

Before Starting the CoC Application

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

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

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

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

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.

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

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1A-1. CoC Name and Number: CA-523 - Colusa, Glen, Trinity Counties CoC

1A-2. Collaborative Applicant Name: Glenn County Health & Human Services Agency

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Glenn County Health & Human Services Agency

1B. Coordination and Engagement–Inclusive Structure and Participation

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

In the chart below for the period from May 1, 2020 to April 30, 2021:	
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:

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

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

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

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

(limit 2,000 characters)

(1) The Dos Rios Continuum of Care invites new members to join at any time of the year. The General Membership is made up of representatives from non-profit, grassroots, community or faith-based organizations, public agencies, city government, service providers and citizens concerned with homelessness issues in the three-county region. Meetings are open to the public and occur once per quarter, at a minimum. The invitation is made public through written notice and other appropriate media, which may include emails and website announcements distributed by a wide range of stakeholders and members.

(2) If persons are not able to fill out membership form, the Coordinator fills it out for them or provides a link through an email for those who would like to fill the membership form out via electronic format. Each meeting is hosted via Zoom, which assists those who would want to attend but are unable to attend in person. CA-523 does not conduct special outreach however, when the PIT is conducted in 2022 special invitations will be extended to those who are counted.

(3) In addition to outreach conducted through the Point in Time Count, program participants are invited to join the CoC throughout their participation in the program and at the end of their participation. Case managers operating homeless programs throughout the region continually solicits homeless persons to join the CoC. Many of the homeless persons leave the area once their period of homelessness ends due to more opportunities in surrounding areas.

(4) We have strong liaison relationships with each of the Native American reservations in our continuum and continue to strengthen those relationships and connect our Native American population to supportive services that are available. In 2022 the CoC aims to formalize these relationships by inviting these organizations to attend the CoC meetings.

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

Describe in the field below how your CoC:

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

(limit 2,000 characters)

(1) The CoC Board contains a diverse group of community members committed to addressing homelessness in Glenn, Colusa, and Trinity Counties which contains representatives from city and county government, law enforcement, Community Action Agency, VA, local victim services organization, local youth providers, business owners, medical providers, and other human service agencies. In addition, each of the counties in the CoC has a local group that coordinates homeless services within their specific region.

(2) The CoC hosts community conversations to address issues surrounding homelessness to foster dialogue and exploration into solutions to prevent or end homelessness. The CoC has conducted community-wide meetings made up of representatives from faith-based organizations, city and county government, state government, human service organizations, and other stakeholders to address homelessness and to develop short- and long-term housing solutions. Meetings are open to all members of the community. Meetings are announced throughout the region using the BOS meetings and other community meetings, email distribution lists, and announcements on the website.

(3) Through information gathered at each of the meetings and forums attended, the CoC has created the Dos Rios CoC Strategic Plan, the Dos Rios CoC 10 Year Plan and the Community Action Plan. The CoC consistently gathers input from the public at the quarterly public meeting, the local CoC meetings, and the executive board meetings.

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

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

(limit 2,000 characters)

(1)(2)(3)(4)(5) The CoC made the first announcement of the application period via email and website posting on October 29, 2021 due to a resolved staffing capacity issue. This announcement was made on the CoC Website, email lists. A Request for Application was released that included details of the application process, to inform any interested party about the application process and to encourage new applications from those who had not applied before. The RFA included information regarding the process, timeline, applications and ranking process was approved. The RFA required that all applications be submitted by October 5th via email to the CoC Coordinator. The goal of the application process was to ensure it was not a burden for any new applicants. The CoC wants to encourage new projects and new applicants. Throughout the process, emails continued to encourage new applications in addition to CoC Coordinator availability via phone to answer any questions.

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

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

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

In the chart below:

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	No
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Nonexistent
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)	Nonexistent
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Nonexistent
12.	Organizations led by and serving LGBT persons	Nonexistent
13.	Organizations led by and serving people with disabilities	Nonexistent
14.	Private Foundations	No
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.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

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

(limit 2,000 characters)

(1) ESG recipients submit an annual report to the CoC, which includes soliciting information on how the money is being used, and what if any challenges are occurring. Given the low occupancy rate in the region, our providers struggle to find properties to participate in the RRH programs. Constant work is being done to build relationships with property owners.

(2) When the ESG funding rounds are announced information is presented and solicited from the members of the Executive Committee, who serve as a liaison to the service providers in their County. Through these communications we listen to the needs of the providers, and also encourage our providers to partner with each other. It is during this time, our past recipients, again vocalize the importance of retaining funding to ensure the project is able to continue service delivery. Our ESG recipients also participate in HMIS and CES Committee meetings. These meetings allow for open discussion on issues, concerns, solutions and successes in the ESG programs.

(3)& (4) Due to HCD administering our ESG funds, our jurisdiction falls under the State of California Consolidated Plan. Those who wish to provide input into HCD in regards to Consolidate Plan updates do so on their own accord. The 2021 PIT Count and HIC data was provided.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	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)	

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

Describe in the field below:

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

(limit 2,000 characters)

(1)(2)(3)(4)(5)(6). CA-523 collaborates with the local school districts, through their student family resource centers, or other school district meetings, to identify and refer homeless families and youth to the CoC for assessment in the CES and for homeless assistance and resource referrals. The CoC also collaborates with the McKinney-Vento educational authorities to educate homeless youth and families in housing programs or on the streets regarding their educational rights. CoC staff attend meetings of the Local Educational Agency and the McKinney Vento Homeless Education Coordinators sit on the CoC advisory board and coordinates closely with CoC sub-recipient agencies. The CoC does not have any youth education providers outside of the local school district. The CoC participates in Local Planning Council meetings, Cradle to Career Partnerships, First 5, Head Start, School District Community Collaborative and school board meetings where the goal is to collaborate on solutions for families with hardships, including homelessness. School-aged families entering shelters are informed of their educational rights and referred to the McKinney Vento Liaison in their respective county. The CoC Coordinator has a formal partnership with Emergency Shelter recipients to provide information, if not available through other means, about educational rights and coordinate educational services, such as tutoring provided to homeless children at the shelter. CoC funded service providers are required to designate an educational liaison that will ensure that children are enrolled in school, connected to appropriate services in the community, including Head Start and McKinney Vento education services.

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

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

(limit 2,000 characters)

Appendix C of CA-523 CoC Operating Manual includes the Policy and Procedure on Program Requirements for all CoC funded programs, and includes Part C of the Individuals with Disabilities Education Act. This Policy requires programs that serve households with children to designate an educational liaison that will ensure that children are enrolled in school, connected to appropriate services in the community, including Head Start and McKinney Vento education services; and to ensure no gender or age bias when determining eligibility for family admission to a project that provides shelter for families with children.

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

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

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

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Annual Training–Best Practices.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC coordinates to provide training for:

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

(limit 2,000 characters)

(1) At the quarterly CoC meetings and Executive Board meetings, the Executive Director of DV service provider uses the opportunity to announce new

information, regulations or upcoming training for all our members and the public to attend.

(2) The DV service provider is active in our CES and HMIS committees and brings constant awareness of best practices for data collection, as well has choices for clients. Our CoC HMIS and CES committee participants are all service providers and informed of safety protocols and planning protocols. If and when those change then the DV provider advises the committees, to ensure that the committee members are current.

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

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

(limit 2,000 characters)

Westside Domestic Violence Shelter is the only domestic violence, dating violence, sexual assault, and stalking shelter in CA-523 and a voting member of the CoC. The organization provides a 24/7 shelter for survivors and children and community-based advocacy services to anyone victimized. To assess the scope of community needs related to the needs of victims and survivors, the CoC uses the VI-SPDAT to determine risk and priority for housing.

The victim service provider collects data for each survivor and their children and maintains this information in a separate and confidential database. The data collected closely aligns with the vulnerability assessment used by the CoC. The most vulnerable are those survivors who are homeless and staying at the agency’s shelter which is a 30-day emergency facility. However, due to the complexity of survivor needs, often the stay is extended beyond the 30 days to find safe housing for the victim and to secure other stabilizing supports. The data collected assists Westside DV in working closely with survivors and providing safety and long-term stability with safe and secure housing. With the use of Coordinated Entry, the CoC effectively coordinates the survivor risk factor with available housing which creates a trauma-informed approach to housing victims/survivors of domestic violence, sexual assault, dating violence and stalking.

The organization provides other information to the CoC about the scope of domestic violence and how it relates to homelessness from California Coalition against and Sexual Assault statewide data and CA-523 PIT results.

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

Describe in the field below how your CoC’s coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

1.	prioritize safety;
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2.	use emergency transfer plan; and
3.	ensure confidentiality.

(limit 2,000 characters)

(1) (2) (3). In accordance with the Violence Against Women Act (VAWA), all CoC housing programs allow tenants who are victims of domestic violence (DV), dating violence, sexual assault, or stalking to request an emergency transfer from the tenant's current unit to another unit. The ability to request a transfer is available regardless of sex, gender identity, or sexual orientation. This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. The CoC plan is based on a model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD). The CoC publicizes all resources available to address the safety needs of DV, Dating Violence, Sexual Assault and stalking survivors. This includes publicizing housing and services through CoC funded projects, ESG, the Department of Justice, and Health and Human Services programs. We have adopted victim centered practices that maximize choice while protecting privacy. We use data systems to de-identify persons in this category and provide annual training to our providers on how best to serve clients to prioritize safety and trauma informed, victim-centered services that make safety a priority.

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

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

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

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

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

Butte County Housing Authority		No	No
Shasta County Housing Authority		Yes-Both	Yes

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

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

Describe in the field below:

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

(limit 2,000 characters)

Butte County implemented a homeless preference in 2017. Per the current Administrative Plan of Butte County Housing Authority, effective October 1, 2021, "The HACB limits the number of families that qualify for a homeless preference to sixty-five (65) families. Families must be under case management of a Butte Countywide Continuum of Care or Dos Rios Continuum of Care (Glenn County) organization. Homeless verification will be provided by the organization providing the case management. Once the HACB is serving sixty-five (65) families under the preference, and one family leaves the program, the next family on the waiting list who meets the preference criteria will be served. If there is no one on the waiting list who meets the preference criteria, the waiting list will be reopened for applicants that qualify for that preference or if kept open, as determined in accordance with prioritization established by the Coordinated Entry system. The family must be referred to the HACB by a homeless service provider through Coordinated Entry based on their VI-SPDAT score." CA-523 has worked with HACB to include Glenn County Continuum organizations as referring agencies.

Shasta County Housing Authority implemented a homeless preference for “homeless individuals and families who are disabled non-elderly, between the ages of 18-61, and who are transitioning out of institutional or other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless”, and “for individuals and families that are referred from an eligible organization as being housing deficient

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

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

1.	Multifamily assisted housing owners	No
2.	PHA	No
3.	Low Income Tax Credit (LIHTC) developments	No

4.	Local low-income housing programs	No
	Other (limit 150 characters)	
5.		

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

Does your CoC include PHA-funded units in the CoC's coordinated entry process?	No
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1C-7c.1.	Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

If you selected yes in question 1C-7c., describe in the field below:

- | | |
|----|---|
| 1. | how your CoC includes the units in its Coordinated Entry process; and |
| 2. | whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs. |

(limit 2,000 characters)

N/A

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

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	No
---	----

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

If you selected yes to question 1C-7d, describe in the field below:

- | | |
|----|--|
| 1. | the type of joint project applied for; |
| 2. | whether the application was approved; and |
| 3. | how your CoC and families experiencing homelessness benefited from the coordination. |

(limit 2,000 characters)

N/A

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

Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	No
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1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	
	Not Scored–For Information Only	

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA
Butte County Hous...
Shasta County Hou...

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

Name of PHA: Butte County Housing Authority

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

Name of PHA: Shasta County Housing Authority

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

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	0
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	0
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	0%

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

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

(limit 2,000 characters)

N/A

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

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	No
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1C-10. Street Outreach—Scope.	
NOFO Section VII.B.1.j.	

Describe in the field below:

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

(limit 2,000 characters)

(1)CA -523, its partners and volunteers team up once a year to conduct the Point in Time Count and an Outreach Event.

(2) The large scale outreach event does cover 100% of the geographic region, for the exception of the remote wilderness areas which are likely not a place where homeless would be.

(3) As the CoC does not have funding for street outreach, the capacity of our providers to participate in outreach and engagement is limited to once per year.

(4) Additionally, both the Sheriff's office and local police departments focus on working with chronically homeless persons who are frequent users of public services and works to divert them by connecting them to housing, supports, treatment and services. Local medical clinics have been advised of the VISPDAT and how important it is to assess chronically homeless persons for the purposes of getting the on to the eligibility list for Housing First programs. CA- 523 also works with local area disability advocates to conduct outreach about CoC programs with the clients that they serve.

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

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

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

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

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC—only enter bed data for projects that have an inventory type of “Current.”	0	0

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

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

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

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

Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:

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

(limit 2,000 characters)

(1) There are several mainstream service providers that regularly attend CoC meetings, sits on the advisory board and participates in HMIS/CEP and PIT planning committees; they provide detailed information about programs/services/funding available for housing and supportive services.

(2) Availability of mainstream resources is discussed from various service providers at each of the quarterly meetings and monthly executive board

meetings. Up to date information is included on the County websites.

(3) During intake and assessment, all CoC funded programs incorporate a component on mainstream programs, eligibility for those programs and current availability of those programs. All programs are required to provide referrals to mainstream resources that the client may be eligible for including CalWORKs, CalFRESH, Head Start, Medi-Cal, employment services, energy assistance, behavioral health, transition age youth assistance, SSI/SSDI, veteran's services, and public assistance.

(4) Our CoC serves clients who utilize many different programs, including Medicaid (Medi-Cal) and other benefits such as TANF (CalWorks), SNAPs/WIC (CalFresh), and services through our community food banks and faith-based organizations. We closely partner with HHS and community partners through referrals and collaboration in order to effectively utilize Medicaid (Medi-Cal) and other benefits. We currently use a universal release of information and have CoC wide regulations to ensure protection of personal information. We seek permission from clients prior to collaborating with other departments or partners.

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

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

(limit 2,000 characters)

(1) CA-523 Coordinated Entry System (CES) includes ESG funded access points in each of its three counties to be consistent with the standards issued by HUD. Intake specialists at each access point provide an initial, comprehensive assessment of the needs of individuals and families to determine their vulnerability and need for housing and supportive services. Each assessment (VI-S/FDAT) is then prioritized and those with the greatest needs receive priority for housing and homeless assistance available within CA- 523, as well as any additional needed interventions. Housing providers use the Priority list to provide assistance as quickly as possible to those who are in the most need of assistance. During the point in time count, counters inform those who are homeless about the CES and will complete a less comprehensive assessment until the person is able to have a more comprehensive assessment completed, allowing them to get their name into the By Name List. 2-1-1 is available in Glenn County, but not in Colusa or Trinity counties. Both counties are working with CPUC for funding to bring 2-1-1 into their communities.

(2) When a homeless person enters into CES we talk not only about housing options, but we also talk diversion and look to find options that would assist the person immediate need. The CoC uses a universal VI-SPDAT, with modifications for youth.

(3) & (4) We also add prioritization points to those who are the most vulnerable. To fulfill their engagement commitment the community queue is managed by the CoC CES committee. At each meeting the committee reviews and

discusses updates to the files of individuals who are enrolled. A focus has been developed on persons who have been residing in those systems of care for more than 90 days.

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

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes
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1C-15a.	Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	

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

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

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

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

1.	The CoC’s board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	No
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	No
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.	No
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.	No
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.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	No
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.	No
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	No
	Other:(limit 500 characters)	
12.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment. NOFO Section VII.B.1.o.	
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Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

CA-523 COC Board will be reviewing racial disparity on a bi-annual basis to ensure that programs are continuing to serve those who may be viewed as an underserved population. With use of HMIS, CES will also identify those who are being served in racial and ethnic groups through the process versus obtaining housing outside of the process. Within the last year, racial equity has been a focus of state and federal programs. At this time, the CoC understands that we may need to adjust our policies, procedures and practices and have requested HUD Technical Assistance on this topic. The CoC encouraged its ESG-CV service providers and partners to attend the ICF training entitled Racial Equity Foundation.

1C-16.	Persons with Lived Experience–Active CoC Participation. NOFO Section VII.B.1.p.	
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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.	1	0
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	0	0
3.	Participate on CoC committees, subcommittees, or workgroups.	1	0
4.	Included in the decisionmaking processes related to addressing homelessness.	0	0

5.	Included in the development or revision of your CoC's local competition rating factors.	0	0
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1C-17.	Promoting Volunteerism and Community Service. NOFO Section VII.B.1.r.	
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Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	

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

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

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

Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:

1.	unsheltered situations;	
2.	congregate emergency shelters; and	
3.	transitional housing.	

(limit 2,000 characters)

(1)(2)(3) To best assist those experiencing unsheltered or unsheltered homelessness, CA-523 has focused on utilized ESG-CV funds to provide rapid re-housing and additional non-congregate shelter in the form of motel assistance for the populations most at risk.

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

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

(limit 2,000 characters)

The CoC was quick to respond to the COVID-19 pandemic and has been strategic with the use of additional funding made available. Service providers within the CoC region have improved their readiness to offer services via phone meeting, improved online outreach presence, and improved safety protocols.

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

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

Glenn County serves as the Administrative Entity for the CA-523, and initiated a competitive process to distribute ESG-CV funds to Colusa, Glenn and Trinity Counties. The CoC is partnering with Glenn County Community Action, Colusa Department of Health and Human Services, the Westside Domestic Violence Shelter, and the Human Response Network to administer the ESG-CV funding. These subrecipients have provided/continue to provide services in the area of rapid rehousing, emergency shelter, to provide additional non-congregate shelter, emergency shelter operations for the domestic violence shelter, street outreach and HMIS data entry. The ESG-CV funds have been used to respond to the COVID-19 pandemic among individuals and families in need of housing or homeless services.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:

1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

(limit 2,000 characters)

(1) The CoC and its providers partnered with their County’s respective Public Health Department on mask guidance, physical distancing testing and sanitation measures. The County’s Public Health Department provided date information on the pandemic and best practices on response measures, which the CoC and its partners implemented. Non-CoC COVID-19 response funding was utilized towards these efforts.

(2) The CoC relayed and shared information from the Public Health/CDC on safety protocols for CoC partners and service providers to implement.

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

Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:

1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

(limit 2,000 characters)

(1) (2) (3) The Public Health Department in the respective Counties made

available the most current information on safety measures, such as sanitizing protocols, mask mandates and physical distancing requirements. Additionally, the Public Health Department provided up to date information to local restrictions through the respective County website. Up to date information was provided in regards to the vaccine implementation, including information on vaccination clinics, priority for vaccination, etc. The CoC shared information with homeless service providers that was provided by the Public Health Department at local and regional CoC meetings, and over email as applicable.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.	
	NOFO Section VII.B.1.q.	

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

(limit 2,000 characters)

The CoC followed the instructions of the Public Health Department and their multi-phased approach which was directed by the California State Department of Public Health. Throughout the COVID pandemic, the CoC has taken direction and guidance from Public Health and has shared that direction with its providers, advocates and target population.

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

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

(limit 2,000 characters)

The CoC maintains a partnership with the domestic violence service provider who was prepared to handle an influx service needs. A portion of the ESG-CV funds have been utilized by this service provider.

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

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

(limit 2,000 characters)

The COC has been prioritizing the Coordinated Entry System to improve the low barrier and person centered approach. While the CoC has not formally amended the CES Policies and Procedures at this time, we will continue to

address health related vulnerabilities related to age, health conditions, and housing, and will look into amending the policies and procedures as needed to adapt to the rapid changes surrounding the COVID-19 pandemic.

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

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

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen. NOFO Section VII.B.2.a. and 2.g.	
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1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	10/28/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	11/12/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below. NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	
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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.	No
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).	No
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).	No
4.	Used data from a comparable database to score projects submitted by victim service providers.	No
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	No
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	No

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:

- | | |
|----|--|
| 1. | the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and |
| 2. | considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area. |

(limit 2,000 characters)

(1) & (2)The CoC issued a supplemental application as part of the application process to help identify projects that were addressing priority needs and vulnerabilities as adopted by the CoC. The supplemental application was intended to be used for reviewing and rating projects and considered the degree to which projects served those priority areas. No applications were received from prospective applicants, so review, rating and ranking did not occur.

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

Describe in the field below how your CoC:

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

(limit 2,000 characters)

No applications were received from prospective applicants, so review, rating and ranking did not occur. The CoC Program Rating & Ranking Tool would have been utilized to rate and rank any applications that were received.

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

Describe in the field below:

- | | |
|----|---|
| 1. | your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed; |
| 2. | whether your CoC identified any projects through this process during your local competition this year; |
| 3. | whether your CoC reallocated any low performing or less needed projects during its local competition this year; |
| 4. | why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and |
| 5. | how your CoC communicated the reallocation process to project applicants. |

(limit 2,000 characters)

CA-523 does not have an ARD to reallocate.

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

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	No
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1E-5.	Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
	NOFO Section VII.B.2.g.	

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

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

Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	11/12/2021
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1E-6.	Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website–which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	11/12/2021
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2A. Homeless Management Information System (HMIS) Implementation

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

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

Enter the name of the HMIS Vendor your CoC is currently using.	Service Point
--	---------------

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

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

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/07/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

1. have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and
2. submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead.

(limit 2,000 characters)

(1) The victim service provider collects data for each survivor and their children and maintains this information in a separate and confidential HMIS database, that was established by the CoC and the HMIS Lead.

(2) The victim service provider in the CoC submits de-identified aggregated system performance measures data to the HMIS lead.

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

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

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	93	14	0	0.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	50	0	0	0.00%
4. Rapid Re-Housing (RRH) beds	0	0	0	
5. Permanent Supportive Housing	0	0	0	
6. Other Permanent Housing (OPH)	0	0	0	

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

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

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

(limit 2,000 characters)

(1) (2) In 2020, the Transitional Housing located in Colusa County was under renovations. This will not be the case in the next 12 months, which will increase the bed coverage rate.

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

Enter the percentage of beds covered in comparable databases in your CoC’s geographic area.	102.00%
---	---------

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

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

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

(limit 2,000 characters)

N/A

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

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	No
---	----

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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

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

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

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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

(limit 2,000 characters)

(1) The CoC completed a review of the program participants reasons for leading to homelessness. The reasons provided for cause of homelessness include rental increased, lack of housing units, increased utility costs, increased medical expenses, and decrease of employment income. The completed review of the programs allowed for the program operators to identify the vulnerable families and offer interventions prior to a period of homelessness occurring.

(2) (3) CA-523 has implemented the Housing Stabilization Program through HHS throughout the region in addition to California Emergency Solutions and Housing Grant and California Homeless Emergency Aid Program to focus on at risk households. This includes offering homeless prevention, utility assistance, access to mainstream resources such as Food Stamps, SSI, TANF, and assistance with Section 8 HCV when the lists are open. In addition, all 3 HHS department received Housing Disability Assistance Program (HDAP) funds through the Department of Social Services allowing for a case manager to assist the household through the disability process and appeals process. Having these funds available and the rebuilding of neighboring communities will allow CA-523 to be more successful in implementing the strategy of homeless prevention.

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

Describe in the field below:

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

(limit 2,000 characters)

(1) CA-523's strategies include: 1) All ESG funded projects work exclusively with Coordinated Entry in placing the most vulnerable individuals in RRH with length of time homeless a weighted prioritization factor; 2) Landlord Engagement via the CoC Coordinator with the CoC Lead Agency; 3) implementing CES to facilitate placement into RRH to PSH individuals with the longest LOT on the CE By Names List; and 4) focusing all California funding funneled through the CoC to focus on prioritizing the LOT as a weighted prioritization factor for housing placement.

(2)CA-523 has implemented the Coordinated Entry System to help prioritize those with the longest length-of-time homeless for housing. In addition, it uses the VI-SPDAT (for those over the age of 24) and VI-FSPDAT (for families) tools to assess vulnerability and prioritizes those with the highest scores and matches them to appropriate housing as those units become available. The longer an individual or family remains homeless, the higher their vulnerability score generally is. The CoC has partnered with the public housing agency to explore prioritizing additional homeless vouchers using the LOT as scoring for individuals and families. Glenn County is also exploring additional funding to assist in short term housing assistance for those homeless with a LOT of greater than 180 days.

(3) The CoC Coordinator is responsible for overseeing the CoC's strategies to reduce the reduce the length of time of homelessness.

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

Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:

1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

(1) With a very low local rental vacancy rate, a key strategy to increase the rate individuals and families residing in emergency shelters, transitional housing and rapid rehousing exit to permanent housing is by expanding the number of property owners willing to rent to low-income community members. (The CoC does not have Safe Havens.) The CoC continues to focus on Landlord engagement to grow the pool of Landlords to provide housing to CoC participants. In addition, each of the communities provide housing assistance programs that offer short-term case management to both the family and the landlord. The case management reduces evictions and unruly tenant activity. To increase the rate at which individuals and families retain their housing, the CoC operates on a "warm hand-off" basis to connect the person or family with other service providers to help with other needs and case managers continue working

with clients in permanent housing for up to a year. Because of solid relationships the CoC has with local landlords, we can mitigate problems that might occur between the landlord and tenant that threaten housing stability.

(2) Each homeless program operating agency oversees the CoC's strategy in their community that is approved at the executive board level.

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

Describe in the field below:

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

(limit 2,000 characters)

(1) CA-523 uses the VI-SPDAT, VI-FSPDAT, or TAY-SPDAT assessment tools during initial intake in order to identify individuals and families who return to homelessness. The CoC has found that individuals and persons in families with the highest vulnerability score are at a high risk of returning to homelessness. Through case conferencing with partner social service agencies, the CoC has discovered that common factors individuals and families who return to homelessness face are substance use disorders, a history of chronic homelessness and mental health issues. The CoC also adds a local question on the PIT survey to obtain data on factors that led to a return to homelessness. CA-523 conducts follow up interviews with program participants 6 and 12 months after exiting one of the permanent housing programs which gives us the opportunity to assist if the participant is at risk of becoming homeless again. In this interview, questions such as food security, medical treatment, and budgeting are asked.

(2) Because most Federal and State housing programs include long-term case management after placement into permanent housing, the CoC utilizes this time to help participants attain their personal goals, provide education to equip clients with the knowledge to remain stably housed and to connect individuals and families with wrap-around services. Case management also provides an opportunity to mitigate any problems that might occur that threaten housing stability. Most housing program participants attend the CoC’s tenant readiness classes which helps them to be successful tenants.

(3) The CoC Coordinator is responsible for overseeing the CoC’s strategies to reduce the rate of returns to homelessness.

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

Describe in the field below:

1.	your CoC’s strategy to increase employment income;
-----------	---

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

(limit 2,000 characters)

(1) CA-523's strategy to increase access to employment cash sources is to link clients with soft skills training, employment and job training, and job opportunities in all three counties. An assessment is completed to help the participant identify needs, strategies and resources for meeting identified goals and assistance is provided for accessing needed resources which includes access to employment and non-employment cash resources. Participants are referred to Vocational Rehabilitation services in addition to State and non-profit employment agencies. These partnerships allow for homeless to access employment, training, employability skills and employment through a direct referral with follow-up.

(2) An individualized case management plan is created for each participant which identifies individual participant needs and goals. From there objectives are created with timelines and the participant is assisted in connecting with identified resources. The CoC works with local and state agencies that oversee Vocational Rehabilitation and employment opportunities within the region.

(3) The CoC Coordinator is responsible for overseeing the CoC's strategies to increase programs that increase jobs and employment income across the region.

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

Describe in the field below how your CoC:

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

(limit 2,000 characters)

(1) WIOA assists with employment for youth and adults in addition to employment preparation, including job training, assistance with unemployment registration and filing, paid work experience through WEX, perform career assessments to help connect employees and compatible employers with the overarching goal of matching them with sustainable employment and improving job retention, and assisting individuals to get accepted into college or job training programs. We have great relationships with our partners and send referrals to assist with various services, which include but are not limited to, connecting migrant workers with labor board, recording expungement, and filing for unemployment services. These funds help to provide ancillary services to clients that are not covered under WIOA funding. These ancillary services include but are not limited to, assistance with purchasing required uniforms and basic certifications. By providing these ancillary services, clients are able to obtain employment. CA-523 partners with Glenn, Colusa, and Trinity County WIOA agencies, Health and Human Services, and Employment Coalitions to

improve job development opportunities in the region.

(2) CA-523 actively participates in job development, training, and employment supportive services through our North Central Counties Consortium (NCCC) collaboration to strengthen services for our residents in seeking stable employment and living wage opportunities. As part of a public agency, CA-523 works closely with the county's Community Development department, which actively works with private employers throughout our community to attract new businesses while improving business output with the goal of increasing employment. Through our WIOA program, we connect individuals to employers through frequent job fairs, employer outreach, and partnering with staffing agencies.

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

Describe in the field below:

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

(limit 2,000 characters)

(1) CA-523's strategy to increase access to non-employment cash sources is to 1) link clients with case managers operating the Housing Disability Program (HDAP) within the county the homeless person is located, and 2) implement SOAR for those clients who may be eligible for disability and are unable to work. An assessment is completed to help the participant identify needs, strategies and resources for meeting identified goals and assistance is provided for accessing needed resources which includes access to non-employment cash resources. Participants are referred to and assisted in accessing resources such as CalWorks/GA and other non-employment and cash assistance programs as indicated. Case managers work with each county Department of Health & Human Services with onsite intake workers to increase access to CalWorks/GA, Medicaid and SNAP, with some approvals taking place the same day.

(2) An individualized case management plan is created for each participant which identifies individual participant needs and goals. From there objectives are created with timelines and the participant is assisted in connecting with identified resources. The CoC works with local and state agencies that administer mainstream resources to ensure that case managers assist clients in applying for all mainstream resources for which they are eligible.

(3)The CoC Coordinator is responsible for overseeing the CoC's strategies to increase programs that increase access and use in non-employment cash income.

3A. Coordination with Housing and Healthcare Bonus Points

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

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

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

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

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

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

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

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

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

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

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

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

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

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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

3B-2.	Rehabilitation/New Construction Costs—New Projects.	
	NOFO Section VII.B.1.s.	

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

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

(limit 2,000 characters)

NA

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

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

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

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

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

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

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

(limit 2,000 characters)

N/A

4A. DV Bonus Application

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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?	No
Applicant Name	
This list contains no items	

4B. Attachments Screen For All Application Questions

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

Attachments must match the questions they are associated with.

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

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

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Tool	11/08/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	--	11/10/2021
1E-2. Project Review and Selection Process	Yes		
1E-5. Public Posting—Projects Rejected-Reduced	Yes	--	11/10/2021
1E-5a. Public Posting—Projects Accepted	Yes	--	11/10/2021
1E-6. Web Posting—CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

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Submission Summary

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

Page	Last Updated
1A. CoC Identification	10/19/2021
1B. Inclusive Structure	11/10/2021
1C. Coordination	11/08/2021
1C. Coordination continued	11/12/2021
1D. Addressing COVID-19	11/12/2021
1E. Project Review/Ranking	11/10/2021
2A. HMIS Implementation	11/12/2021
2B. Point-in-Time (PIT) Count	10/29/2021
2C. System Performance	11/12/2021
3A. Housing/Healthcare Bonus Points	11/08/2021
3B. Rehabilitation/New Construction Costs	10/29/2021

FY2021 CoC Application	Page 48	11/12/2021
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3C. Serving Homeless Under Other Federal Statutes	10/29/2021
4A. DV Bonus Application	10/29/2021
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

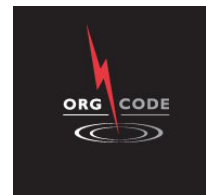
**Vulnerability Index -
Service Prioritization Decision Assistance Tool
(VI-SPDAT)**

Prescreen Triage Tool for Single Adults

AMERICAN VERSION 2.01

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**COMMUNITY
SOLUTIONS**



Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

Current versions available:

- VI-SPDAT V 2.0 for Individuals
- VI-SPDAT V 2.0 for Families
- VI-SPDAT V 1.0 for Youth

All versions are available online at

www.orgcode.com/products/vi-spdatt/

SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

Current versions available:

- SPDAT V 4.0 for Individuals
- SPDAT V 2.0 for Families
- SPDAT V 1.0 for Youth

Information about all versions is available online at

www.orgcode.com/products/spdat/

SPDAT Training Series

To use the SPDAT, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

The training gives you the manual, case studies, application to current practice, a review of each component of the tool, conversation guidance with prospective clients – and more!

Current SPDAT training available:

- Level 0 SPDAT Training: VI-SPDAT for Frontline Workers
- Level 1 SPDAT Training: SPDAT for Frontline Workers
- Level 2 SPDAT Training: SPDAT for Supervisors
- Level 3 SPDAT Training: SPDAT for Trainers

Other related training available:

- Excellence in Housing-Based Case Management
- Coordinated Access & Common Assessment
- Motivational Interviewing
- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

<http://www.orgcode.com/product-category/training/spdat/>

Administration

Interviewer's Name _____	Agency _____	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
Survey Date DD/MM/YYYY ___/___/____	Survey Time ___:___	Survey Location _____

Opening Script

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

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

Basic Information

First Name _____	Nickname _____	Last Name _____
In what language do you feel best able to express yourself? _____		
Date of Birth DD/MM/YYYY ___/___/____	Age _____	Social Security Number _____
		Consent to participate <input type="radio"/> Yes <input type="radio"/> No

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

SCORE:

0

A. History of Housing and Homelessness

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

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

- Refused**

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

SCORE:

0

2. How long has it been since you lived in permanent stable housing? _____ Years

Refused

3. In the last three years, how many times have you been homeless? _____

Refused

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

SCORE:

0

B. Risks

4. In the past six months, how many times have you...

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

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

SCORE:

0

5. Have you been attacked or beaten up since you've become homeless? Y N Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? Y N Refused

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

SCORE:

0

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

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

0

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

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

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

SCORE:

0

C. Socialization & Daily Functioning

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

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

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

SCORE:

0

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

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

SCORE:

0

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

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

SCORE:

0

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

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

SCORE:

0

D. Wellness

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

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

SCORE:

0

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

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

SCORE:

0

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern? Y N Refused
- b) A past head injury? Y N Refused
- c) A learning disability, developmental disability, or other impairment? Y N Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? Y N Refused

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

SCORE:

0

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

SCORE:

0

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

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

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

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

SCORE:

0

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

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:

0

Scoring Summary

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

Follow-Up Questions

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

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

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

Appendix A: About the VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using “gut instincts” in lieu of solid evidence. Communities need practical, evidence-informed tools that enhance their ability to satisfy federal regulations and quickly implement an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

Version 2

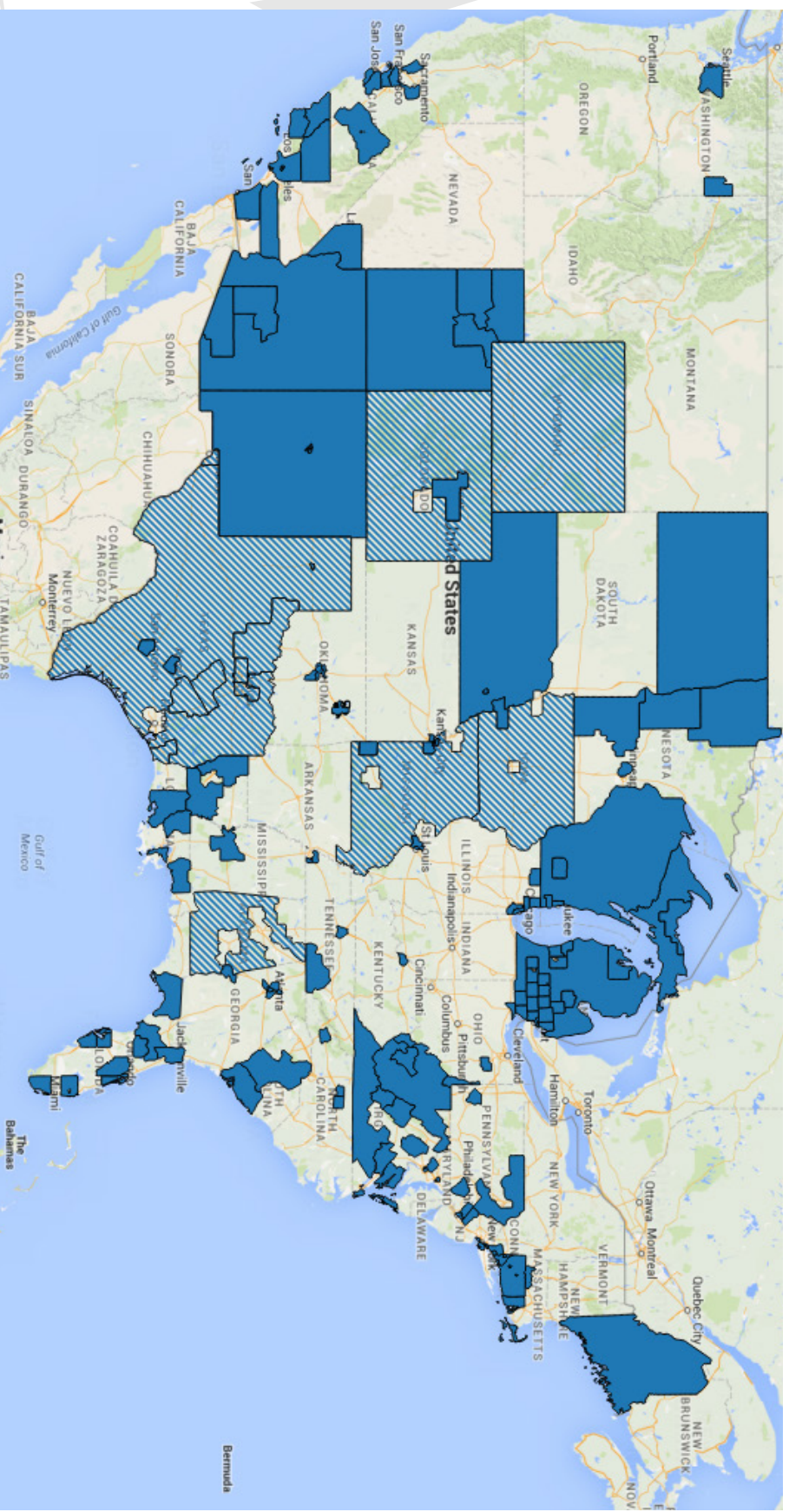
Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

You will notice some differences in Version 2 compared to Version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.



A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

- **Alabama**
 - Parts of Alabama Balance of State
- **Arizona**
 - Statewide
- **California**
 - San Jose/Santa Clara City & County
 - San Francisco
 - Oakland/Alameda County
 - Sacramento City & County
 - Richmond/Contra Costa County
 - Watsonville/Santa Cruz City & County
 - Fresno/Madera County
 - Napa City & County
 - Los Angeles City & County
 - San Diego
 - Santa Maria/Santa Barbara County
 - Bakerfield/Kern County
 - Pasadena
 - Riverside City & County
 - Glendale
 - San Luis Obispo County
- **Colorado**
 - Metropolitan Denver Homeless Initiative
 - Parts of Colorado Balance of State
- **Connecticut**
 - Hartford
 - Bridgeport/Stratford/Fairfield
 - Connecticut Balance of State
 - Norwalk/Fairfield County
 - Stamford/Greenwich
 - City of Waterbury
- **District of Columbia**
 - District of Columbia
- **Florida**
 - Sarasota/Sarasota/Manatee/Sarasota Counties
 - Tampa/Hillsborough County
 - St. Petersburg/Clearwater/Largo/Pinellas County
 - Tallahassee/Leon County
 - Orlando/Orange, Osceola, Seminole Counties
 - Gainesville/Alachua, Putnam Counties
 - Jacksonville-Duval, Clay Counties
 - Palm Bay/Melbourne/Brevard County
 - Ocala/Marion County
 - Miami/Dade County
 - West Palm Beach/Palm Beach County
- **Georgia**
 - Atlanta County
 - Fulton County
 - Columbus-Muscogee/Russell County
 - Marietta/Cobb County
 - Dekalb County
- **Hawaii**
 - Honolulu
- **Illinois**
 - Rockford/Winnebago, Boone Counties
 - Waukegan/North Chicago/Lake County
 - Chicago
 - Cook County
- **Iowa**
 - Parts of Iowa Balance of State
- **Kansas**
 - Kansas City/Wyandotte County
- **Kentucky**
 - Louisville/Jefferson County
- **Louisiana**
 - Lafayette/Acadiana
 - Shreveport/Bossier/Northwest
 - New Orleans/Jefferson Parish
 - Baton Rouge
 - Alexandria/Central Louisiana CoC
- **Massachusetts**
 - Cape Cod Islands
 - Springfield/Holyoke/Chicopee/Westfield/Hampden County
- **Maryland**
 - Baltimore City
 - Montgomery County
- **Maine**
 - Statewide
- **Michigan**
 - Statewide
- **Minnesota**
 - Minneapolis/Hennepin County
 - Northwest Minnesota
 - Moorhead/West Central Minnesota
 - Southwest Minnesota
- **Missouri**
 - St. Louis County
 - St. Louis City
 - Joplin/Jasper, Newton Counties
 - Kansas City/Independence/Lee's Summit/Jackson County
 - Parts of Missouri Balance of State
- **Mississippi**
 - Jackson/Rankin, Madison Counties
- **North Carolina**
 - Gulf Port/Gulf Coast Regional
 - Winston Salem/Forsyth County
 - Asheville/Buncombe County
 - Greensboro/High Point
- **North Dakota**
 - Statewide
- **Nebraska**
 - Statewide
- **New Mexico**
 - Statewide
- **Nevada**
 - Las Vegas/Clark County
- **New York**
 - New York City
 - Yonkers/Mount Vernon/New Rochelle/Westchester County
- **Ohio**
 - Toledo/Lucas County
 - Canton/Massillon/Alliance/Stark County
 - Tulsa City & County/Broken Arrow
 - Oklahoma City
 - Norman/Cleveland County
- **Oklahoma**
 - Philadelphia
 - Lower Marion/Norristown/Abington/Montgomery County
 - Allentown/Northeast Pennsylvania
 - Lancaster City & County
 - Bristol/Bensalem/Bucks County
 - Pittsburgh/McKeesport/Penn Hills/Allegheny County
- **Rhode Island**
 - Statewide
- **South Carolina**
 - Charleston/Low Country
 - Columbia/Midlands
- **Tennessee**
 - Chattanooga/Southeast Tennessee
 - Memphis/Shelby County
 - Nashville/Davidson County
- **Texas**
 - San Antonio/Bexar County
 - Austin/Travis County
 - Dallas City & County/Irving
 - Fort Worth/Arlington/Tarrant County
 - El Paso City and County
 - Waco/McLennan County
 - Texas Balance of State
 - Amarillo
 - Wichita Falls/Wise, Palo Pinto, Wichita, Archer Counties
 - Bryan/College Station/Brazos Valley
 - Beaumont/Port Arthur/South East Texas
- **Utah**
 - Statewide
- **Virginia**
 - Richmond/Henrico, Chesterfield, Hanover Counties
 - Roanoke City & County/Salem
 - Virginia Beach
 - Portsmouth
 - Virginia Balance of State
 - Arlington County
- **Washington**
 - Seattle/King County
 - Spokane City & County
- **Wisconsin**
 - Statewide
- **West Virginia**
 - Statewide
- **Wyoming**
 - Wyoming Statewide is in the process of implementing

Posted to:

Request for Funds Releases

CoC (Continuum of Care) Collaborative NOFA Request for Funds

The CoC (Continuum of Care) Collaborative Application NOFA Request for Funds (RFF) can be submitted by active Dos Rios CoC members. Funds can be used for HMIS (Homeless Management Information System) or CES (Coordinated Entry System). Please send any questions by Wednesday November 3, 2021 to gccad@countyofglenn.net. Completed applications are due by Friday, November 5, 2021 to gccad@countyofglenn.net. Any documents received after the deadline will not be considered.

[2021 CoC Collaborative Application NOFA - RFF](#)

[Attachment B & Attachment C - Questionnaire](#)

ATTACHMENT	SIZE
Dos Rios Continuum of Care (CA-523) Ten Year Plan dated 07-01-2017	548.45 KB
Dos Rios Continuum of Care (CA-523) Strategic Plan 2018-2020	161.48 KB
2021 CoC Collaborative Application NOFA - RFF.pdf	431.34 KB
Attachment B & Attachment C - Questionnaire.docx	19.91 KB

<https://www.countyofglenn.net/dept/community-action/dos-rios-continuum-care-ca-523>

CA-523 did not reject
any applications.

CA-523 did not receive
any applications.