	0	0	76

1E-2a. Scored Forms for One Project

Copy of scored renewal project application that includes the objective criteria and system performance criteria and their respective maximum point values and the actual points our CoC awarded to the project applicant. In our process, applicants complete a Project Performance Report. Information from the Performance Report and HMIS data is used to score each project. Each applicant then receives a Project Scorecard. A copy of one Project Performance Report and Score Card are attached.

SAN MATEO COUNTY CoC
RENEWAL PROJECT SCORECARD
2022

The San Mateo County CoC Project Review Panel is scheduled to meet on September 13, 2022 to review scores of all submitted renewal projects and determine the project priority list for this year's CoC competition. This scorecard summarizes the breakdown of the score for your project. For each factor, the scoring rubric and standard is summarized in the grey boxes and then the specific project results for your project are provided in the white boxes. The total project score and rank is provided at the end of the scorecard.

General Information	
Reporting Period	May 1, 2021 – April 30, 2022
Grantee Name	LifeMoves
Project Name	Vendome
Project Type	Permanent Supportive Housing
Number of Beds/Units	12/12

Measure 1a: Exit to Permanent Housing (Up to 15 pts)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Exceeds standard by more than 10% = 15 points Meets standard or exceeds by up to 10% = 9 points Within 10% of standard = 6 points More than 10% below standard = 0 points		*Not Applicable*
Applicable Clients (All Leavers)	**Clients Accomplished**	**Percentage**	**CoC Standard**
N/A	N/A	N/A	*85%*
Score	N/A		

(PSH Only) Measure 1b: Exit to Permanent Housing (Up to 17 pts)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Not Applicable		Exceeds standard by more than 10% = 17 points Meets standard or exceeds by up to 10% = 12 points Within 10% of standard = 8 points More than 10% below standard = 0 points
Applicable Clients (All Leavers)	**Clients Accomplished**	**Percentage**	**CoC Standard**
12	12	100%	*85%*
Score	**17**		

Measure 2: Length of Stay (Up to 6 pts)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Exceeds standard by more than 10% = 6 points *Meets standard or exceeds by 10% = 4 points* *Within 10% of standard = 2 points* *Does not meet standard by more than 10% = 0 points*	*Not Applicable*	
LOS	**CoC Standard**	
N/A	*Less than 120 days*	
Score	N/A	

Measure 3: Returns to Homelessness (Up to 4 pts)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Achieves standard = 4 points		*Not Applicable*
Rate of Return		**CoC Standard**
N/A		*TH: Less than 11%* *RRH: Less than 15%*
Score	N/A	

Measure 4: Increased Employment Income (Up to 5 pts)			
Transitional Housing		**Rapid Re-Housing**	**Permanent Supportive Housing**
Exceeds standard by more than 5% = 5 points *Meets standard or exceeds by up to 5% = 4 points* *Within 5% of standard = 2 points* *More than 5% below standard = 0 points*			*Not Applicable*
Applicable Clients (Adult Leavers /Stayers)	**Clients Accomplished**	**Percentage**	**CoC Standard**
N/A	N/A	N/A	*15%*
Score	N/A		

Measure 5: Increased Non-Employment Income (Up to 7 pts)			
Transitional Housing		**Rapid Re-Housing**	**Permanent Supportive Housing**
Exceeds standard by more than 5% = 7 points *Meets standard or exceeds by up to 5% = 4 points* *Within 5% of standard = 2 points* *More than 5% below standard = 0 points*			
Applicable Clients (Adult Leavers /Stayers)	**Clients Accomplished**	**Percentage**	**CoC Standard**
12	5	42%	*15%*
Score	**7**		

Measure 6: Utilization Rate (Up to 6 pts)			
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**	
Meets standard or exceeds = 6 points Within 5% of standard = 2 points More than 5% below standard = 0 points	Not Applicable	Meets standard or exceeds = 6 points Within 5% of standard = 2 points More than 5% below standard = 0 points	
Percentage		**CoC Standard**	
133%		90%	
Score	6		

Measure 7: CoC Grant Spending (from most recently completed grant term) (Up to 6 pts)			
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**	
Meets standard or exceeds = 6 points Within 5% of standard = 3 points More than 5% below standard = 0 points			
Total HUD Award	**Total Spent**	**Percentage**	**CoC Standard**
$269,948	$224,318	83%	90%
Score	0		

Measure 8: HMIS Data Quality (Up to 12 pts)			
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**	
All Data Elements Less Than 5% Missing/Don't Know = 12 points 1-2 Data Elements More Than 5% Missing/Don't Know = 6 points More Than 2 Data Elements More Than 5% Missing/Don't Know = 0 points			
Data Element	**Percentage of Missing/Null Values**	**HUD Standard**	**Standard Met**
Name	0%	Under 5%	☒ Yes ☐ No
Race	0%	Under 5%	☒ Yes ☐ No
Ethnicity	0%	Under 5%	☒ Yes ☐ No
Gender	0%	Under 5%	☒ Yes ☐ No
Veteran Status	0%	Under 5%	☒ Yes ☐ No
Disabling Condition	0%	Under 5%	☒ Yes ☐ No
Income and Sources at Start	0%	Under 5%	☒ Yes ☐ No
Income and Sources at exit/assessment	0%	Under 5%	☒ Yes ☐ No
Exit Destination	0%	Under 5%	☒ Yes ☐ No
Score	12		

Measure 9: Housing First (from Project Application) (Up to 16 pts)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**

.5 pt (total possible of 2 pts.) for not screening out based on:
 A. *Having too little or no income*
 B. *Active or history of substance abuse*
 C. *Having a criminal record with exceptions for state-mandated restrictions*
 D. *History of domestic violence*

.5 pt (total possible of 2 pts.) for ensuring that participants are not terminated from the program for:
 A. *Failure to participate in supportive services*
 B. *Failure to make progress on a service plan*
 C. *Loss of income or failure to improve income*
 D. *Being a victim of domestic violence*

1.5 pt (total possible of 12 pts.) Housing First approaches outlined above documented in project manual or other project documentation.

Screening Score	2
Termination Score	2
Written Doc. Score	7.5
Total	**11.5**

Measure 10: Promoting Racial Equity (Up to 6 pts)		

Has the project provider identified any barriers to participation faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has or will take steps to eliminate identified barriers?

Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Project has taken steps to identify whether there are barriers = 3 points *Project has taken steps to address identified barriers or, if no barriers have been identified, to ensure the project promotes racial equity = 3 points* *Project has not taken any steps to identify or address barriers = 0 points*		
Score 6		

Measure 11: Documentation of Referral/Enrollment Process (Up to 6 pts)		

Does the project have policies and procedures for accepting and enrolling referrals from CES? Does the project have clear protocols for why referrals may be denied and for what reason? Does the project have these policies and procedures documented in project manual or other project documentation?

Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Project has policies and procedures documented, including protocols for why referrals may be denied = 6 points *Project has policies and procedures documented = 3 points* *Project does not have policies and procedures documented = 0 points*		
Score 6		

Measure 12: Grants Monitoring/Compliance (from Project Application) (Up to 4 pts)		
Timely submission of APR; Sufficient LOCCS drawdown frequency; Funds not recaptured; Serves CoC-eligible participants; Unresolved Compliance Finding (negative points)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
a. Project submitted APR on time= 1 point; If not = 0 points b. Project had sufficient LOCCS drawdown frequency for executed contracts (at least quarterly)= 1 point; If not = 0 points c. Project did not return funds to HUD = 1 point; If returned funds = 0 points d. Project serves CoC-eligible participants (as demonstrated in written policies/procedures on eligibility, screening and admission) = 1 point; If not = 0 points e. Serious unresolved compliance finding from HUD would result in up to 8 points subtracted from project's score		
☒ Yes ☐ No	*Was the APR submitted on time for most recently completed grant term?*	
☒ Yes ☐ No	*Were LOCSS drawdowns conducted at least quarterly for most recently completed grant term?*	
☐ Yes ☒ No	*Did project return any funds to HUD in most recently completed grant term?*	
☒ Yes ☐ No	*Does project serve participants who are eligible under the CoC Interim Rule and applicable CoC NOFA?*	
☐ Yes ☒ No	*Are there unresolved HUD monitoring or OIG audit findings?*	
Score	**4**	

Measure 13: Cost Effectiveness - Calculated using Exit to PH (from HMIS) or number of units (for PSH only) and project budget (provided in table below) (Up to 7 pts)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Cost per exit to permanent housing is reasonable for project type = 7 points *Cost per exit to permanent housing is not reasonable for project type = 3 points*		*Cost per unit served is reasonable for project type = 7 points* *Cost per unit served is not reasonable for project type = 3points*
Total Project Cost (Cell A from table below)	**Number of Units (for PSH) or Number of Exits to PH (for TH or RRH)**	**Cost Per Unit (for PSH) Cost Per PH Exit (for TH and RRH) Please complete**
$373,482	12	$31,124
Score	**7**	

Measure 14: Policy Priorities (Up to 13 pts)		
Transitional Housing	**Rapid Re-Housing**	**Permanent Supportive Housing**
Not Applicable	*Rapid Re-Housing = 12 points*	*Permanent Supportive Housing = 13 points*
Score	**13**	

Section C: Total Score (100 pts. Maximum)	
Score	**89.5**

1E-5. Notification of Projects Rejected-Reduced

Email notification of rejection to application sent 15 days prior to HUD submission deadline - Notification to CoC Project Applicant

CA-512: Daly City/San Mateo County CoC

NOTIFICATION OF PROJECTS REJECTED-REDUCED

Per HUD's Detailed Instructions, these documents comprise the required Notification of Projects Rejected-Reduced Attachments.

Included are:

1. Email/letter notification to Retraining the Village (new project rejected from local competition)

2. Screenshot of publicly-posted Priority Listing (dated 9/14/2022)

3. Publicly-posted Priority Listing (dated 9/14/2022)

Dear Ms. Crumb,

The San Mateo County CoC's project review panel met on September 13, 2022 to score and rank all projects applying for 2022 Annual CoC Funding. The scoring of new project applications was based on the Department of Housing and Urban Development (HUD) system performance objectives, targeting and outreach, appropriateness of housing, Housing First modeling, service plan, timing, applicant capacity, financial feasibility and effectiveness, and project type prioritization, as described in the Project Review and Ranking Process.

The panel recommended that the application from Retraining the Village for RTV 2022 Joint Transitional Housing/Rapid Re-Housing project not be selected for funding in the 2022 CoC Project Priority List. The reason that this project was not selected is that the project received low scores on the rating factors listed in the Project Review and Ranking Process.

The review panel did wish to communicate that they felt that the project application from Retraining the Village was far improved this year. A primary challenge faced by this project application is the fact that the project type is not one of the project priorities for the CoC and thus it was not as competitive of an application as other project applications submitted in the competition.

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List, which does not include the Retraining the Village application.

If you wish to appeal this decision, please submit your appeal request by email to hsa_homeless_programs@smcgov.org no later than 5:00pm on September 20, 2022. Appeals will be handled according to the process outlined in the CoC's approved Project Review and Ranking Process document, which is posted at: https://www.smcgov.org/hsa/continuum-care-nofanofo.

In addition, the CoC Lead Agency can provide feedback on the quality of the application upon request. If you would like to receive feedback, please let me know. Detailed feedback will be provided in October 2022, after the CoC competition process closes.

Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

Ken Cole
Agency Director

Collaborative Community Outcomes
1 Davis Drive
Belmont, CA 94002
650-802-7500 T
650-631-5771 F
hsa.smcgov.org

September 14, 2022

Delivered via email to Halley Crumb, Retraining the Village, halleycrumb@retrainingthevillage.org

Dear Ms. Crumb,

The San Mateo County CoC's project review panel met on September 13, 2022 to score and rank all projects applying for 2022 Annual CoC Funding. The scoring of new project applications was based on the Department of Housing and Urban Development (HUD) system performance objectives, targeting and outreach, appropriateness of housing, Housing First modeling, service plan, timing, applicant capacity, financial feasibility and effectiveness, and project type prioritization, as described in the Project Review and Ranking Process.

The panel recommended that the application from Retraining the Village for RTV 2022 Joint Transitional Housing/Rapid Re-Housing project not be selected for funding in the 2022 CoC Project Priority List. The reason that this project was not selected is that the project received low scores on the rating factors listed in the Project Review and Ranking Process.

The review panel did wish to communicate that they felt that the project application from Retraining the Village was far improved this year. A primary challenge faced by this project application is the fact that the project type is not one of the project priorities for the CoC and thus it was not as competitive of an application as other project applications submitted in the competition.

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List, which does not include the Retraining the Village application.

If you wish to appeal this decision, please submit your appeal request by email to hsa_homeless_programs@smcgov.org no later than 5:00pm on September 20, 2022. Appeals will be handled according to the process outlined in the CoC's approved Project Review and Ranking Process document, which is posted at: https://www.smcgov.org/hsa/continuum-care-nofanofo.

In addition, the CoC Lead Agency can provide feedback on the quality of the application upon request. If you would like to receive feedback, please let me know. Detailed feedback will be provided in October 2022, after the CoC competition process closes.

Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

Screenshot of Posting of Preliminary Priority Listing, dated 9/14/2022

Publicly-posted Priority Listing (dated 9/14/2022)

CA-512 Daly City/San Mateo CoC
Annual CoC NOFO Local Competition
Project Priority Listing as of 09/13/2022

Rank	Agency	Project Name	Project Type	Application Type	Project Score	Approved Amount	Accepted/ Rejected	Tier Amount	Tier
1	CORA	Renewal DVRRH CORA FY2022	RRH	Renewal	95	$ 736,475	Accepted	$ 736,475	Tier 1
2	LifeMoves	Vendome 2022	PSH	Renewal	89.5	$ 269,948	Accepted	$ 1,006,423	Tier 1
3	Housing Authority of the County of San Mateo	Shelter Plus Care Sponsor Based (SP15)	PSH	Renewal	83.5	$ 315,577	Accepted	$ 1,322,000	Tier 1
4	Housing Authority of the County of San Mateo	Shelter Plus Care Belmont Apartments	PSH	Renewal	81.5	$ 289,279	Accepted	$ 1,611,279	Tier 1
5	Housing Authority of the County of San Mateo	Permanent Supportive Housing Consolidated (SP19)	PSH	Renewal	78.5	$ 10,554,130	Accepted	$12,165,409	Tier 1
6	LifeMoves	Redwood Family House 2022	TH	Renewal	78.5	$ 133,750	Accepted	$12,299,159	Tier 1
7	Mental Health Association of San Mateo	SAYAT	PSH	Renewal	76	$ 74,666	Accepted	$12,373,825	Tier 1
8	San Mateo County Human Services Agency	San Mateo County HMIS Project	HMIS	Renewal	NA	$ 80,110	Accepted	$12,453,935	Tier 1
9	LifeMoves	Rapid Re-housing 2022	RRH	Renewal	72.5	$ 42,086	Accepted	$12,496,021	Tier 1
9	LifeMoves	Rapid Re-housing 2022	RRH	Renewal	72.5	$ 471,454	Accepted	$12,967,475	Tier 2
10	LifeMoves	SAFE (Savings & Financial Education) 2022	RRH	Renewal	69.5	$ 186,231	Accepted	$13,153,706	Tier 2
11	Housing Authority of the County of San Mateo	Permanent Supportive Housing (SP23)	PSH	New	104	$ 657,685	Accepted	$13,811,391	Tier 2
12	CORA	DV Bonus DVRRH CORA FY2022	RRH	DV Bonus	86	$ 301,854	Accepted	$14,113,245	DV Bonus
No Rank	Retraining the Village	RTV 2022 Joint Transitional Housing/Rapid Re-Housing	TH-RRH	New	76	$ -	Rejected	N/A	No Tier

1E-5a. Notification of Projects Accepted

Email notification of acceptance to application sent 15 days prior to HUD submission deadline - Notification to CoC Project Applicant

CA-512: Daly City/San Mateo County CoC

NOTIFICATION OF PROJECTS ACCEPTED

Per HUD's Detailed Instructions, these documents comprise the required
Notification of Projects Accepted Attachment.

Included are:

1. Email/letter notification to each accepted project

2. Email notification of posting of Priority Listing

3. Screenshot of publicly-posted Priority Listing (dated 9/14/2022)

4. Publicly-posted Priority Listing (dated 9/14/2022)

Dear Ms. Schuette and Ms. Kilpatrick,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from Community Overcoming Relationship Abuse (CORA) ranked the applications in Tier 1 and Tier 2.

Project Name	Rank	Tier
Renewal DVRRH CORA FY2022	1	1
DV Bonus DVRRH CORA FY2022	12	2

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

Please do not take any action in e-snaps at this time; we will be in touch separately regarding our technical review of the e-snaps project application and any requested revisions.

In addition, the CoC Lead Agency can provide feedback on the quality of the application upon request. If you would like to receive feedback, please let me know. Detailed feedback will be provided in October 2022, after the CoC competition process closes.

Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

Ken Cole
Agency Director

Collaborative Community Outcomes
1 Davis Drive
Belmont, CA 94002
650-802-7500 T
650-631-5771 F
hsa.smcgov.org

September 14, 2022

Delivered via email to Lynn Schuette and Cindy Kilpatrick, Community Overcoming Relationship Abuse, lynns@corasupport.org and cindyk@corasupport.org

Dear Ms. Schuette and Ms. Kilpatrick,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from Community Overcoming Relationship Abuse (CORA) ranked the applications in Tier 1 and Tier 2.

Project Name	Rank	Tier
Renewal DVRRH CORA FY2022	1	1
DV Bonus DVRRH CORA FY2022	12	2

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

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Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

Dear Mr. Babiera,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from the Housing Authority of the County of San Mateo ranked the applications in Tier 1 and Tier 2.

Project Name	Rank	Tier
Shelter Plus Care Sponsor Base (SP15)	3	1
Shelter Plus Care Belmont Apartments	4	1
Permanent Supportive Housing Consolidated (SP19)	5	1
Permanent Supportive Housing (SP23)	11	2

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

If you wish to appeal this decision, please submit your appeal request by email to hsa_homeless_programs@smcgov.org no later than 5:00pm on September 20, 2022. Appeals will be handled according to the process outlined in the CoC's approved Project Review and Ranking Process document, which is posted at: https://www.smcgov.org/hsa/continuum-care-nofanofo.

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Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

September 14, 2022

*Delivered via email to Ron Babiera, Emilyn Callado, and Cindy Chan, Housing Authority
of the County of San Mateo, rbabiera@smchousing.org, ecallado@smchousing.org, cchan@smchousing.org*

Dear Mr. Babiera,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from the Housing Authority of the County of San Mateo ranked the applications in Tier 1 and Tier 2.

Project Name	Rank	Tier
Shelter Plus Care Sponsor Base (SP15)	3	1
Shelter Plus Care Belmont Apartments	4	1
Permanent Supportive Housing Consolidated (SP19)	5	1
Permanent Supportive Housing (SP23)	11	2

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

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Please do not take any action in e-snaps at this time; we will be in touch separately regarding our technical review of the e-snaps project application and any requested revisions.

In addition, the CoC Lead Agency can provide feedback on the quality of the application upon request. If you would like to receive feedback, please let me know. Detailed feedback will be provided in October 2022, after the CoC competition process closes.

Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

From:	Lody Burdick
To:	Brian Greenberg; Katherine Finnigan; Jeannie Leahy; Joel Hanson; Liz Lucas
Cc:	Khalia Parish; Jessica Silverberg; Hana Gossett; Vanessa Fenley
Subject:	CoC NOFO Project Application Notification
Date:	Wednesday, September 14, 2022 12:10:00 PM
Attachments:	LifeMoves 2022 Notification CoC Project Application.pdf

Dear Mr. Greenberg and Ms. Finnigan,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from LifeMoves ranked the applications in Tier 1 and Tier 2.

Project Name	Rank	Tier
Vendome 2022	2	1
Redwood Family House 2022	6	1
Rapid Re-housing 2022	9	1 & 2
SAFE (Savings & Financial Education) 2022	10	2

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

If you wish to appeal this decision, please submit your appeal request by email to hsa_homeless_programs@smcgov.org no later than 5:00pm on September 20, 2022. Appeals will be handled according to the process outlined in the CoC's approved Project Review and Ranking Process document, which is posted at: https://www.smcgov.org/hsa/continuum-care-nofanofo.

Please do not take any action in e-snaps at this time; we will be in touch separately regarding our technical review of the e-snaps project application and any requested revisions.

In addition, the CoC Lead Agency can provide feedback on the quality of the application upon request. If you would like to receive feedback, please let me know. Detailed feedback will be provided in October 2022, after the CoC competition process closes.

Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

COUNTY OF **SAN MATEO**
HUMAN SERVICES AGENCY

Ken Cole
Agency Director

Collaborative Community Outcomes
1 Davis Drive
Belmont, CA 94002
650-802-7500 T
650-631-5771 F
hsa.smcgov.org

September 14, 2022

Delivered via email to Brian Greenberg, Katherine Finnigan, Jeannie Leahy, Joel Hanson, and Liz Lucas, LifeMoves, bgreenberg@lifemoves.org, kfinnigan@lifemoves.org, jleahy@lifemoves.org, jhanson@lifemoves.org, and llucas@lifemoves.org.

Dear Mr. Greenberg and Ms. Finnigan,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from LifeMoves ranked the applications in Tier 1 and Tier 2.

Project Name	Rank	Tier
Vendome 2022	2	1
Redwood Family House 2022	6	1
Rapid Re-housing 2022	9	1 & 2
SAFE (Savings & Financial Education) 2022	10	2

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

If you wish to appeal this decision, please submit your appeal request by email to hsa_homeless_programs@smcgov.org no later than 5:00pm on September 20, 2022. Appeals will be handled according to the process outlined in the CoC's approved Project Review and Ranking Process document, which is posted at: https://www.smcgov.org/hsa/continuum-care-nofanofo.

Please do not take any action in e-snaps at this time; we will be in touch separately regarding our technical review of the e-snaps project application and any requested revisions.

In addition, the CoC Lead Agency can provide feedback on the quality of the application upon request. If you would like to receive feedback, please let me know. Detailed feedback will be provided in October 2022, after the CoC competition process closes.

Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

From:	Lody Burdick
To:	Melissa Platte; Shane Young
Cc:	Khalia Parish; Jessica Silverberg; Hana Gossett; Vanessa Fenley
Subject:	CoC NOFO Project Application Notification
Date:	Wednesday, September 14, 2022 12:09:00 PM
Attachments:	MHA 2022 Notification CoC Project Application.pdf

Dear Ms. Platte and Mr. Young,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from Mental Health Association of San Mateo County (MHA) ranked the applications in Tier 1.

Project Name	Rank	Tier
SAYAT	7	1

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

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Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
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Ken Cole
Agency Director

Collaborative Community Outcomes
1 Davis Drive
Belmont, CA 94002
650-802-7500 T
650-631-5771 F
hsa.smcgov.org

September 14, 2022

Delivered via email to Melissa Platte and Shane Young, Mental Health Association of San Mateo County, melissap@mhasmc.org, and shaney@mhasmc.org

Dear Ms. Platte and Mr. Young,

This letter is to inform you that the San Mateo County CoC project review panel met and their review of the following applications from Mental Health Association of San Mateo County (MHA) ranked the applications in Tier 1.

Project Name	Rank	Tier
SAYAT	7	1

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please be aware that this placement decision is not final until the CoC Steering Committee has met to approve the final list. Projects recommended for re-allocation or that are placed into Tier 2 may appeal the decision of the Review Panel. In the event that an appeal is successful, it can impact the final order of projects. Should your project placement be adjusted as a result of a project appeal, you will receive a notification in writing prior to September 27, 2022.

Please do not take any action in e-snaps at this time; we will be in touch separately regarding our technical review of the e-snaps project application and any requested revisions.

In addition, the CoC Lead Agency can provide feedback on the quality of the application upon request. If you would like to receive feedback, please let me know. Detailed feedback will be provided in October 2022, after the CoC competition process closes.

Sincerely,
Lody Burdick
Management Analyst, Center on Homelessness
Human Services Agency, Lead Agency for San Mateo County CoC
(650) 802-5090
lburdick@smcgov.org

Dear San Mateo County CoC Stakeholders and CoC Steering Committee,

Please see attached 2022 Annual NOFO Priority Listing draft as of 9/13/22, which is also saved on our website: https://www.smcgov.org/hsa/continuum-care-nofanofo

The CoC Steering Committee will meet on September 27, 2022, to approve the final Project Priority List. Please note that the placement decisions are not final until the CoC Steering Committee has met to approve the final list.

If you have any questions or comments, please contact Lody Burdick (lburdick@smcgov.org).

Screenshot of Posting of Preliminary Priority Listing, dated 9/14/2022

apply for.

| Bonus funding for New Permanent Housing Projects | $657,685 |
| Bonus funding specifically for Domestic Violence Projects | $301,854 |

Availability of New Project Funding 2022 Annual CoC NOFO

New Project Narrative Application Template 2022

Renewal Applications
Renewal project applications are due by August 30, 2022, at 5:00 p.m. to
HSA_Homeless_Programs@smcgov.org and Hana Gossett hana@focusstrategies.net . Information
about the renewal process may be found in the document below titled Information for Renewal
Applicants 2022 Annual CoC NOFO. Guidance on completing the Renewal Application in e-snaps will be
provided soon.

Information for Renewal Applicants 2022 Annual CoC NOFO

2022 Project Review and Ranking Process
The Project Review and Ranking Process for 2022 is also available below, titled 2022 Annual NOFO
Project Review and Ranking Process Final. This document was approved by the CoC Steering
Committee meeting on August 10, 2022.

2022 Annual NOFO Project Review and Ranking Process Final

2022 Annual NOFO Priority Listing (as of 9/13/2022)

NOFO Resources
Below you will find resources to support completing project applications for this funding opportunity.
Additionally, San Mateo County HSA has provided links to resources from HUD that will support
completing the project applications and understanding the funding opportunity.

Highlights of 2022 CoC NOFO

HUD - Continuum of Care Program Competition Page (HUD.GOV)

HUD - FY2022 CoC Program Competition Page (HUD Exchange)

HUD E-Snaps Portal

Applicant Meeting Presentation Slides

Applicant Meeting Q&A

Publicly-posted Priority Listing (dated 9/14/2022)

CA-512 Daly City/San Mateo CoC
Annual CoC NOFO Local Competition
Project Priority Listing as of 09/13/2022

Rank	Agency	Project Name	Project Type	Application Type	Project Score	Approved Amount	Accepted/ Rejected	Tier Amount	Tier
1	CORA	Renewal DVRRH CORA FY2022	RRH	Renewal	95	$ 736,475	Accepted	$ 736,475	Tier 1
2	LifeMoves	Vendome 2022	PSH	Renewal	89.5	$ 269,948	Accepted	$ 1,006,423	Tier 1
3	Housing Authority of the County of San Mateo	Shelter Plus Care Sponsor Based (SP15)	PSH	Renewal	83.5	$ 315,577	Accepted	$ 1,322,000	Tier 1
4	Housing Authority of the County of San Mateo	Shelter Plus Care Belmont Apartments	PSH	Renewal	81.5	$ 289,279	Accepted	$ 1,611,279	Tier 1
5	Housing Authority of the County of San Mateo	Permanent Supportive Housing Consolidated (SP19)	PSH	Renewal	78.5	$ 10,554,130	Accepted	$12,165,409	Tier 1
6	LifeMoves	Redwood Family House 2022	TH	Renewal	78.5	$ 133,750	Accepted	$12,299,159	Tier 1
7	Mental Health Association of San Mateo	SAYAT	PSH	Renewal	76	$ 74,666	Accepted	$12,373,825	Tier 1
8	San Mateo County Human Services Agency	San Mateo County HMIS Project	HMIS	Renewal	NA	$ 80,110	Accepted	$12,453,935	Tier 1
9	LifeMoves	Rapid Re-housing 2022	RRH	Renewal	72.5	$ 42,086	Accepted	$12,496,021	Tier 1
9	LifeMoves	Rapid Re-housing 2022	RRH	Renewal	72.5	$ 471,454	Accepted	$12,967,475	Tier 2
10	LifeMoves	SAFE (Savings & Financial Education) 2022	RRH	Renewal	69.5	$ 186,231	Accepted	$13,153,706	Tier 2
11	Housing Authority of the County of San Mateo	Permanent Supportive Housing (SP23)	PSH	New	104	$ 657,685	Accepted	$13,811,391	Tier 2
12	CORA	DV Bonus DVRRH CORA FY2022	RRH	DV Bonus	86	$ 301,854	Accepted	$14,113,245	DV Bonus
No Rank	Retraining the Village	RTV 2022 Joint Transitional Housing/Rapid Re-Housing	TH-RRH	New	76	$ -	Rejected	N/A	No Tier

1E-5b. Final Project Scores for All Projects

List of final project scores for all renewal and new projects.

CA-512 Daly City/San Mateo CoC
Annual CoC NOFO Local Competition
Final Project Scores for All Projects

Rank	Agency	Project Name	Project Type	Application Type	Project Score	Approved Amount	Accepted/ Rejected	Tier Amount	Tier
N/A	San Mateo County Human Services Agency	CoC Planning Project FY2022	Planning	Renewal/ Planning	N/A	$ 410,553	Accepted	N/A	N/A
1	CORA	Renewal DVRRH CORA FY2022	RRH	Renewal	95	$ 736,475	Accepted	$ 736,475	Tier 1
2	LifeMoves	Vendome 2022	PSH	Renewal	89.5	$ 269,948	Accepted	$ 1,006,423	Tier 1
3	Housing Authority of the County of San Mateo	Shelter Plus Care Sponsor Based (SP15)	PSH	Renewal	83.5	$ 315,577	Accepted	$ 1,322,000	Tier 1
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12	CORA	DV Bonus DVRRH CORA FY2022	RRH	DV Bonus	86	$ 301,854	Accepted	$14,113,245	DV Bonus
No Rank	Retraining the Village	RTV 2022 Joint Transitional Housing/Rapid Re-Housing	TH-RRH	New	76	$ -	Rejected	N/A	No Tier

3A-1a. Housing Leveraging Commitments

Per HUD's Detailed Instructions, this attachment is our written commitment of leveraged housing resources for our new PH-PSH project

DOH

**DEPARTMENT
OF HOUSING**
COUNTY OF SAN MATEO

Main Office - Department of Housing
264 Harbor Blvd., Building A Belmont, CA 94002-4017

Housing Community Development
Tel: (650) 802-5050

Housing Authority of the County of San Mateo
Tel: (650) 802-3300

Website:
www.smchousing.org

E-mail:
housing@smchousing.org
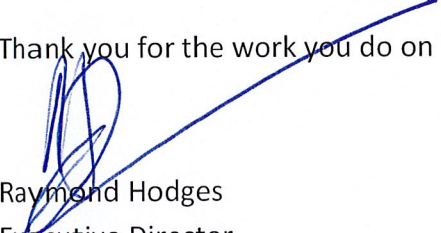
September 22, 2022

Jessica Silverberg
Human Services Manager, Center on Homelessness
San Mateo County Human Services Agency
1 Davis Drive.
Belmont, CA 94002

Subject: Housing Commitment
          CoC New Project Application –Permanent Supportive Housing (SP23)

Dear Ms. Silverberg:

The Housing Authority of the County of San Mateo (HACSM) commits to allocate six (6) Section 8 Housing Choice Vouchers under the Housing Readiness Program to the new Permanent Supportive Housing (SP23) project for which CoC funding is being requested in the FY 2022 competition. The total number of units/participants in this project will be 23, of which 6 units or 25% will be supported by the Housing Choice Voucher funding. We have estimated the value of these vouchers as $145,865, based on the current Fair Market Rent for a one-bedroom unit, minus projected average tenant portion of the rent.

Thank you for the work you do on behalf of our CoC.

Raymond Hodges
Executive Director

cc: Ron Babiera, Rental Programs Manager