1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: MA-504 - Springfield/Hampden County CoC

1A-2. Collaborative Applicant Name: City of Springfield MA

1A-3. CoC Designation: UFA

1A-4. HMIS Lead: City of Springfield MA

FY2023 CoC Application	Page 1	09/26/2023
11	5	

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

- PHA Crosswalk; and

- Frequently Asked Questions

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.
	In the chart below for the period from May 1, 2022 to April 30, 2023:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

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

FY2023 CoC Application	Page 2	09/26/2023
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Applicant: Springfield/Chicopee/Holyoke/Westfield/Hampden CoC Project: MA-504 CoC Registration FY2023

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

By selecting "other" you must identify what "other" is.

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

FY2023 CoC ApplicationPage 309/26/2023
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1. In advance of its annual meetings, the CoC posts notice on its website and notice on the website of the Western Mass Network to End Homelessness that new members are welcome, and can join by indicating interest to the CoC administrator or by attending the meeting. The CoC's website indicates that CoC membership is open to all, and provides information about how to become a member, and that all meetings are open to the public.

2. The CoC posted notices and information on its website in an accessible PDF format. Meetings were held via Zoom and closed captioning is available. The CoC directly emailed and called organizations serving specific communities experiencing homelessness.

3. The CoC invited organizations serving specific communities experiencing homelessness to join the CoC and attend its meetings, including the Annual Meeting. Several of these organizations have leaders or staff who have been CoC Board members in the last year, including The Deborah Hunt Center (serving the Black community), New North Citizens Council (serving the Latino community), Gandara Center (serving the Latino community), and Arise for Social Justice (a member-led community organization dedicated to defending and advancing the rights of poor people). These groups have been actively engaged in our CoC's planning and implementation of changes to increase equity among the people we serve.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	
	Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;	
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;	
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

FY2023 CoC Application	Page 4	09/26/2023
------------------------	--------	------------

1. In coordination with the Western Massachusetts Network to End Homelessness (WMNEH), the CoC held regular (monthly, bi-monthly, or quarterly) population-specific open and publicly advertised meetings: Individuals, Unaccompanied Youth, Veterans, Families and Career Services. Advance notice of meetings were posted on the WMNEH website and sent to a large email distribution list, and meeting notes were posted on the WMNEH website. Meetings were attended by CoC leadership and multiple community stakeholders and provided a forum to discuss strategies to prevent and end homelessness.

Throughout the year, the CoC regularly received guidance from the Youth Action Board, through the participation of YAB members on the CoC's Board of Directors and the Youth and Young Adult Executive Committee, and through meetings with the YAB regarding identification of unmet needs, evaluation of programs, the PIT count, and updating the CoC's coordinated community plan to prevent and end youth homelessness.

In 2022, the CoC coordinated with the City of Springfield to both provide information and to solicit input used to develop the City's HOME-ARP Allocation Plan. This coordination included sponsoring a town hall meeting and soliciting written comments.

2. Most CoC and WMNEH meetings take place via zoom, and generally include a mixture of presentations and roundtable conversations. Any presentation materials are shared at the meeting and distributed to the public (emailed to participants and posted on the web.) YAB meetings are hybrid and include both presentations and general roundtable discussions. All meetings provide opportunity for comment and discussion by all attendees.

3. The CoC and WMNEH posted notices on their websites in an accessible PDF format. Meetings were held via Zoom or were hybrid and closed captioning was available.

4. In the past year, the CoC took action on the following items raised in public meetings: increased coordination of outreach to unsheltered individuals, including partnerships with agencies focused on overdose prevention; increased focus on the needs of medically complex homeless individuals (resulting in a new state-funded medical respite program); additional training opportunities for provider staff, and increased coordination with local housing authorities regarding mainstream housing resources.

1B-4.	Public Notification for Proposals from Organiz Funding.	zations Not Previously Awarded CoC F	Program
	NOFO Section V.B.1.a.(4)		
	Describe in the field below how your CoC noti	fied the public:	
1.	that your CoC will consider project application received CoC Program funding;	s from organizations that have not pre	viously
2.	about how project applicants must submit the	r project applications-the process;	
3.	about how your CoC would determine which p funding; and	project applications it would submit to H	IUD for
FY202	3 CoC Application	Page 5	09/26/2023

4. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.

(limit 2,500 characters)

1. On Aug. 3, 2023, the CoC publicly posted notice that it is accepting proposals for new and renewal projects to the websites of the CoC, the CoC lead (the City of Springfield), and the Western Massachusetts Network to End Homelessness; and emailed notice to a distribution list of organizations that are involved in the fields of housing and homelessness. The notice directed interested applicants to the posted Request for Proposals (RFP) document which provides detailed information about the opportunity and how to apply. The Notice and RFP state that the CoC competition is open to all eligible applicants and that the CoC is seeking applications for new projects.

2. The RFP explained how applications must be submitted (one part in esnaps and an on-line Part 2 application) and informed potential applicants that CoC staff will guide them through the use of esnaps, as well as the process for requesting access to and assistance with esnaps.

3. The RFP explaind that CoC uses a competition in which renewal, expansion and new projects are all evaluated and considered, and describes the process for evaluation and selection. Specifically, it states that all projects are scored and ranked according to published objective criteria which is made available in the RFP. The RFP states the Scoring and Ranking Committee is made up of CoC members who are not associated with any applicants and makes decisions on which projects to include in the CoC application.

4. The RFP was posted online in an accessible PDF format. A technical assistance session was held via Zoom; this session had capability for closed captioning.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.
	NOFO Section V.B.1.b.
	In the chart below:
1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or

2. select Nonexistent if the organization does not exist within your CoC's geographic area.

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

FY2023 CoC Application	Page 7	09/26/2023
------------------------	--------	------------

18.

1C-3.

1C-2. CoC Consultation with ESG Program Recipients.

NOFO Section V.B.1.b.

Ensuring Families are not Separated.

NOFO Section V.B.1.c.

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

(limit 2,500 characters)

1. The CoC provided input on community needs and funding priorities to the City of Springfield (the only ESG entitlement community in the CoC's boundaries) as part of the planning process for ESG funds and participated on application review committees for the ESG grants.

The CoC and the City have collaborated to create ESG written standards for use of ESG funds.

2. The CoC collaborated with the City of Springfield (ESG recipient) to create ESG performance standards and provides HMIS-generated Consolidated Annual Performance and Evaluation Reports (CAPER) to the City and State.

3. The CoC provides PIT and HIC data annually to the Consolidated Plan jurisdictions in its geography--Springfield, Holyoke, Chicopee and Westfield--by sending a written report and copy of the complete data set.

4. The CoC provides requested information to the four consolidated plan jurisdictions for annual Consolidated Plan updates. In addition, community development staff from each of the four consolidated plan jurisdictions participate on the CoC's Board of Directors, which receives regular data reports.

	Select yes or no in the chart below to indicate how your CoC ensures emergency sho transitional housing, and permanent housing (PSH and RRH) do not deny admission family members regardless of each family member's self-reported sexual orientation identity:	elter, or separate and gender
	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes

FY2023 CoC Application	Page 8	09/26/2023
------------------------	--------	------------

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.	No
Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	No

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

1C-4a. Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.

NOFO Section V.B.1.d.

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

(limit 2,500 characters)

The CoC Governance Charter provides a reserved seat on the Board of Directors for a member of the regional McKinney Vento Liaison Committee (made up of the McKinney Vento liaisons from the cities and towns of Hampden County). The CoC provides an annual written commitment to participate in regional monthly meetings of local homeless education liaisons.

As called for in the CoC's written coordinated community plan to prevent and end youth homelessness, the CoC has a staffed Homeless Provider-Education Provider workgroup that meets quarterly to share resources with the goals of: 1) assisting school staff in identifying homeless families and unaccompanied youth and providing referrals to resources, including referring unaccompanied youth to the CoC's youth housing resource hotline, and 2) ensuring that homeless children and youth are able to access education and education services. The Workgroup, chaired by Springfield Technical Community College, includes LEAs, the SEA, two local community colleges, JobCorps, and youth-serving organizations.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section V.B.1.d.	
	Describe in the field below written policies and procedures your CoC uses to inform individuals and families who become homeless of their eligibility for educational services.]
		-

FY2023 CoC Application	Page 9	09/26/2023
------------------------	--------	------------

CoC written policy requires CoC- and ESG-funded providers to ensure that homeless children and youth are enrolled in school or early childhood education and are connected to appropriate education-related services in the community. The policy requires that providers that serve families or youth must have a designated staff person for this purpose and must distribute materials to family households that describe the education rights of children experiencing homelessness.

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

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

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	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–Collaboration with Federally Funded Programs and Victim Service Providers.

NOFO Section V.B.1.e.

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

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

FY2023 CoC Application	Page 10	09/26/2023
------------------------	---------	------------

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
		1
	Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:	
1.	update CoC-wide policies; and	
	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.	

1. The CoC regularly collaborates with the two organizations in our geographic area that serve survivors of domestic violence--the YWCA of Western Massachusetts and Alianza DV Services. The Executive Directors of both DV agencies are members of the CoC Board of Directors and are involved with approval of all CoC policies and procedures in that role. In 2022, the CoC partnered with the YWCA, Alianza, and consultants from the national Safe Housing Alliance to update its written coordinated entry policies and procedures to improve the CoC's response to survivors of domestic violence.

2. The CoC sponsors training for all providers on understanding and implementing trauma-informed care principles and practices. The CoC encourages trauma-informed best practices through its annual CoC funding competition, in which it awards points to organizations that demonstrate that they used trauma-informed practices throughout their programs. The CoC has had DV and SA experts attend service provider meetings to discuss privacy and confidentiality issues, and rights under the Violence Against Women Act (VAWA).

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

FY2023 CoC Application	Page 11	09/26/2023
------------------------	---------	------------

1. The CoC provides annual training for project staff on safety and planning protocols in serving survivors of domestic violence. Most recently this training has been provided by the national Safe Housing Alliance and has included information about local resources, DV dynamics, how a survivor's risk analysis factors into decisions about staying or separating, and how staff can navigate their responsibilities to both members of the household with increased safety as the goal. Presenters provided tips on partnering with DV advocates and agencies.

2. The CoC provides annual training for coordinated entry staff on safety and planning protocols in serving survivors of domestic violence. The most recent training was provided by the National Alliance for Safe Housing and was titled "Addressing Survivor Safety and Confidentiality Within Coordinated Entry Systems." The training reviewed federal requirements for Coordinated Entry Systems (CES) related to serving domestic violence and sexual assault survivors; communicated the importance of safety planning when working with survivors of domestic and sexual violence; and outlined key best practices and core components of safety planning within the CES.

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

(limit 2,500 characters)

The CoC has worked with its two DV agencies to create a DV-specific coordinated entry system. The YWCA and Alianza receive CoC funding to operate the DV-specific system. These agencies also operate a CoC-funded TH-RRH program specific for DV survivors.

1. Survivors of domestic violence seeking coordinated entry are directed in the first instance to the DV coordinated entry system. This system specifically incorporates safety planning in the first contact and in each subsequent contact, to ensure that safety is considered and that safety plans are regularly updated as circumstances change. Survivors who access the general coordinated entry system are provided general information about safety planning and urged to speak with staff at the DV coordinated entry program for detailed planning support.

2. The DV coordinated entry project does not use HMIS, and its staff are wellversed in the confidentiality needs of survivors. Each DV provider maintains its own HMIS comparable database, and the two providers do not share data. The agencies have regular case conferencing meetings in which they discuss the needs of people seeking assistance and prioritize them for housing; at these meetings, survivors are not identified, and no identifying information is shared. The DV coordinated entry project can refer to non-DV housing resources without use of name of identifying information until the point that a match is made, when information is shared only with the housing provider.

FY2023 CoC Application	Page 12	09/26/2023
------------------------	---------	------------

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

1. The CoC collects point-in-time and annual data from the two domestic violence shelters in its geographic area, both of which use an HMIS comparable database to collect deidentified aggregate data. The CoC also produces reports from its HMIS to determine numbers of DV survivors served in non-DV programs at a point-in-time and annually.

2. To determine the amount of need for housing resources for survivors, the CoC combines the point-in-time count numbers of survivors in DV shelters, and HMIS-reported numbers of DV survivors in emergency shelter and transitional housing. The CoC has surveyed DV agencies to identify and understand the housing needs of survivors and has used those survey results to create an estimate of the number of rapid rehousing and permanent supportive housing units needed for the number of survivors identified. The CoC has used data about the number of survivors currently served in existing RRH and PSH units to identify the amount of need that can be met by existing programs. Finally, after taking into account how much housing need there is and how much can be met through turnover, the CoC has estimated the amount of need for new RRH and PSH units targeted to survivors.

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

FY2023 CoC Application	Page 13	09/26/2023
------------------------	---------	------------

1. The CoC 's policies and procedures include an emergency transfer plan. The CoC's Emergency Transfer Plan provides that a tenant in a CoC program who is the victim of domestic violence, dating violence, sexual assault or stalking and requests a transfer will be transferred within the program or outside the program to the next available CoC-funded unit for which the person or household is eligible under HUD's CoC rules, without needing to meet other eligibility or preference requirements. The eligible person or family retains their original homeless or chronically homeless status for the purposes of the transfer. All clients are empowered to exercise choice in selection of housing, and clients may refuse housing offers without providing a reason and be offered additional housing opportunities until they are offered one that meets their needs. The CoC permits transfers between programs, and DV transfers are prioritized without the housing provider knowing the reason for the transfer.

Participants are provided written notice of the policy and how it works when they begin program participation, and annually throughout their tenancy.

2. The CoC's emergency transfer plan process is for the survivor to notify their housing provider or to call the specialized DV coordinated entry provider to identify the need for an emergency transfer.

3. When a provider or a DV coordinated entry specialist is notified of the need for an emergency, they contact CoC staff. CoC staff coordinate with all programs and the coordinated entry system to identify the next available unit.

Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
NOFO Section V.B.1.e.	
Describe in the field below how your CoC:	

		Describe in the field below how your coc.
		ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and
		proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

FY2023 CoC Application	Page 14	09/26/2023
------------------------	---------	------------

1. The CoC has a targeted coordinated entry project that specifically serves survivors of domestic violence and is operated by the two agencies in our geographic area that serve survivors. The DV CE projects assess the needs of survivors and, depending on participant need and choice, can refer to DV-specific TH, TH-RRH or RRH, or to any of the CoC's RRH or PSH programs that are open to all populations. The mechanics of the referral is for the DV CE to communicate with the standard CE system, which then adds the DV survivor to its dynamic, prioritized referral list for available resources.

2. The CoC asked domestic violence providers to identify and address barriers faced by survivors. As a result of this coordination, the CoC prioritized applications by DV providers in the CoC competition, which has led to creation of a DV Coordinated Entry program, and a DV TH-RRH program. While these programs are designed to address barriers, the DV providers also provide regular training to other CoC providers regarding the needs of DV survivors. The close coordination has resulted in regular trauma-informed care training and identification of the need for ongoing safety planning for survivors.

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

(limit 2,500 characters)

1. The CoC has worked closely with the domestic violence provider agencies YWCA of Western Massachusetts and Alianza DV Services to create a DV coordinated entry project and a DV TH-RRH project. That work has included extensive planning meetings and work with the Safe Housing Alliance. It has incorporated the work of survivors with lived experience in several ways. The agencies directly sought input from survivors through surveys and focus groups. A survivor who chose to talk about her experience provided a presentation to planners that illustrated the challenges of our existing system and she offered ideas for improvement. Both agencies employ survivors with lived experience and these survivors were a key part of the planning team.

2. Survivors were able to provide expertise through anonymous surveys or small focus groups, where their participation was kept confidential. The survivor who was most involved was compensated for her time and received coaching and support to prepare public remarks.

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

FY2023 CoC Application	Page 15	09/26/2023
------------------------	---------	------------

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

1C-6a.	Anti-Discrimination Policy–Updating Policies–Assisting Providers–Evaluating Compliance–Addressing Noncompliance.	
	NOFO Section V.B.1.f.	
	Describe in the field below:	
1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC- wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;	
2.	how your CoC assisted housing and services providers in developing project-level anti- discrimination policies that are consistent with the CoC-wide anti-discrimination policy;	
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and	
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.	

1. The CoC's Board of Directors reviews and updates the CoC's antidiscrimination policies. The Board includes agencies that serve high numbers of LGBTQ+ persons, members of our Youth Action Board (which have a higher proportion of members who are LGBTQ+ than our overall homeless population), and Board members who are LGBTQ+.

2. The CoC has sponsored training for housing and service providers regarding the development of agency-specific ant-discrimination policies that address the needs of LGBTQ+ individuals and families.

3. The CoC reviews agencies anti-discrimination policies as part of its annual monitoring of programs, and also reviews the policies as part of the annual CoC competition.

4. Failure to have an anti-discrimination policy that addresses LGBTQ+ would require corrective action requiring an agency to develop and implement a policy.

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

FY2023 CoC Application	Page 16	09/26/2023
------------------------	---------	------------

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Springfield Housing Authority	15%	Yes-HCV	No
Holyoke Housing Authority	8%	Yes-HCV	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.
	NOFO Section V.B.1.g.
	Describe in the field below:
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference–if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

1. The CoC has met with and requested that the two largest housing authorities -- the Springfield Housing Authority and the Holyoke Housing Authority--create homeless admission preferences. Both local housing authorities have worked with the CoC to create limited admission preferences. SHA has created a project-based section 8 program specifically for chronically homeless households referred by the CoC's coordinated entry system, and the Holyoke Housing Authority has used its Moving-to-Work designation to enable it to provide an annual pool of mobile section 8 vouchers which are made available to chronically homeless households referred by the CoC's coordinated entry system.

2. Not applicable.

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

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

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

FY2023 CoC Application	Page 17	09/26/2023
------------------------	---------	------------

1C-7c. Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.

NOFO Section V.B.1.g.

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

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

1C-7d. Su	ubmitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
NC	IOFO Section V.B.1.g.	

Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
	Program Funding Source
Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	HUD SNOFO HCVs

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

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

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

FY2023 CoC Application	Page 18	09/26/2023
------------------------	---------	------------

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

FY2023 CoC Application	Page 19	09/26/2023
------------------------	---------	------------

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

Name of PHA: Springfield Housing Authority

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

Name of PHA: MA Department of Housing and Urban Development

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

Name of PHA: Holyoke Housing Authority

FY2023 CoC Application Page	20 09/26/2023
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1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	12
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	12
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

FY2023 CoC Application	Page 21	09/26/2023
1 1	5	

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

1. The CoC uses a written Housing First evaluation form as part of project monitoring for every CoC program that indicates that it uses a Housing First approach. The CoC also evaluates every project on using a Housing First approach in two additional ways. 1) Throughout the year the CoC observes whether the project rejects any referrals from coordinated entry and monitors the speed of progress toward housing placements in weekly case conferencing meetings led by CoC staff. 2) At the time of the CoC application, the CoC requires applicants to respond to supplemental questions about admission policies, service requirements, and termination policies in their programs in order to evaluate fidelity to the Housing First model.

2. The CoC written Housing First evaluation form checks against: required preconditions to housing, termination policies (including no termination for substance use by itself), a clear and communicated process for requesting reasonable accommodations, tenant-driven housing and service goals, no requirements for services, emphasis on services offered are for engagement and problem-solving, policies informed by harm reduction philosophy, flexibility regarding rent payment, including assistance in making arrangements for a representative payee, and assistance in accessing alternative housing and services if necessary. The evaluation also reviews a programs' housing retention rate--that is, the percentage of participants who maintain housing or move to another permanent housing setting.

3. The CoC uses a written Housing First evaluation form as part of project monitoring for every CoC program that indicates that it uses a Housing First approach. The form identifies any areas in which a program's practices may not operate in fidelity to a Housihng First philosophy, and requires the program to make changes to any identified areas.

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

FY2023 CoC Application	Page 22	09/26/2023
------------------------	---------	------------

1. The CoC's street outreach is carried out regularly by several programs. The Center for Human Development provides daily street outreach throughout the CoC's geographic area by a team of six. This team provides outreach in outdoor locations such as riverfronts and parks; this team coordinates with local police departments, who identify encampments and request outreach to those locations. The PATH provider, Eliot Community Human Services, conducts daily outreach (weekdays) at meal sites, methadone clinics, a needle exchange, and drop-in centers. The CoC's youth/young adult providers conduct daily weekday outreach at places and organizations likely to be visited by homeless youth and young adults--including drop-in centers, laundromats, libraries, and bus stations.

Each of these outreach programs conduct assessments and enter unsheltered homeless people into HMIS and the CoC's coordinated entry system.

2. The CoC's street outreach covers 100 percent of the CoC's geographic area.

3. The CoC provides daily outreach on weekdays. All regular sites are visited at least once every two to four weeks.

4. The CoC's outreach teams go out to sites where unsheltered people are, initiating conversations with them at encampments, meal sites, methadone clinics, a needle exchange site, and drop-in locations. The teams incorporate staff who are skilled at engaging people experiencing homelessness, including peer outreach workers, people in the recovery community, staff who are Spanish-speaking, and youth outreach workers. Street outreach is coordinated with the use of hotel rooms (non-congregate shelter), which is offered to unsheltered individuals who will not enter shelter as a strategy to engage those individuals.

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

NOFO Section V.B.1.k.

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		

FY2023 CoC Application	Page 23	09/26/2023
------------------------	---------	------------

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

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	188	440

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

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF-Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

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

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

FY2023 CoC Application	Page 24	09/26/2023
------------------------	---------	------------

1. The CoC provides an annual 'Lunch and Learn' training series, which presents one-hour trainings on Zoom during the lunch hour. Presentations include SSI/SSDI, SNAPS, TANF, accessing substance use treatment, and employment programs. The presentations are widely advertised and available to all CoC providers.

2. The CoC leads regular (weekly or biweekly, depending on population) multiagency case-conferencing meetings where homeless individuals and families are discussed by name to identify needs, resources, and strategies to connect them with housing and services. Health Care for the Homeless and clinical staff from shelter, outreach, and behavioral health care providers attend these meetings, and assist in identifying and facilitating program referrals, including for mental health and substance abuse treatment. When a particularly complex case is identified during a case conferencing meeting, the CoC convenes a separate meeting of all agencies involved with the particular individual or family to create a personalized multi-agency plan to assist the person to connect to appropriate healthcare services. The Health Care for the Homeless program provides health services on site at many program locations and will visit individuals in unsheltered locations and in their housing units. The health workers both provide health care and coordinate referrals to and access to other providers by arranging appointments, providing transportation, and other assistance to support use of medical benefits.

3. CoC policy requires all CoC-funded providers to have staff who have completed SOAR training.

1D-7. Increasing Capacity for Non-Congregate Sheltering.

NOFO Section V.B.1.n.

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

(limit 2,500 characters)

The CoC provider Center for Human Development provides non-congregate shelter in hotel rooms using state funds. The rooms are available to people who cannot or will not go to congregate shelter, including people with medical issues or who refuse congregate shelter. CHD applied for and received additional state funds in 2023 to expand this capacity.

Providers are exploring possible long-term locations for non-congregate shelter. The City of Springfield has identified acquisition/development of non-congregate shelter as a priority for HOME-ARP funding and has included funds in its HOME-ARP Allocation Plan for this purpose.

ID-8.	Partnerships with Public Health Agencies–Co Infectious Diseases.	Spread of	
	NOFO Section V.B.1.o.		
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:		
1. develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and			ks; and
FY2023 CoC Application Page 25 09/26			09/26/2023

2. prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)

1. The CoC encourages providers to stay connected to state communications regarding infectious disease public health policies. The state of Massachusetts has provided excellent and regular communication and policy guidance to emergency shelter and congregate living facilities, and has established policies responsive to outbreaks.

2. The CoC worked closely with local public health agencies early in the COVID pandemic to create local isolation and quarantine sites. As time went on, the state of Massachusetts created regional isolation sites and the CoC assisted in coordinating getting information out about the sites and how to access them. As our local shelters have had occasional outbreaks that could not be managed by existing sites, the CoC played a role in coordination of pop-up short-term isolation sites. The CoC received advice about response to particularized outbreaks from Baystate Medical Center in Springfield. The CoC continues to coordinate with local public health agencies to prevent outbreaks of COVID and other infectious diseases.

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

(limit 2,500 characters)

1. The CoC shares information from the Center for Disease Control with providers and encourages providers to stay connected so as to receive the extensive homeless system information shared by the state of Massachusetts.

2. The Springfield Department of Health and Human Services is a Health Service for the Homelessness grant recipient (and is represented on the CoC's Board of Directors) and uses the HSH program extensively to provide information, PPE, and access to vaccinations to homeless people, outreach workers, and shelters.

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

FY2023 CoC Application	Page 26	09/26/2023
------------------------	---------	------------

1. The CoC's coordinated entry system covers 100% of our CoC's geographic area. Assessment is available at all shelters and through outreach teams that visit soup kitchens, drop-in centers, methadone clinics, encampments, and other locations where unsheltered people are.

2. The CoC uses a standardized assessment process that includes three components: 1) length of homelessness, as indicated in HMIS (or through other written verification if, for example, a person has previous homelessness in a different geographic area); 2) a standardized tool to assess housing/service needs (The CoC has been using the VI-SPDAT, the Family VI-SPDAT, the TAY-VISPDAT, and a locally-created DV assessment tool); and 3) regular case conferencing meetings where there is the opportunity to identify factors not accounted for in the VI-SPDAT self-assessment (for example, a clinician's observations of symptoms of mental illness where the individual does not report mental illness.)

3. In response to concerns that the VI-SPDAT tools are not trauma-informed and do not yield equitable outcomes in referrals to programs, the CoC has begun to begin experimenting with alternate tools and processes and plan to complete a shift to a new coordinated entry assessment process in 2023-2024.

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

FY2023 CoC Application	Page 27	09/26/2023
------------------------	---------	------------

1. The CoC uses proactive outreach and case management staff in shelters to engage homeless people who are not seeking housing assistance. Coordinated entry assessment takes place in many locations, including encampments, dropin sites, and other locations where unsheltered people are located. Following assessment, homeless people are added to our community's byname list, which is reviewed at weekly multi-agency case conferencing meetings. At the meeting, a housing navigator is assigned to each person on the list. The role of the navigator is to assist in collection of necessary documentation (birth certificate, social security card, identification). Regular group review of the byname list ensures that no one drops off the CoCs radar, and we keep working to engage each person until they are housed.

2. The CoC prioritizes those with the longest histories of homelessness and the highest service needs for housing. It uses a scoring system that weights length of homelessness and then incorporates severity of service needs.

3. The CoC's by-name list is dynamic, using these factors and scores for length of homelessness and severity of service needs. As housing openings come available, they are offered to the person who currently has the longest history and highest need. This enables the most vulnerable to be offered housing in a timely manner. If a person declines a housing offer, the individual remains on the by-name list in the same position, and is offered the next available unit.

4. The CoC uses the following strategies to reduce the burdens on people using coordinated entry:

--using a "no-wrong door" and in-the-field approach to coordinated entry, making it easy to access

--assigning housing navigators to people experiencing long-term homelessness to assist them in gathering documentation and otherwise navigating the process --using a coordinated by-name list and incorporating assessments into our data system, so that people do not get repeatedly assessed, and also so that people do not get inadvertently overlooked

--using a regular multi-agency case conferencing meeting to keep all agencies/caseworkers connected with a single individual apprised of status, location, and other developments regarding the person.

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

FY2023 CoC Application	Page 28	09/26/2023
------------------------	---------	------------

1. The CoC uses a "no wrong door" approach to coordinated entry, where multiple agencies assess people for coordinated entry and assist households to be added to our CoC's by-name list and to become document-ready to enable quick referral to housing openings. The CoC uses proactive outreach and case management staff in shelters to engage homeless people in coordinated entry. The CoC focuses on those who are least likely to seek assistance by seeking out and initiating coordinated entry conversations with people who are not seeking housing assistance. Coordinated entry assessment takes place in many locations, including encampments, drop-in sites, and other locations where unsheltered people are located. The coordinated entry system incorporates peer outreach staff and staff who speak Spanish.

2. Coordinated entry staff and housing navigators throughout our system are trained on fair housing and civil rights laws and provide this information to participants. Our CoC's coordinated entry work incorporates regular multi-agency case conferencing meetings where there is discussion and strategizing about barriers faced by participants; these meetings include frequent conversation about potential fair housing and civil rights violations and recommendations for resources to assist in enforcing participant rights, with recommendations for specific referrals. Coordinated entry staff and housing navigators inform participants of resources and remedies and assist them in accessing them.

3. Information that arises in multi-agency coordinated entry meetings, or which otherwise comes to the attention of the CoC, is shared with the CoC's Consolidated Plan jurisdictions. The CoC includes 4 jurisdictions with Consolidated Plans, each of which is represented on the CoC's Board of Directors, and the largest Consolidated Plan community, Springfield, serves as the lead for the CoC. These close relationships encourage regular sharing of information about fair housing and civil rights issues. In addition, the jurisdictions invite participation from the CoC in their Consolidated Planning and Equity Planning.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2	Enter the date your CoC conducted its latest assessment for racial disparities.	11/12/2021

1D-10a.	Process for Analyzing Racial Disparities–Iden Homeless Assistance.	Outcomes of	
	NOFO Section V.B.1.q.		
	Describe in the field below:		
1.	your CoC's process for analyzing whether any outcomes of homeless assistance; and	<i>r</i> racial disparities are present in the p	rovision or
FY2023 CoC Application Page 29 09/2			09/26/2023

2. what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1. Every two years the CoC updates its data review of racial equity factors and compares this to previous analyses. The CoC presents this data review and analysis at its Annual Meeting, held each year in November. The factors reviewed are:

--comparison by race and ethnicity of people experiencing homelessness as compared to their rates in the overall population and in the population of very low-income people

--comparison by race and ethnicity of rates at which people are successfully housed

--comparison by race and ethnicity of length of stay in homelessness --comparison by race and ethnicity of returns to homelessness after exit to a

permanent housing destination

--comparison by race and ethnicity of rates of return homelessness (vs first-time homelessness)

2. The CoC's analysis revealed:

--Blacks and Hispanics experience disproportionate rates of homelessness in our geographic area. The number of indigenous people in our population is so small that there is insufficient data to determine rates of homelessness --The percentages of Blacks (53%) and Hispanics (52%) who exit homelessness to permanent housing is higher than the percent of non-Hispanic whites (38%) who exit to permanent housing. However, the average length of homelessness is higher for Blacks (344 days) and Hispanics (335 days) than it is for non-Hispanic whites (268 days). (Note that average stays in

homelessness in Massachusetts are long due to the state's large family shelter system which places most families in apartments for shelter and has very long stays.)

--Blacks have a higher rate of returns to homelessness after exit to permanent housing (13%) than non-Hispanic whites (11%) or Hispanics (9%)

--The rates of return homelessness (vs first-time homelessness) are higher for Blacks (34%) and Hispanics (34%) than for non-Hispanic whites (28%)

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	1D-10b.	Implemented Strategies that Address Racial Disparities.	
		NOFO Section V.B.1.q.	
		Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.	
1.	The CoC's board	and decisionmaking bodies are representative of the population served in the CoC.	No
2.	The CoC has ider population served	ntified steps it will take to help the CoC board and decisionmaking bodies better reflect the I in the CoC.	Yes
3.	The CoC is expar	nding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has con	nmunication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is trainir of racism and hor	ng staff working in the homeless services sector to better understand racism and the intersection melessness.	Yes
~	The CoC is estab	lishing professional development opportunities to identify and invest in emerging leaders of d ethnicities in the homelessness sector.	No

FY2023 CoC Application	Page 30	09/26/2023
------------------------	---------	------------

7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	No
	Other:(limit 500 characters)	
12.		

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

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

FY2023 CoC Application	Page 31	09/26/2023
------------------------	---------	------------

The CoC and homeless providers have taken the following steps: --Training for CoC and providers, including: understanding racism and implicit bias, understanding the disproportionate impact of homelessness on BIPOC, analyzing system- and program-level data to see disparate impact, reviewing policies and procedures to identify areas to improve in order to promote equity, and developing a diverse organization --Updating the CoC Governance Charter to reflect values and goals of racial equity --Convened a CoC workgroup that created a racial equity action plan --Provided racial equity training to our Youth Action Board and created a YAB workgroup to identify racial disparities in our youth system and strategies to address disparities --Reviewed data and created prioritization rules for distribution of Emergency Housing Vouchers that were designed to ensure that populations disproportionately impacted by homelessness would be more likely to be issued vouchers --Have initiated a process (ongoing) to redesign components of our coordinated entry system, including design of a new assessment tool --increased the emphasis on racial equity in the annual local CoC competition. including scoring programs on the concrete actions they are taking to address racial disparities, and the degree to which their Board and leadership reflect the racial and ethnic diversity of the homeless population in our area --provided program-level data to subrecipients on serving and outcomes for BIPOC, so they could use this for self-analysis and improvement Providers have additionally taken steps that include: --prioritizing bilingual staff (Spanish/English) and ensuring that translation is available for all languages --providing cultural humility training to staff

--hiring staff from communities served, including those with lived experience of homelessness

--using communication materials and artwork inclusive of underrepresented populations

--implemented policies that ensure more equitable compensation and benefits for its employees

--created Diversity, Equity and Inclusion plans for their organizations --increasing focus on housing placement in areas of opportunity

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

	Describe in the field below:
1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and
2.	the tools your CoC uses.

FY2023 CoC Application	Page 32	09/26/2023
------------------------	---------	------------

At the end of each fiscal year the CoC updates its data review of racial equity factors, and compares this to previous years' data. The CoC presents this data review and analysis at its Annual Meeting, held each year in November.

The factors reviewed annually are:

--comparison by race and ethnicity of people experiencing homelessness as compared to their rates in the overall population and in the population of very low-income people

--comparison by race and ethnicity of rates at which people are successfully housed

--comparison by race and ethnicity of length of stay in homelessness

--comparison by race and ethnicity of returns to homelessness after exit to a permanent housing destination

--comparison by race and ethnicity of rates of return homelessness (vs first-time homelessness)

 1D-11.
 Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC's Outreach Efforts.

 NOFO Section V.B.1.r.

Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.

(limit 2,500 characters)

The CoC has a well-established and active Youth Action Board, made up of young adults who have lived experience of homelessness. The CoC provides staff support to this group. The YAB and the YAB staff member conduct outreach for new members through use of social media announcements and flyers. The YAB also attracts new members through word-of-mouth--both through youth they meet themselves and also through staff at youth-serving programs telling participants about the YAB. One of our CoC providers runs a youth drop-in center, and this location has been central to youth-directed outreach for the YAB. The YAB has two designated seats on the CoC's Board of Directors and have multiple members on the YHDP Executive Committee.

The CoC Board of Directors also has a non-youth member with lived experience who has been very involved in decision-making, including as an active member of the CoC competition scoring and ranking committee. In 2022, the CoC began building a network of more people with lived experience to increase the involvement of this population in all aspects of CoC decision-making. The CoC initiated this process through a series of focus groups with people with lived experience, who have been recruited through flyers and by outreach workers, drop-in centers, and other providers. Through the focus groups the CoC has been identifying individuals who are interested in being more involved, with the goal of establishing a Lived Experience Committee which will be part of the CoC's decision-making structure.

In order to assist people with lived experience to participate in these opportunities, the CoC provides transportation and a stipend for participation, as well as offering food at meetings.

1D-11a. Active CoC Participation of Individuals with Lived Experience of Homelessness.

NOFO Section V.B.1.r.

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	22	4
2.	Participate on CoC committees, subcommittees, or workgroups.	65	13
3.	Included in the development or revision of your CoC's local competition rating factors.	3	0
4.	Included in the development or revision of your CoC's coordinated entry process.	0	0

 1D-11b.
 Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.

 NOFO Section V.B.1.r.

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

(limit 2,500 characters)

The CoC provides both professional development and employment opportunities to young adults with lived experience of homelessness. The Youth Action Board (YAB) has five part-time paid executive team members, who are all members with lived experience. YAB meetings, which have youth-led agendas and activities, have in the last year included training/coaching on legislative advocacy, financial literacy, CPR/First Aid, housing, self-care, and healthy eating and SNAP benefits. In previous years, YAB members have prepared and presented on topics and brought in experts on these topics--for example, domestic violence, substance use, and career exploration and coaching.

A number of our CoC organizations have staff with lived experience of homelessness. Many of them prioritize this experience when hiring.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.
	NOFO Section V.B.1.r.
	Describe in the field below:
1.	how your CoC routinely gathers feedback from people experiencing homelessness;

FY2023 CoC Application	Page 34	09/26/2023

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

1. and 2. The CoC routinely gathers feedback by 1) meeting with the Youth Action Board to request feedback about various topics; and 2) holding focus/discussion groups with people with lived experience of homelessness and participants in CoC and ESG programs.

3. As a result of feedback, the CoC has:

--provided extensive trauma-informed care training to providers --required providers to plan for barriers experienced by people seeking services--most critically, lack of transportation --required providers to address how they consider neighborhood safety and housing unit conditions as part of their approval process for housing units

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

FY2023 CoC Application	Page 35	09/26/2023
------------------------	---------	------------

1. The CoC participates in the Pioneer Valley Regional Housing Committee, which is convened by the Pioneer Valley Planning Commission (PVPC) and is an outgrowth of the community's 2014 Regional Housing Plan. The housing plan specifically pointed to land use policies that inhibit housing development, including not allowing multi-family development and using large minimum lot sizes. The strategies being used to support land use reform are education and technical assistance to communities using these barriers, combined with a legislative advocacy strategy that supports smart growth and other inclusive growth incentives at the state level. The CoC provides support to the statewide advocacy on these issues.

2. The CoC is a member of the Supportive Housing Pipeline Coalition, convened by the United Way of Massachusetts Bay, Citizens Housing and Planning Association (CHAPA), and Massachusetts Housing and Shelter Alliance (MHSA). The goal of the Coalition is to convene key leaders and stakeholders across all relevant systems and sectors to develop and advance a unified agenda for creating the Permanent Supportive Housing (PSH) needed to address chronic and high need homelessness in MA. In the past year the Coalition developed a policy agenda. Coalition leaders, including the Coc's administrator, met with the Massachusetts new Secretary of Housing and Livable Communities to advance the agenda. While the primary agenda goal is state commitment to creation of 4,000 supportive housing units by 2027 and a total of 10,000 new supportive housing units by 2030, and state commitment of the resources needed to meet these goals, the Coalition is also asking the state to encourage municipalities to allow PSH development by-right and to ease the community approval and permitting process.

FY2023 CoC Application	Page 36	09/26/2023
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1E. Project Capacity, Review, and Ranking–Local Competition

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC-meaning the date your CoC published the deadline.	08/03/2023
	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition-meaning the date your CoC published the deadline.	08/03/2023

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

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

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

FY2023 CoC Application	Page 37	09/26/2023
------------------------	---------	------------

Applicant: Springfield/Chicopee/Holyoke/Westfield/Hampden CoC Project: MA-504 CoC Registration FY2023

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

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

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen. Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	13
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.
	NOFO Section V.B.2.d.
	Describe in the field below:
1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
-	

how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and	
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.	

FY2023 CoC Application	Page 38	09/26/2023
------------------------	---------	------------

1. The CoC collects data on each program annually to create a program scorecard that shows the program outcomes and compares them to CoC performance goals for each measure. To understand success in permanently housing people, the CoC examines HMIS data on the number of people housed and the percentage of people who maintain their housing or exit to another permanent housing location.

2. The CoC was unable to use the measure of how long it takes programs to house people in permanent housing because the CoC does not have reliable data on this measure. We have recognized that many programs have not been entering participants into HMIS until the date they are housed. We are now focusing on training all providers to enter participants at the time they are accepted into a program, and then update the record when the household moves into housing. We expect to be able to use this measure in future competitions.

3. The CoC recognizes that programs that serve the hardest to serve populations may not score as well as other programs on measures of rapid placement in housing and ability to maintain permanent housing. The CoC used HMIS data demonstrating the actual population served to identify projects which serve a higher-than-average percentage of the following populations in the most recent fiscal year: substance use disorder, serious mental illness, homeless for over a year, and with a history of domestic violence.

4. The CoC provided additional points to projects that served above the CoC average for the identified populations. Renewal and expansion projects were provided 3 points per higher-than-average population. New projects were provided 2 points per population.

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

FY2023 CoC Application	Page 39	09/26/2023
------------------------	---------	------------

1. Blacks and Latinos are over-represented in our CoC's homeless population. Blacks make up 11.5% of our overall population and make up 24.8% of the homeless population in our CoC's geographic area. Latinos make up 27.7% of our overall population and 48.0% of our homeless population.

The CoC reviewed its draft scoring tool with the racial equity committee of the Western Massachusetts Network to End Homelessness (Network), and with the CoC's Youth Action Board (YAB); both of these groups are made up predominantly of Black and Latino individuals. This year these reviews led to inclusion of specific questions about language assistance, transportation support, and how programs consider and prioritize suitable housing location and unit conditions in identifying or assisting participants to identify housing units.

2. The CoC's competition review committee, which created the scoring tool, scored and ranked applications, and made final funding decisions, was made up of 8 people. Three (36%) of the committee members are Black, one (13%) is Latino, one 13% is Asian, and three (36%) are white. Overall 50% of committee members are of races/ethnicities that are overrepresented in our CoC's homeless population.

3. One of the scored questions required project applicants to identify barriers to participation by BIPOC, the actions the project has taken to overcome those barriers, and actions that are planned in the next 12 months to overcome those barriers. This question was worth 8 points (out of 100) and was one of five questions that assessed projects on factors related to racial equity.

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

FY2023 CoC Application	Page 40	09/26/2023
------------------------	---------	------------

1. The CoC holds a single competition in which it scores renewal, expansion and new projects and ranks them. If there are new projects that score above existing projects, the new project is placed in the rank at the appropriate place, and other projects move down. If a project is moved down below the funding cut-off, it is reallocated.

2. This year's competition attracted two expansion projects, but the nature of these projects did not force reallocation. One expansion project was placed in Tier 1, which moved a renewal project down so that it will need to receive Bonus funds to secure full funding. The other expansion project is a DV Bonus project application and did not score highly enough to be placed above renewal projects.

3. The CoC did not reallocate any projects this year. The CoC did reduce one project for strategic ranking reasons, and because the project did not spend out its entire grant last year.

4. This year, the CoC received two applications for expansion grants, and no applications for new projects. An expansion grant for new PSH units scored high, and was placed in Tier 1, which could have forced a renewal project out of the competition. However, the application was for a relatively small amount (\$113,652). The CoC did not want to reallocate from the lowest scoring project because it is the only project that provides rapid rehousing to adults and families, and the CoC considers this project to be a high priority for funding. Instead, the CoC decided to reduce a large project that had been unable to spend out its full grant last year. The second expansion project received by the CoC this year is a TH-RRH expansion project for survivors of domestic violence, and the CoC made the decision to submit this for a DV Bonus rather than reallocating funds from an existing project.

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

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023? No

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

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes

FY2023 CoC Application	Page 41	09/26/2023
------------------------	---------	------------

4. If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.

1E-5a.	Projects Accepted-Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

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

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

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or	09/25/2023
	partner's website—which included: 1. the CoC Application; and	
	2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	

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

FY2023 CoC ApplicationPage 4209/26/2023

Enter the date your CoC notified community members and key stakeholders that the CoCapproved Consolidated Application was posted on your CoC's website or partner's website. 09/25/2023

FY2023 CoC Application	Page 43	09/26/2023
------------------------	---------	------------

2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Enter the name of the HMIS Vendor your CoC is currently using.	Green River Data Analysis
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

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

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

	In the field below:			
1.	1. describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;			
2. state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database–compliant with the FY 2022 HMIS Data Standards; and				
FY2023 CoC Application		Page 44	09/	/26/2023

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

(limit 2,500 characters)

1. The CoC has coordinated with the two DV housing and services providers in its geographic area regarding meeting HUD's comparable database requirements. The CoC has informed the two providers of the requirements of HMIS and strategized with the providers about how they may comply. Both providers have applied for and been awarded CoC DV Bonus funds, and the CoC made clear that the providers would need to have HMIS comparable databases in order to receive CoC funding.

2. The two DV housing and service providers in our CoC are the YWCA of Western Massachusetts and Alianza DV Services. The YWCA is using a HUDcompliant comparable database, after purchasing the compliant Foothold AWARDS system in 2021. Alianza, a small agency, is using EmpowerDB, which currently is able to produce data reports the CoC needs, including unduplicated PIT counts, the HIC, and program APRs. The CoC is continuing to monitor HUD requirements and EmpowerDB capabilities to ensure that this provider is able to meet its data collection and reporting requirements.

3. The CoC believes that it is compliant with the 2022 HMIS Data Standards. The only potential compliance issue is the use by DV provider Alianza DV Serices of EmpowerDB, but we believe that we are considered in compliance because that provider is able to meet its data collection and reporting requirements. The question about compliance is because we are aware that EmpowerDB is unable to produce a Longitudinal System Analysis (LSA) report.

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

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	2,523	85	2,496	102.38%
2. Safe Haven (SH) beds	8	0	8	100.00%
3. Transitional Housing (TH) beds	135	51	84	100.00%
4. Rapid Re-Housing (RRH) beds	440	0	157	35.68%
5. Permanent Supportive Housing (PSH) beds	1,008	0	1,008	100.00%
6. Other Permanent Housing (OPH) beds	312	0	159	50.96%

2A-5a.	Partial Credit for Bed Coverage Rates at or Be	elow 84.99 for Any Project Type in Qu	estion 2A-5.
	NOFO Section V.B.3.c.		
	For each project type with a bed coverage rate describe:	e that is at or below 84.99 percent in o	question 2A-5,

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

2. how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1. RRH beds: Massachusetts uses state funds to provide a large rapid rehousing program for families. Although data for the program is collected in HMIS, the program is centralized and the state is unable to provide the data to CoCs in the state. The CoC will continue to advocate in the upcoming year for the state to code the data for CoCs and share the data.

OPH beds: There are two OPH projects that do not contribute HMIS. The first is the same entity that does not contribute HMIS for its TH project. The strategy for the TH and OPH projects is the same: renew the CoC's invitation to the agency with the offer to make HMIS available at no cost and with full training and support. The second project has begun contributing HMIS data but did so after this year's HIC.

2. The CoC's coordinator, Geraldine McCafferty, will undertake the outreach and advocacy described in number 1 above.

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

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 yes p.m. EST?

FY2023 CoC Application	Page 46	09/26/2023
------------------------	---------	------------

01/25/2023

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Enter the date your CoC conducted its 2022 DIT count
Enter the date your CoC conducted its 2023 PIT count.

2B-2.	PIT Count Data-HDX Submission Date.	
	NOFO Section V.B.4.a	

E	inter the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023	

2B-3. F	PIT Count-Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
٦	NOFO Section V.B.4.b.	

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

FY2023 CoC Application	Page 47	09/26/2023
------------------------	---------	------------

1. CoC staff requested guidance and assistance from youth providers during the planning for the 2022 PIT Count in meetings of the YHDP Executive Committee and the Western Mass Network to End Homelessness Youth Committee. CoC staff worked with youth providers during the count to conduct outreach to places where they expected to find homeless youth. The CoC provided a two-week period following the date of the count where providers asked youth where they had stayed on the night of the count. During the two-week period, providers conducted frequent outreach. Youth providers held PIT count events targeting youth and young adults.

2. CoC staff met with the Youth Action Board for guidance and assistance in planning for the 2022 PIT Count. YAB members provided information about the locations and times of day to find homeless youth. Locations included drop-in centers, hot meals, bus stations, parks, libraries and schools.

3. The CoC did not include youth experiencing homelessness as counters in this year's count. However, PIT Count Youth Ambassadors spread the word about the count within their networks.

NOFO Section V B 5 a and V B 7 c.	2B-4	PIT Count-Methodology Change-CoC Merger Bonus Points.	
		NOFO Section V.B.5.a and V.B.7.c.	

	In the field below:
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and
3.	describe how the changes affected your CoC's PIT count results; or
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.

(limit 2,500 characters)

The CoC's 2023 count was impacted by an influx of migrants entering Massachusetts and being provided shelter through the state's family shelter system, which provides shelter to all eligible family households and expands capacity to meet the need. The migrant family shelter crisis has received national press coverage and led the Massachusetts governor to declare a state of emergency regarding this crisis in August 2023.

The impact of the sudden rise in family homelessness attributable to inmigration is seen in our CoC's point-in-time count numbers. Our CoC experienced a 22% increase in the number of persons in families between 2022 and 2023, which is a sharp change in the trend that we had been seeing up to 2022. Prior to the 2023 steep increase, the family shelter counts had been decreasing year over year as a result of focused work at the state and local level. The point-in-time counts for our CoC for persons in family shelter have been: 2019--1986 people; 2020--1721 people; 2021--1695; 2022--1657 people.

FY2023 CoC Application	Page 48	09/26/2023
------------------------	---------	------------

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	

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

FY2023 CoC Application	Page 49	09/26/2023
------------------------	---------	------------

1. The CoC has reviewed HMIS data and consulted with prevention and homeless service providers to identify risk factors for persons experiencing homelessness for the first time. Risk factors include: the combination of extremely low income and displacement from a doubled-up situation or due to housing condemnation or eviction; extremely low income combined with a disability; and discharge from incarceration and systems of care such as hospitals, behavioral health treatment, and foster care. Domestic violence is also a risk factor. Over the past two years, rents in our geographic area have spiked, making homelessness more likely for households with very low incomes.

2. The CoC includes a robust state-funded program that provides prevention and rapid rehousing funds to at-risk households. The state-funded program provides up to \$7000 per household to prevent eviction. The CoC has coordinated with the program to increase awareness and to assist people to access the program.

The CoC coordinates closely with ESG-funded prevention providers, including providers who have focused efforts on at-risk populations: these include New North Citizens Council, funded to provide assistance to people exiting incarceration; and the YWCA, funded to provide prevention and rapid rehousing assistance to survivors of domestic violence. The CoC's YHDP programs work closely with the state's foster care agency to prevent youth from leaving the foster care system and entering homelessness; our youth-foster care work includes a partnership with the Springfield housing Authority to use Foster Youth to Independence (FYI) housing vouchers.

3. Way Finders, Inc., the regional provider of prevention and rapid rehousing assistance, which coordinates these efforts with other providers.

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

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

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

FY2023 CoC Application	Page 50	09/26/2023
------------------------	---------	------------

The state of Massachusetts has had a large influx of migrants who are unable to work due to immigration status. The state provides emergency shelter to all eligible families, and the influx of migrants has caused the state's population of families in emergency shelter to balloon with people who show in our system as experiencing homelessness for the first time. The migrant family shelter crisis has received national press coverage and led the Massachusetts governor to declare a state of emergency regarding this crisis in August 2023.

While the most extreme impact of migrants on the Massachusetts family shelter system began to be seen in fall 2022, state information indicates that the state was receiving migrants into family shelter beginning spring 2022. The CoC's SysPM for first-time homelessness (Measure 5.1) increased from 1712 to 1945 from FY21 to FY22, and the state's reports about the migrant population indicate to us that migrants were part of the reason for the increase.

2C-2.	Length of Time Homeless–CoC's Strategy to Reduce.
	NOFO Section V.B.5.c.
	In the field below:
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's

3. provide the name of the organization or position title that is responsible for over strategy to reduce the length of time individuals and families remain homeless.

FY2023 CoC Application	Page 51	09/26/2023
------------------------	---------	------------

1. The CoC coordinates regular multi-agency case-conferencing meetings to strategize placements for long-stayers--both chronically homeless and those at risk of chronic homelessness. The CoC uses all of its permanent supportive housing as DedicatedPlus or as dedicated to chronically homeless and prioritizes housing placements by length of homelessness and service needs. The CoC focuses additional case management and prioritizes RRH for persons identified as at risk of chronic homelessness. The CoC participates in Community Solutions' Built for Zero initiative, through which it is regularly tracking and improving its approach to ending chronic homelessness.

The CoC has coordinated with the Springfield Housing Authority, the Holyoke Housing Authority, and the City of Springfield HOME Tenant-Based Rental Assistance program to identify and create additional housing for chronically homeless; these units also give priority by length of homelessness and severity of service needs.

This year the CoC has prioritized an expansion application in its competition, placing the application in Tier 1 of its ranking; the expansion will provide 36 new units of permanent supportive housing for chronically homeless individuals.

2. The CoC uses a data warehouse to build and manage a by-name list of chronically homeless individuals and families. The system-generated list is used at regular multi-agency case-conferencing meetings to identify long-stayers, and make sure that long-stayers are connected to a Housing Navigator who assists them in collecting documents needed to get housed. The system itself identifies chronically homeless households based upon HMIS data and adds them to the list; outreach staff can also request that people not identified by the system be added to the list upon verification of chronic status.

The CoC's by-name list prioritizes individuals and families by length of stay and severity of service needs. The CoC has adopted the order of priority in Notice CPD-16-11 for all CoC units.

3. The CoC Administrator/Springfield Director of Housing.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing-CoC's Strategy
	NOFO Section V.B.5.d.
	In the field below:
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

FY2023 CoC Application	Page 52	09/26/2023
------------------------	---------	------------

1. As part of coordinated entry, the CoC assigns Housing Navigators to households experiencing homelessness; the job of a Housing Navigator is to help a household obtain necessary documentation for housing and assist households to access the assistance and conduct housing search. The CoC uses population-specific multi-agency case conferencing meetings and a byname list to review household needs and make matches to services and housing opportunities, including those that are not part of the CoC's coordinated entry system.

The CoC works to increase the number of permanent supportive housing and rapid rehousing units by: reallocating CoC funds from poor performing projects; working with housing authorities to prioritize homeless people for units and to seek new resources (such as Mainstream and Foster Youth to Independence vouchers); approaching subsidized housing providers to seek set-asides of units; and using HOME TBRA assistance for homeless households. The CoC has partnered with three PHAs to provide Emergency Housing Vouchers to households with long stays in homelessness and provides intensive support to assist those households in using the vouchers. The CoC is coordinating with the City of Springfield to use HOME-ARP funds to increase housing resources for currently homeless households and has three PSH projects in development with HOME-ARP funds.

2. The CoC uses a standardized assessment tool to identify a household's level of need for services and matches households to housing opportunities that provide the level of support needed. For households with very high support needs, the CoC convenes critical intervention meetings to coordinate multiple agencies involved with the household to ensure that there is a multi-agency plan to meet the household's service needs.

All CoC-funded units are Housing First/low demand and provide wraparound services. The CoC has designated PSH units as DedicatedPlus; this practice allows the CoC to quickly rehouse anyone who loses a PSH placement, without requiring the person to age into chronic homelessness again. The CoC provides training for staff working with PSH projects, including training on trauma-informed care, motivational interviewing, responding to domestic violence, and support for individuals experiencing a behavioral health crisis.

3. The CoC Administrator/Springfield Director of Housing.

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

FY2023 CoC Application	Page 53	09/26/2023
------------------------	---------	------------

1. The CoC uses a data warehouse to build and manage a by-name list of chronically homeless individuals and families, including those who meet the definition of chronic due to repeat homelessness. The system-generated list is used at regular multi-agency case-conferencing meetings to identify households with repeat homelessness, and make sure that repeat households are connected to a Housing Navigator who assists them in collecting documents needed to get housed. The system itself identifies chronically homeless households based upon HMIS data and adds them to the list; outreach staff can also request that people not identified by the system be added to the list upon verification of chronic status.

2. The CoC's strategy to reduce returns to homelessness is to ensure that proper assessment and assistance is provided when people are housed, so that those who are most in need of support services receive ongoing services, and those who are most in need of increased income are connected with employment and training resources.

The CoC coordinates regular multi-agency case-conferencing meetings to strategize placements for chronically homeless. The CoC uses all of its permanent supportive housing as DedicatedPlus or dedicated to chronically homeless and prioritizes housing placements by length of homelessness and service needs. The CoC focuses additional case management and prioritizes RRH for persons identified as at risk of chronic homelessness. The CoC participates in Community Solutions' Built for Zero initiative, through which it is regularly tracking and improving its approach to ending chronic homelessness.

All of the CoC's programs are low-demand, Housing First. The CoC provides regular training to housing support staff to provide them the tools necessary to assist this population to remain housed.

3. CoC Administrator/City of Springfield Director of Housing.

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

FY2023 CoC Application	Page 54	09/26/2023
------------------------	---------	------------

1. The CoC provides training to CoC providers on accessing employment resources and programs, provides coordination between programs to increase communication and joint projects, and has a Career Services committee that holds regular meetings and supports initiatives.

The CoC has established goals for providers for the percent of participants who increase employment income. It incorporates progress toward this goal in the scoring or renewal applications.

2. The CoC organizes training for homeless service providers by employment training agencies, including the WIOA agency, MassHire, on how people experiencing homelessness can access those programs. MassHire works closely with our Youth Action Board and youth populations to increase awareness of the assistance MassHire provides to youth. The CoC has collaborated with Way Finders, Inc. in a project called Secure Jobs, which works to link homeless persons to housing and employment at the same time. The program includes a full-time job locator; staff that assist participants with job search, placement and retention; and a pool of flexible funds that can be used to overcome barriers to employment. The Secure Jobs program is available to homeless families and individuals throughout the CoC's geographic area.

3. The Director of the Western Massachusetts Network to End Homelessness, who chairs the multi-agency Career Services committee.

2C-5a.	Increasing Non-employment Cash Income-CoC's Strategy	
	NOFO Section V.B.5.f.	
		1

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

(limit 2,500 characters)

1. The CoC provides regular training to agency staff on Social Security and cash assistance programs. During regular multi-agency case conferencing meetings, coordinated entry staff review income sources for persons on the byname list and identify potential non-employment income sources. Subsequent case conferencing meetings review whether case workers have followed up on recommendations to apply for non-employment cash income.

The CoC requires all CoC- and ESG-funded providers to have staff who have completed SOAR training and therefore have specialized knowledge about strategies to improve approval rates for disabled people experiencing homelessness. Program staff work closely with our Health Care for the Homeless provider to obtain necessary documentation of disabling conditions.

2. CoC Administrator/City of Springfield Director of Housing.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	ls your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized	Yes
	housing units which are not funded through the CoC or ESG Programs to help individuals and families	
	experiencing homelessness?	

3A-2	New PH-PSH/PH-RRH Project-Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
--	-----

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

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

Project Name	Project Type	Rank Number	Leverage Type
CSO-FOH Worthingt	PH-PSH	8	Both

FY2023 CoC Application	Page 56	09/26/2023
------------------------	---------	------------

3A-3. List of Projects.

1. What is the name of the new project? CSO-FOH Worthington St

2. Enter the Unique Entity Identifier (UEI): N5F2KKASSZR7

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your 8 CoC's Priority Listing:

5. Select the type of leverage: Both

FY2023 CoC Application	Page 57	09/26/2023

3B. New Projects With Rehabilitation/New Construction Costs

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

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- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

FY2023 CoC Application	Page 58	09/26/2023
------------------------	---------	------------

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
	1

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

(limit 2,500 characters)

N/A

FY2023 CoC Application	Page 59	09/26/2023
------------------------	---------	------------

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

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

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- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

4A-1a. DV Bonus Project Types.

NOFO Section I.B.3.I.

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

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

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

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

1.	Enter the number of survivors that need housing or services:	259
2.	Enter the number of survivors your CoC is currently serving:	48
3.	Unmet Need:	211

FY2023 CoC Application	Page 60	09/26/2023
------------------------	---------	------------

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

(limit 2,500 characters)

1. The CoC calculated the number of survivors needing housing or services by using the number of people counted in the 2023 point-in-time count who selfidentified as fleeing domestic violence and were unsheltered, in emergency shelter, or in transitional housing on the night of the count. The number of survivors that the CoC is serving was calculated by using the number of survivors in CoC-funded rapid rehousing or permanent supportive housing programs on the night of the 2023 point-in-time count, and adding survivors served in an additional TH-RRH project started after the 2023 PIT count.

2. The data comes from the comparable databases of the two domestic violence organizations in the CoC's geographic area, and from the CoC's HMIS for survivors served by non-DV programs.

3. The key barrier is the CoC's historical lack of understanding of and responsiveness to the housing needs of survivors. The CoC's creation of a DV coordinated entry project in 2019 has made it apparent that the housing and prioritization system that the CoC has established does not serve survivors well. The CoC has focused resources on permanent supportive housing for chronically homeless people, and DV survivors rarely fit into that category. Existing CoC-funded RRH programs have very limited capacity. The CoC has developed less RRH capacity because it relies heavily on a large state-funded RRH program, but that program is targeted to households in the state emergency shelter program and has been hard for survivors to access. The CoC was awarded funds for a TH-RRH program in the FY21 competition and has found that the need for this program dwarfs the size of it. This application will add 10 more RRH units to that DV TH-RRH project.

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

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

FY2023 CoC Application	Page 61	09/26/2023
------------------------	---------	------------

Applicant Name

YWCA of Western M...

|--|

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

4A-3b. Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.

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

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

1.	Applicant Name	YWCA of Western Massachusetts
2.	Project Name	YWCA-Alianza TH-RRH Expansion
3.	Project Rank on the Priority Listing	15
4.	Unique Entity Identifier (UEI)	CFE4YG9DGKX5
5.	Amount Requested	\$163,565
6.	Rate of Housing Placement of DV Survivors-Percentage	40%
7.	Rate of Housing Retention of DV Survivors-Percentage	86%

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

	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:	
1.	how the project applicant calculated both rates;	
2.	whether the rates accounts for exits to safe housing destinations; and	
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

FY2023 CoC Application	Page 63	09/26/2023
------------------------	---------	------------

1. The housing placement rate for the YWCA is calculated by dividing the number of survivors who exited the agency's domestic violence emergency shelter to permanent housing by the total number who exited shelter. The housing retention rate is calculated by dividing the number of people who remained housed in the agency's rapid rehousing program and those who exited to a permanent housing destination by the number who were served in the program. Both calculations are for the last fiscal year 7/1/22 - 6/30/23.

2. The placement rates account for exits to safe housing destinations. Program staff continually circle back to safety with survivors, ensuring their safety is at the forefront of all decisions. As a survivor-centered program, safety is subjective. The client defines what safety means to them and how it looks regarding housing.

3. The data source is the YWCA's HMIS-comparable database.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH- RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
2.	prioritized survivors-you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;	
3.	determined which supportive services survivors needed;	
4.	connected survivors to supportive services; and	

5. moved clients from assisted housing to housing they could sustain-address housing stability after the housing subsidy ends.
 (limit 2,500 characters)

FY2023 CoC Application	Page 64	09/26/2023
------------------------	---------	------------

1. The YWCA works one-on-one with each survivor to identify safe and available housing options and connect them with housing resources. Survivors are assisted to access housing assistance they choose without needing to meet preconditions, such as entering shelter, participating in a support group/counseling, or seeking a restraining order.

2. The YWCA and another DV agency, Alianza DV Services, operate a DVspecific coordinated entry project. Survivors are assessed using a standard screening and prioritized according to the screening and review at a regular joint case conferencing meeting.

The CoC's emergency transfer plan prioritizes any household in need of rehousing due to DV for the next available unit in the CoC system, and participants needing an emergency transfer are referred to the DV coordinated entry project to be considered for CoC DV TH_RRH or be referred to any other available CoC program vacancy.

3. Supportive services are survivor-driven and are not required. YWCA staff work with clients to understand their needs and services they want. Program staff use motivational interviewing to empower clients to document their longterm goals and break them into tangible action steps. Program staff share relevant internal and external resources with clients aligned with their action steps.

4. The YWCA connects survivors to services in whatever way they prefer. The referral can be as straightforward as program staff sharing a resource (phone number, pamphlet, website, etc.) or as involved as making a warm referral. A warm referral consists of program staff going to the agency/organization with the survivor and introducing them to the staff/provider who will help them. As a cornerstone of the community for over 150 years, the YWCA has an extensive network of partners across fields, from legal services to medical care, childcare, ABE program providers, and more. Many of these partnerships include MOUs that outline reciprocal "warm referral" processes between agencies.

5. Staff work with survivors to identify goals and strategies to be able to sustain housing. Depending on need, staff assist clients to connect to workforce development or employment assistance, apply for subsidized or public housing, consider options such as roommates or living with extended family, and assist in accessing disability, unemployment, or SNAP benefits. This work with clients is ongoing throughout the survivor's time in assisted housing.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	

FY2023 CoC Application	Page 65	09/26/2023
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4.	training staff on safety and confidentially policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1. The YWCA's infrastructure includes a secure building, confidential meeting spaces, and thoroughly trained staff. YWCA will meet with survivors at locations in the community. If staff notice a dynamic of control with a present person, staff will encourage the client to schedule a one-on-one meeting. The YWCA also conducts intake by phone. Staff asks callers if they are in a safe, private place to talk

2. Program staff use the client's unique definition, vision, and need for safety as a road map when making determinations and placements into housing. There is a spectrum of considerations that vary from person to person. While some clients want to be in a different city from their abuser, some prefer a different neighborhood in the same city. Many clients prefer a second floor or higher unit to avoid an abuser being able to look into their apartment. Some clients want to ensure they are in a neighborhood with a low prevalence of substances or easy access to a Medication-Assisted treatment clinic.

3. The YWCA's confidentiality policy requires that all information regarding agency clients obtained during professional services be held in confidence. No information that would confirm that an individual is receiving YWCA services or that could allow the identification of an individual may be disclosed without prior written consent from the individual. The YWCA keeps all client information in its HMIS-comparable database, AWARDS by Foothold Technology. Foothold Technology works with a national cybersecurity firm, GreyCastle Security, to meet or exceed compliance standards set out by NIST, HIPAA, and other key regulatory bodies.

4. The YWCA's required DV/SA training covers de-identifying and anonymizing notes, utilizing the secured internal communication system, exceptions to confidentiality, what to do if there is a breach of confidentiality, and who has access and how they obtain access when it's legally required to disclose information without protection. The 40-hour DV/SA training also covers safety planning, including considerations in safety planning for special populations.

5. The YWCA has flexible funding from MA DPH that survivors can access for security measures in their apartments. For higher/emergent needs, Housing Navigators connect survivors to the statewide Address Confidentiality Program or the CoC's or state's Emergency Transfer Plan.

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

FY2023 CoC Application	Page 66	09/26/2023
------------------------	---------	------------

(limit 2,500 characters)

The YWCA's DV CE and TH-RRH project currently administer a DV Prioritization Assessment. The DV Prioritization Assessment determines vulnerability so that the DV CE project can administer housing resources based on need. The DV Prioritization Assessment contains a page dedicated to learning more about the client's safety. The assessment asks about current safety concerns and whether or not safety compromises the client's housing. It also has a Likert scale that provides a rating of the client's safety. These questions provide a safety baseline for project staff to check on throughout the project. While these safety questions are formally asked/documented only at intake, project staff informally check in on safety throughout the client's tenure in the program. However, these informal check-ins allow the program to determine the program's effectiveness in keeping clients safe continually.

The YWCA identifies an area for improvement in its current evaluation of the client's ongoing safety in not collecting this data systematically throughout the program as a way to collect quantitative and qualitative data. The YWCA plans to administer the safety segment of the assessment every three months with clients, at program exit, and in a 3-month and 6-month follow-up. Administering the safety questions more frequently will allow the YWCA to validate the informal observations made by staff through conversations with clients with data and to more accurately pinpoint where the program can improve in ensuring survivors are safe during and after discharge.

The YWCA also plans to add a safety checklist to the HUD Housing Quality Inspection complete of all prospective RRH units. While the HQS ensures that a unit is tenable for a resident, it does not ensure that it incorporates specific safety measures to keep the survivor safe. The YWCA intends to create a tool with project partner Alianza that contains various measures that the survivor can consider in the unit to bolster safety. While the safety checklist will not cause a unit to "pass" or "fail" an inspection, it will be an opportunity for program staff to engage clients on the physical safety of their prospective unit and determine whether or not there are specific measures the agency can take to make the unit safer for a client. The YWCA will revisit the safety checklist with clients every three months—checking in on any strategies the program can implement to increase safety.

4A-3e	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section I.B.3.I.(1)(d)
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;

	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

FY2023 CoC Application	Page 68	09/26/2023
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1. In utilizing our Wants and Barriers form with the DV Prioritization Assessment form, program staff are able to work with survivors on what housing safety looks like for them. For some that may mean moving right into a housing search for their own apartment. For others, if during that assessment and discussion, it is revealed that independent housing is just as scary as remaining with an abuser, other communal living options may be discussed (shelter, transitional housing, or residential supports for mental health or substance use).

2. As the leading IPV provider in Hampden County, the YWCA walks the walk-in implementing trauma-informed care. From its agency policies, hiring practices, management, program policies and procedures, and services rendered, the YWCA strives to be as trauma informed as possible. Across all of its programs, including its DV CE and TH-RRH programs, the YWCA minimizes power differentials as much as possible, including eliminating punitive interventions, creating a low-barrier-to-service threshold, and allowing clients to opt-in to all services. For example, the YWCA noticed a power differential between staff and a client at its TH subcontract site. The YWCA swiftly connected to the subcontract site and planned an upcoming training to discuss trauma-informed care and the specific needs of survivors.

3. New employees are mandated to participate in the YWCA's 40-hour DV/SA training, while ongoing staff participate in a 15-hour "refresher" training every other year; all training incorporates trauma-informed care training, including as it relates to special populations (LGBT/BIPOC/immigrant survivors). In the YWCA's DV CE and TH-RRH programs, staff discuss trauma with clients through the lens of how trauma impacts a client's housing security and housing future. The YWCA provides significant training and clinical supervision so as to equip staff with understanding of trauma and how to help participants understand trauma and how it can manifest. The agency also offers a variety of psycho-educational groups for participants on domestic violence, sexual assault, and human trafficking, and these groups include support around recognizing and managing trauma.

4. The DV Prioritization Form, designed to measure vulnerability and make placement decisions, asks open-ended questions about what is currently working. For instance, under the income and employment section, the assessment asks: "how do you provide the necessities for you and/or your family?" The aim of this question is to recognize and build on how the client is currently providing for their family instead of focusing solely on how they cannot provide for their family. The YWCA also incorporates a strengths-based approach into safety planning with clients. Safety plans include questions on how clients have kept themselves safe. It's validating and empowering for clients to realize the many tools already in their toolbox to keep themselves safe. Program staff collaborate with clients to create housing plans that outline short-term and long-term goals with actionable steps.

5. The YWCA's SA/DV training covers equal access, nondiscrimination, and cultural competence. The YWCA also sends staff to workshops through the Healing Racism Institute. The YWCA embeds equal access, nondiscrimination, and cultural competence into the program. For instance, the first section of the DV Prioritization Assessment asks, "Would you like me to find out if a culturally specific advocate is available to complete this assessment with you?" The YWCA is bolstering its partnerships with such organizations so that program staff can readily connect with an advocate when needed. For instance, the

FY2023 CoC Application	Page 69	09/26/2023
------------------------	---------	------------

YWCA currently offers sexual assault counseling at Jewish Family Service (JFS), which specializes in serving immigrant populations.

6. Groups at the YWCA include a sexual assault support group, domestic violence support group, domestic violence psychoeducational course, financial empowerment curriculum, and Human Trafficking prevention curriculum for youth and young adults. The YWCA's network of community partners has well-established referral pathways to a range of supports, such as mentorship programs, peer-to-peer support programs, and spiritual/religious organizations.

7. The YWCA has a Young Parent Support Program, offering specialized home visiting services that promote healthy parent-child relationships, and a Children Who Witness Violence Program, offering clinical counseling to children traumatized by family violence. The YWCA refers families to childcare with sliding scale fees and to the state's subsidized childcare program. The YWCA has staff who assist families to ensure that children are enrolled in school and have access to learning supports.

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

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

FY2023 CoC Application	Page 70	09/26/2023
------------------------	---------	------------

During the intake process, the YWWM administers the DV Prioritization Assessment, conducts safety planning, and begins to make a housing plan. These documents serve as the foundation for the services program staff will provide to the client, directly or through a referral.

First and foremost, program staff provide housing navigation services. Program staff administer a wants and barriers form and use its results with the DV Prioritization Assessment to start a housing search for DV CE and TH-RRH clients. The only significant difference in the housing search process between the YWCA's different project components is that the YWCA and Alianza have approved the RRH clients for a subsidy through the project. DV CE clients and TH clients may not have that housing resource, so instead of helping them find a unit directly, program staff connect them first to a housing resource and then to a unit (if applicable). During the housing search process, the staff meets with clients weekly to check in on progress; they collaborate on a housing plan with short-term and long-term goals, research available housing that aligns with the client's needs, they advocate with landlords on the client's behalf, and they go to showings with the client.

Program staff provide safety planning services while quickly moving clients into permanent housing. Safety planning looks different from client to client. Participants with a higher safety risk are provided comprehensive safety planning services, including making a detailed safety plan and helping the client ensure its components are put into place (e.g., retaining a restraining order, getting a new phone, or setting up supervised visitation with children). Some participants may be at lower risk for imminent danger due to IPV but have an IPV history that currently impacts their housing security (for example, financial abuse setting them up for difficulties maintaining housing). However, they are not otherwise in current danger due to IPV. In these instances, the YWCA will administer any applicable parts of the safety plan, including discussing any harm reduction related to the concomitant factors that may contribute to their homelessness.

The DV CE and TH-RRH program staff specialize in housing navigation services; these services are successful due to the case management style of services provided. Referrals to internal and external programs and providers are a central component of services program staff provide as needs arise. From the onset of services, program staff often make referrals for legal services while the housing search is underway. Legal advocacy is frequently necessary for clients to obtain housing in the first place. Some clients need eviction records expunged or criminal charges dropped for them to secure housing. The YWCA also has an internal SAFEPLAN court advocacy program that advocates for clients seeking 209A or 258E orders.

Other referral areas often accessed during the housing search include clinical therapeutic services, domestic violence/sexual assault advocacy services, substance use recovery programs, medication-assisted treatment programs, and outpatient substance use services. These services are typically not tied to a specific geographic location (in the same way a food pantry might be). So, no matter where the client obtains housing, the service will follow them, making these referrals ideal.

Program staff also prioritizes accessing benefits for clients. This process often happens in tandem with securing a rental unit. Among all the benefits, program

staff ensure the client enrolls in MassHealth. Attending to one's physical health is a basic need in the same way that housing first is a basic need for stabilization.

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

FY2023 CoC Application	Page 72	09/26/2023
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The proposed expansion project adheres to the same program principles (i.e., housing first, survivor-centered, low barriers to entry, client choice for housing locations, connection to other resources) as the YWCA's current TH-RRH project and much of what has been written above is relevant for what the expansion project will do. However, there are a few new elements to the program and changes that the YWCA will make reflected below.

1. The YWCA will focus on bolstering its landlord network to aid in quickly placing survivors. 0.5 FTE of TH-RRH staff will be dedicated to building landlord connections. This approach will increase the program's capacity to build rapport with landlords who understand survivors' needs and are committed to helping them. Concurrently, the YWCA's Vice President of Grants and Compliance will seek funding to incentivize landlords to work with the YWCA (i.e., funds to fix damages).

The VAWA BLI included in the proposed expansion project will help Joint TH-RRH clients move quickly from their unit if an abuser breaches their location. These VAWA funds will set the program up for success in prioritizing placement and stabilization in emergencies. If a client needs to immediately find new housing, a spot in a shelter may be a temporary fix until the YWCA can place the client into another unit, which program staff will do as quickly as possible.

Lastly, the project will start conducting exit surveys from its clients. These exit surveys will allow the YWCA to evaluate its effectiveness in quickly moving/stabilizing survivors in PH while prioritizing participants' wishes and needs.

2. The YWCA will continue to minimize power differentials by eliminating power differentials, creating a low-barrier-to-service threshold, and allowing clients to opt into or out of any/all supportive services. The proposed expansion project includes funds for an advisory board for persons with lived experience (PWLE) of homelessness and IPV. The program's policies and procedures will better align with the actual experiences of its clients, setting the program up to further its foundation of mutual respect and client agency.

3. The YWCA will continue sending its staff members through its 40-hour DV/SA training focusing on trauma and trauma-informed care. Staff will continue to discuss trauma with clients, including how it impacts a client's housing security and future. The program has a wealth of internal and external referral providers to process trauma. The YWCA will also have well-credentialed staff overseeing this program. The DV CE Supervisor and the Director of Survivor Advocacy have an LCSW, the latter working towards an LICSW. The YWCA's COO/Clinical Director has an LICSW.

4. The YWCA will continue using the strengths-based tools it has created, such as the DV Prioritization Form. The program will train staff in motivational interviewing, tapping into clients' inner resources/strengths to support their change. Lastly, the program will administer exit surveys, including questions about whether a client felt the program utilized a strengths-based approach. The YWCA will analyze the exit survey quarterly. It will use the results for continuous quality improvement.

5. The YWCA will continue offering DV/SA training and training through the Healing Racism Institute, which covers equal access, nondiscrimination, and

FY2023 CoC Application	Page 73	09/26/2023

cultural competence. The YWCA's Senior Leadership will review the agency's DEI policy and create outcomes that it can measure. Lastly, the YWCA's HMIS Data Coordinator is creating a tool to measure the program's racial equity and cultural competence. The equity rubric/assessment will consist of two parts: 1) a tool to assess the program overall (service rates, policies/procedures, staff attitudes) and 2) a screening tool to assess clients' experiences of housing discrimination due to race or other minority status. Program staff will use the latter to inform housing plans, make referrals (i.e., legal services), and connect with an advocate from a culturally specific agency.

6. Program staff will coordinate and integrate YWCA group services such as support groups, psychoeducational courses, a financial empowerment curriculum, and a Human Trafficking prevention curriculum for youth and young adults. Further, the YWCA's network of community partners has wellestablished referral pathways to a range of supports, such as mentorship programs, peer-to-peer support programs, and spiritual/religious organizations.

7. Program staff will connect clients to services as the client is interested at the YWCA, including the Young Parent Support Program, which offers specialized home visiting services that promote healthy parent-child relationships, and a Children Who Witness Violence Program, which offers clinical counseling to children traumatized by family violence. The YWCA is well-versed in childcare systems in Hampden County.

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

(limit 2,500 characters)

1. The YWCA currently has persons with lived experience of homelessness and/or Intimate Partner Violence involved in nearly every arena of the organization—ranging from the Board of Directors to Program Directors to supervisors and direct service staff. When making hiring decisions, the YWCA considers lived experience as valuable as formal education. One of the employees working with the TH-RRH program has experienced domestic violence and homelessness.

The YWCA and Alianza incorporate survivors who are interested as an advisory board. Individuals are paid a stipend to participate in this board and provide advice to the agencies regarding their programs. Translation and childcare are provided as necessary to enable survivors to participate.

2. The YWCA and Alianza consult with the advisory board regarding program policy and development.

FY2023 CoC Application	Page 74	09/26/2023
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4B. Attachments Screen For All Application Questions

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

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.			
2.	You must upload an at	tachment for each doo	cument listed where 'Required?' is 'Yes'.	
3.	files to PDF, rather that	n printing documents a rint option. If you are	er file types are supported–please only use and scanning them, often produces higher q unfamiliar with this process, you should cor	uality images. Many systems allow you to
4.	Attachments must mate	ch the questions they	are associated with.	
5.	Only upload documents ultimately slows down t	s responsive to the qu the funding process.	estions posed-including other material slow	s down the review process, which
6.	If you cannot read the a	attachment, it is likely	we cannot read it either.	
	. We must be able to displaying the time and time).	o read the date and tir date of the public pos	ne on attachments requiring system-genera sting using your desktop calendar; screensh	ted dates and times, (e.g., a screenshot ot of a webpage that indicates date and
	. We must be able to	o read everything you	want us to consider in any attachment.	
7.	After you upload each a Document Type and to	attachment, use the D ensure it contains all	ownload feature to access and check the at pages you intend to include.	tachment to ensure it matches the required
8.	Only use the "Other" at	tachment option to me	eet an attachment requirement that is not ot	nerwise listed in these detailed instructions.
Document Typ	e	Required?	Document Description	Date Attached
1C-7. PHA Ho Preference	meless	No	PHA Homeless Pref	09/19/2023
1C-7. PHA Mo Preference	ving On	No		
1D-11a. Lette Working Group		Yes		
1D-2a. Housin	g First Evaluation	Yes		
1E-1. Web Po Competition D	sting of Local eadline	Yes	Web posting of lo	09/11/2023
1E-2. Local Co Tool	mpetition Scoring	Yes	Local Competition	09/11/2023
1E-2a. Scored Project	Forms for One	Yes	Scored Form for O	09/26/2023
1E-5. Notificati Rejected-Redu		Yes	Notification of P	09/12/2023
1E-5a. Notifica Accepted	tion of Projects	Yes	Notification of P	09/12/2023
	1E-5b. Local Competition Selection Results Yes Local Competition 09/11/2023			
1E-5c. Web Po Approved Con Application	1E-5c. Web Posting–CoC- Approved Consolidated			

FY2023 CoC Application	Page 75	09/26/2023
------------------------	---------	------------

1E-5d. Notification of CoC- Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HUD's Homeless Da	09/12/2023
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Web posting of local competition deadline

Attachment Details

FY2023 CoC Application	Page 77	09/26/2023
------------------------	---------	------------

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Form for One Project

Attachment Details

Document Description: Notification of Projects Reduced

Attachment Details

Document Description: Notification of Projects Selected

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description:

FY2023 CoC Application Page 7	78 09/26/2023
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Attachment Details

Document Description:

Attachment Details

Document Description: HUD's Homeless Data Exchange (HDX) Competition Report

Attachment Details

Document Description:

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FY2023 CoC Application	Page 79	09/26/2023
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Attachment Details

Document Description:

FY2023 CoC Application	Page 80	09/26/2023
------------------------	---------	------------

Submission Summary

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

Page	Last Updated
1A. CoC Identification	07/29/2023
1B. Inclusive Structure	09/26/2023
1C. Coordination and Engagement	09/26/2023
1D. Coordination and Engagement Cont'd	09/26/2023
1E. Project Review/Ranking	09/26/2023
2A. HMIS Implementation	09/26/2023
2B. Point-in-Time (PIT) Count	09/26/2023
2C. System Performance	09/26/2023
3A. Coordination with Housing and Healthcare	09/26/2023
3B. Rehabilitation/New Construction Costs	09/26/2023
3C. Serving Homeless Under Other Federal Statutes	09/26/2023

FY2023 CoC Application	Page 81	09/26/2023
------------------------	---------	------------

4A. DV Bonus Project Applicants	09/26/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

FY2023 CoC Application	Page 82	09/26/2023



SPRINGFIELD HOUSING

60 Congress Street ° P.O. Box 1609 • Springfield, MA 01101 (413) 785-4500 Fax (413) 785-4516 www.shamass.org

September 1, 2023

Geraldine McCafferty City of Springfield Office of Housing 1600 E. Columbus Ave. Springfield, MA 01103

Dear Gerry:

I am writing to provide confirmation that the Springfield Housing Authority provides limited preferences for homeless persons in both the public housing and the housing choice voucher (HCV) program.

In public housing, the SHA operates a Housing First Program within its federally-assisted family developments by setting aside 35 units for access by program participants. The program provides preference for homeless families referred by the Massachusetts Department of Housing and Urban Development (DHCD) family shelter system. The program is designed to provide housing and on-site supportive services to families with long stays in family shelters to assist them in addressing the root causes of homelessness.

In the HCV program, the SHA has allocated 89 vouchers and operates, in conjunction with the City of Springfield, a project-based program for chronically homeless individuals and families. The number of project-based units varies as units are brought into or removed from the program, but 80 units are consistently under contract. In order for applicants to be eligible for the program, households must verify the existence of a disability and chronic homelessness.

In 2021 the SHA was awarded 27 Enhanced Housing vouchers and 2 FYI vouchers, which it prioritized for households headed by nonelderly disabled individuals that were experiencing chronic homelessness. The SHA has coordinated with the Continuum of Care's coordinated entry system for referrals to both the project-based and Mainstream voucher programs.

If there is any additional information that you require, please feel free to contact me.

Sincerely, Denise R. Jorda Executive Director



HOLYOKE HOUSING AUTHORITY

475 Maple Street, Suite One Holyoke, MA 01040-3798 Phone 413-539-2220, Fax 413-539-2227, T.D.D. 1-800-545-1833 Ext. 510 An Equal Opportunity / Affirmative Action Agency

September 19, 2023

Geraldine McCafferty City of Springfield Office of Housing 1600 E. Columbus Ave. Springfield, MA 01103

Dear Gerry:

I am writing to certify that Holyoke Housing Authority (HHA) provides a limited preference for chronically homeless households. HHA has a formal partnership with the Springfield-Hampden County Continuum of Care (CoC) to allocate Housing Choice Vouchers annually to eligible homeless families referred by the CoC.

The Holyoke Housing Authority participates in HUD's Moving to Work Demonstration Program. It uses its MTW authority to set aside 15 vouchers annually for chronically homeless households. The CoC's coordinated entry system refers eligible households for these vouchers.

Please contact me at 413-539-2202 should you have any questions or concerns.

Sincerely

Matthew A. Mainville **Executive Director**

MA-504 Project Scoring Tool for Ranking and Tiering 2023

Maximum Points Available: 100

Maximum points for objective criteria: Renewal/expansion - 48; New - 40

- Population served, cost effectiveness, audit with no findings, monitoring with no findings, utilization, spending, leverage (for new/expansion)
- Plus system performance criteria listed below

Maximum points available for system performance criteria: Renewal/expansion - 23; New - 20

- Remain housed/exit to permanent housing destinations, returns to homelessness, increase employment and non-employment income
- Maximum points available for projects that address specific severe barriers to housing and services: Renewal/expansion 12; New 8
 - Substance use disorder, serious mental illness, homeless for a year or longer, history of domestic violence

DV providers may submit data from an HMIS-comparable database to demonstrate performance

Category	Measure	Source	Point Value: Renewal/ Expansion	Point Value: New	Scoring Criteria	Points Awarded
Equity	Identification of barriers to success faced by BIPOC and steps taken or planned to overcome barriers	Part 2 Application	8	8	Identifies barriers faced by BIPOC and has taken concrete actions to eliminate - 8 points Identifies barriers faced by BIPOC and plans concrete actions to eliminate - 5 points Identifies barriers faced by BIPOC but does not identify concrete actions to address - 2 points	
	Diversity Equity and Inclusion	Part 2 Application, attachment	5	5	Organization has a Diversity, Equity and Inclusion policy – 2 points, plus policy includes: • specific numeric goals – 1 point • timeframe for meeting goals – 1 point • ongoing evaluation of progress toward meeting goals – 1 point	

	Involvement of Persons with Lived Experience	Part 2 Application	6	6	Narrative demonstrates understanding of value of involvement of PWLE – 2 points plus Narrative provides a specific example of change due to involvement of PWLE - 4 points
	Termination Policy which provides meaningful opportunity to challenge the termination	Part 2 Application, narrative and attachment	4	4	Has written termination policy which provides meaningful opportunity to challenge – 2 points Plus Evidence of a successful appeal OR no terminations in the last 3 years – 2 points
	Underrepresented individuals at Board, senior leadership, and program director positions	Part 2 Application	8	8	At least 60% BIPOC/LGBTQ – 8 points 25% BIPOC/LGBTQ – 6 points 10% BIPOC/LGBTQ – 2 points
Quality Services	Trauma-informed care: Provides or makes available trauma-informed care training to staff	Part 2 Application	5	5	Demonstrates commitment to trauma-informed care by making regular TIC training available to staff – 5 points
	Demonstrates understanding of and plan for addressing participant service needs	Esnaps	n/a	5	Met standard – 5 points
	Transportation Assistance	Part 2 Application	2	2	Demonstrates provision of meaningful transportation assistance – 2 points
	Language Assistance	Part 2 Application	2	2	Demonstrates provision of meaningful language assistance – 2 points

	Suitable housing and neighborhood	Part 2 Application	5	5	Demonstrates prioritization of appropriate unit and neighborhood selection – 2.5 points Plus Demonstrates prioritization of selection and maintenance of units meeting housing quality standards – 2.5 points
Population Served	Serves population with high barriers to housing	APR (for renewal, expansion), Esnaps application (for new)	12	8	Points for each high-barrier population where population served in FY22 was above CoC average: • Substance use disorder • Mental Health Disorder • Homeless for one year or more • Domestic violence survivor Renewal and expansion applications receive 3 points per population; new applications receive 2 points per population proposed
Housing First	Fidelity to Housing First model	Part 2 Application	7	7	Met standard – 7 points
Grant administration	Cost effectiveness – cost is at or below \$12,000 per person served	Esnaps application	2	2	Met standard – 2 points
	Agency audit – no findings/concerns	Part 2 application	2	2	Met standard – 2 points
	Program passed CoC monitoring	CoC records	2	n/a	Met standard – 2 points

	Program averages utilization of 90% or above	APR	2	n/a	Met standard – 5 points
	Project spent a minimum of 95% of grant	CoC financial records	5	n/a	Met standard – 5 points
	Experience managing federal grant funds	Esnaps	n/a	5	Response demonstrates experience – 5 points
Performance outcomes	Housing stabilization – persons remain in housing or exit to permanent housing	Renewal/ expansion - APR New – Part 2 Application	10	10	95%+ - 10 points 90-94% - 8 points
	Returns to homelessness	APR	3	n/a	Less than 5% - 3 points
	Increase employment income	Renewal/ expansion - APR New – Part 2 Application)	5	5	Renewal and expansion: Stayers increase ≥ 8% - 2.5 points; Leavers increase ≥ 15% - 2.5 points New: overall increase ≥ 5% - 5 points
	Increase non-employment income	Renewal/ expansion - APR New – Part 2 Application)	5	5	Renewal and expansion: Stayers increase ≥ 10% - 2.5 points; Leavers increase ≥ 25% - 2.5 points New: overall increase ≥ 5% - 4 points
Leverage	Project leverages housing resources with housing	Part 2 Application	n/a	3	Met standard – 3 points

	subsidies/units not funded through CoC or ESG					
	Project leverages health resources, including partnership with a healthcare organization	Part 2 Application	n/a	3	Met standard – 3 points	
Total Points	1	1	100	100		

Points Awarded	$\tilde{\mathcal{A}}$	V	C
Scoring Criteria	Identifies barriers faced by BIPOC and has taken concrete actions to eliminate - 8 points Identifies barriers faced by BIPOC and plans concrete actions to eliminate - 5 points Identifies barriers faced by BIPOC but does not identify concrete actions to address - 2 points	 Organization has a Diversity, Equity and Inclusion policy - 2 points, plus policy includes: specific numeric goals - 1 point timeframe for meeting goals - 1 point ongoing evaluation of progress toward meeting goals - 1 point 	Narrative demonstrates understanding of value of involvement of PWLE – 2 points plus Narrative provides a specific example of change due to involvement of PWLE - 4 points
Point Value: New	ω	м	ю
Point Value: Renewal/ Expansion	∞	м	م
Source	Part 2 Application	Part 2 Application, attachment	Part 2 Application
Measure	Identification of barriers to success faced by BIPOC and steps taken or planned to overcome barriers	Diversity Equity and Inclusion	Involvement of Persons with Lived Experience
Category	Equity		

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Has written termination policy which provides meaningful opportunity to challenge – 2 points Plus Evidence of a successful appeal OR no terminations in the last 3 years – 2 points	At least 60% BIPOC/LGBTQ – 8 points 25% BIPOC/LGBTQ – 6 points 10% BIPOC/LGBTQ – 2 points	Demonstrates commitment to trauma-informed care by making regular TIC training available to staff – 5 points	Met standard – 5 points	Demonstrates provision of meaningful transportation assistance – 2 points	Demonstrates provision of meaningful language assistance – 2 points	Demonstrates prioritization of appropriate unit and neighborhood selection – 2.5 points Plus	Demonstrates prioritization of selection and maintenance of units meeting housing quality standards – 2.5 points
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4	∞.	ы	n/a	2	2	ю	
Part 2 Application, narrative and attachment	Part 2 Application	Part 2 Application	Esnaps	Part 2 Application	Part 2 Application	Part 2 Application	
Termination Policy which provides meaningful opportunity to challenge the termination	Underrepresented individuals at Board, senior leadership, and program director positions	Trauma-informed care: Provides or makes available trauma-informed care training to staff	Demonstrates understanding of and plan for addressing participant service needs	Transportation Assistance	Language Assistance	Suitable housing and neighborhood	
		Quality Services					

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 Points for each high-barrier population where population served in FY22 was above CoC average: Substance use disorder Mental Health Disorder Homeless for one year or more Domestic violence survivor Renewal and expansion applications receive 3 points per population; new applications receive 2 points per population 	Met standard – 7 points	Met standard – 2 points	Met standard – 2 points	Met standard – 2 points	Met standard – 5 points	Met standard – 5 points
∞	~	5	2	n/a	n/a	n/a
13	7	р	2	7	7	ъ
APR (for renewal, expansion), Esnaps application (for new)	Part 2 Application	Esnaps application	Part 2 application	CoC records	APR	CoC financial records
Serves population with high barriers to housing	Fidelity to Housing First model	Cost effectiveness – cost is at or below \$12,000 per person served	Agency audit – no findings/concerns	Program passed CoC monitoring	Program averages utilization of 90% or above	Project spent a minimum of 95% of grant
Population Served	Housing First	Grant administration			_	

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Response demonstrates experience – 5 points	95%+- \mathcal{X} points \mathbb{P}^{0} 90-94% - \mathcal{Y} points \mathcal{Q}	94.7.10	Less than 5% - 3 points つ. の?。	Renewal and expansion: Stayers increase ≥ 8% - 2.5 points; Leavers increase ≥ 15% - 2.5 points	New: overall increase 25% - 5 points Starters 0% Learers 37.5%	Renewal and expansion: Stayers increase ≥ 10% - 2.5 points; Leavers increase ≥ 25% - 2.5 points New: overall increase ≥ 5% - 4 points ゴムリート 28.しる	Met standard – 3 points
ъ	10		n/a	ы		ω	m
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Esnaps	Renewal/ expansion - APR	New – Part 2 Application	APR	Renewal/ expansion - APR	New – Part 2 Application)	Renewal/ expansion - APR New – Part 2	Application) Part 2 Application
Experience managing federal grant funds	Housing stabilization – persons remain in housing or exit to permanent housing	, .)	Returns to homelessness	Increase employment income	·	Increase non-employment income	Project leverages housing resources with housing subsidies/units not funded through CoC or ESG
	Performance outcomes						Leverage

	Project leverages health Part 2 resources, including partnership Application with a healthcare organization	Part 2 Application		ო	Met standard – 3 points	N/W
Total Points			100	100		12.5

Objective Criteria:

- Renewal 48 of 100 points, 48%
 New-43 of 100 points, 43%

System Performance Measures

- Renewal 23 of 100 points, 23% New—20 of 100 points, 20% •
 - •

McCafferty, Geraldine

From:	McCafferty, Geraldine
Sent:	Tuesday, September 12, 2023 7:39 PM
То:	Attorney Elizabeth G. Dineen; Nieves, Carmen
Subject:	Follow-up re reduction in CoC grant
Attachments:	Letter to YWCA-Alianza re reduction in grant.pdf

Liz and Carmen-

Thank you for meeting with me today. I have attached a letter that serves as formal notice of the CoC Competition Committee's decision to reduce the amount of the YWCA-Alianza TH-RRH grant, as we submit it to HUD for renewal funding.

HUD has an appeal process if you would like to challenge the decision. The procedure is provided in the attached letter.

Gerry

Geraldine McCafferty | *Director of Housing* **CITY OF SPRINGFIELD** 1600 E. Columbus Avenue | Springfield, MA 01103 t: 413.787.6500 | f: 413.787.6515 | www.springfieldcityhall.com *Office of Housing* 1600 East Columbus Avenue Springfield, MA 01103 Phone (413) 787-6500 Fax (413) 787-6515





THE CITY OF SPRINGFIELD, MASSACHUSETTS

September 11, 2023

Via email to <u>ldineen@ywworks.org</u> and <u>cnieves@alianzadv.org</u>

Liz Dineen YWCA of Western Massachusetts One Clough St. Springfield, MA 01118

Carmen Nieves Alianza DV Services 208 Race St. Holyoke, MA 01040

Dear Liz and Carmen-

I am following up on our meeting today to provide you with written notice of the decision of the CoC Competition Scoring and Ranking Committee regarding the YWCA-Alianza TH-RRH grant. As I mentioned, the Committee ranked the project at number 12 out of projects, which places it in Tier 1 for our submission to HUD. We expect that everything we include in Tier 1 will be funded.

However, for strategic planning purposes, we reduced the amount of the grant from \$695,331 to \$592,504. The reduction was made because it enables the CoC to fit more projects fully into Tier 1. We believe that this makes it more likely that we will receive funding for more of what we lace in Tier 2. The TH-RRH grant was selected for reduction because the program did not fully spend out last year's grant.

If you believe that your agencies and project were denied the right to participate in the CoC planning and funding process in a reasonable manner, you may submit a solo project application to HUD by following the procedure found in 24 CFR 578.35. If HUD finds in favor of the solo applicant, HUD may award grant funds to the project. Solo applicants must submit their solo project application in e-snaps to HUD by 8:00 PM EST, on September 28, 2023. See <u>section VII.C of the HUD CoC NOFO</u> (page 118) for additional information regarding the Solo Applicant appeal process.

Letter to Liz Dineen and Carmen Nieves Re: 2023 CoC Competition Sept. 12, 2023 Page 2

I look forward to continued partnership with each of you regarding your existing grants, and am appreciative of the good work you do with survivors every day.

Sincerely,

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Geraldine McCafferty Director

McCafferty, Geraldine

From:	McCafferty, Geraldine
Sent:	Monday, September 11, 2023 4:26 PM
То:	Linda Cruz; Christine Palmieri; Cheryl LaChance (clachance@wayfinders.org); Kathryn
	Buckley-Brawner; 'keith.rhone@csoinc.org'; Janice Humason; Emily English; Keith
	Hedlund; Lisa Hill; Monika Konopko; Amber Connors; Barnes, Pamela; Nieves, Carmen;
	malanson_walter@holyokehealth.com; skowal@CHD.ORG; Staci.lglesias@csoinc.org;
	Dave Havens; Chassity Crowell-Miller (She, Her, Hers); Jessica King; Victoria Swedin;
	Deborah McPartlan; Sarah Cloutier; Warner, Andrew; Attorney Elizabeth G. Dineen;
	Geoffrey Oldmixon; arivera@valleyopp.com; Amanda Lesnick; 'Melissa White'; Luray
	Fladd; Alton Jones; Xiomara Sanabria; Karin Jeffers
Subject:	CoC Competition - Scoring and Ranking
Attachments:	Final Scoring and Ranking 2023.pdf

CoC Applicants-

The CoC Scoring and Ranking Committee has completed its work. Please see the attachment for the ranking of projects for this year's application.

Following our submission to HUD we will hold a debriefing session on the local competition.

Gerry

Geraldine McCafferty | Director of Housing CITY OF SPRINGFIELD 1600 E. Columbus Avenue | Springfield, MA 01103 t: 413.787.6500 | f: 413.787.6515 | www.springfieldcityhall.com

MA-504 CoC Competition FY23 - Scores and ranking

		Ren	ewal Amount	Award	R	unning Total	_
HMIS	100	\$	237,992	\$ 237,992	\$	237,992	
CSO-FOH Coordinated Assessment	100	\$	243,000	\$ 243,000	\$	480,992	
DV Coordinated Entry	100	\$	282,224	\$ 282,224	\$	763,216	
MHA CoC PSH	80	\$	1,315,884	\$ 1,315,884	\$	2,079,100	
Gandara SHINE RRH	73.5	\$	381,340	\$ 381,340	\$	2,460,440	
Gandara - Replacement TH	73.5	\$	211,891	\$ 211,891	\$	2,672,331	
CSO-FOH PSH	71	\$	249,983	\$ 249,983	\$	2,922,314	
NEW: CSO-FOH PSH	69	\$	113,652	\$ 113,652	\$	3,035,966	
VOC Family PSH	68.5	\$	211,128	\$ 211,128	\$	3,247,094	
RVCC CoC Program	67	\$	324,797	\$ 324,797	\$	3,571,891	
Way Finders Turning Point	65.5	\$	67,809	\$ 67,809	\$	3,639,700	
YWCA-Alianza TH-RRH	52.5	\$	685,331	\$ 592,504	\$	4,232,204	
CHD Family PSH	51.5	\$	589,259	\$ 589,259	\$	4,821,463	Tier 1 cut-off \$4,821,463
Catholic Charities RRH3	47.5	\$	383,731	\$ 383,731	\$	5,205,194	
NEW-DV BONUS: YWCA-Alianza TH-RRH	47.5	\$	163,565	\$ 163,565	\$	5,368,759	

MA-504 CoC Competition FY23 - Scores and ranking

	Project	Accepted or		Requested		Reallocated	
Project Name	Score	Rejected	Rank	Amount	Award	Amount	_
HMIS	100	Accepted	1	\$ 237,992	\$ 237,992		
CSO-FOH Coordinated Assessment	100	Accepted	2	\$ 243,000	\$ 243,000		
DV Coordinated Entry	100	Accepted	3	\$ 282,224	\$ 282,224		
MHA CoC PSH	80	Accepted	4	\$ 1,315,884	\$ 1,315,884		
Gandara SHINE RRH	73.5	Accepted	5	\$ 381,340	\$ 381,340		
Gandara - Replacement TH	73.5	Accepted	6	\$ 211,891	\$ 211,891		
CSO-FOH PSH	71	Accepted	7	\$ 249,983	\$ 249,983		
NEW: CSO-FOH PSH Expansion	69	Accepted	8	\$ 113,652	\$ 113,652		
VOC Family PSH	68.5	Accepted	9	\$ 211,128	\$ 211,128		
RVCC CoC Program	67	Accepted	10	\$ 324,797	\$ 324,797		
Way Finders Turning Point	65.5	Accepted	11	\$ 67,809	\$ 67,809		
YWCA-Alianza TH-RRH	52.5	Accepted	12	\$ 685,331	\$ 592,504	\$ 92,827	
CHD Family PSH	51.5	Accepted	13	\$ 589,259	\$ 589,259		
Catholic Charities RRH3	47.5	Accepted	14	\$ 383,731	\$ 383,731		
NEW: YWCA-Alianza TH-RRH Expansion	47.5	Accepted	15	\$ 163,565	\$ 163,565		DV Bo

Note: New project submissions are highlighted in blue

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	2257	2248	2294	2683
Emergency Shelter Total	2,031	2,086	2,067	2456
Safe Haven Total	6	7	8	8
Transitional Housing Total	116	125	108	104
Total Sheltered Count	2153	2218	2183	2568
Total Unsheltered Count	104	30	111	115

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	139	109	245	375
Sheltered Count of Chronically Homeless Persons	104	100	170	323
Unsheltered Count of Chronically Homeless Persons	35	9	75	52

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	502	489	443	582
Sheltered Count of Homeless Households with Children	502	489	443	582
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	30	13	27	22	23
Sheltered Count of Homeless Veterans	27	13	26	18	18
Unsheltered Count of Homeless Veterans	3	0	1	4	5

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

HMIS Bed Coverage

Rates

Project Type	Total Year- Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year- Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year- Round Beds	Total Year- Round, Current VSP Beds in an HMIS Comparable Database	Total Year- Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	2,523	2,438	2,438	100.00%	58	85	68.24%	2,496	98.93%
SH Beds	8	8	8	100.00%	0	0	NA	8	100.00%
TH Beds	135	33	84	39.29%	51	51	100.00%	84	62.22%
RRH Beds	440	157	440	35.68%	0	0	NA	157	35.68%
PSH Beds	1,008	1,008	1,008	100.00%	0	0	NA	1,008	100.00%
OPH Beds	312	159	225	70.67%	0	0	NA	159	50.96%
Total Beds	4,426	3,803	4,203	90.48%	109	136	80.15%	3,912	88.39%

Notes

*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded. **For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded. In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds"). In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic

Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	902	793	799	810

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

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	342	162	0	119

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	1095	618	188	440

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for MA-504 - Springfield/Hampden County CoC

Measure 1: Length of Time Persons Remain Homeless

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

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects. Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

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

	-	UniverseAverage LOT Homeless(Persons)(bed nights)			Median LOT Homeless (bed nights)					
	Revised FY 2021	FY 2022	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	3963	4036	360	359	381	22	255	253	225	-28
1.2 Persons in ES, SH, and TH	4102	4163	362	361	381	20	261	259	234	-25

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)					Median LOT Homeless (bed nights)				
	Revised FY 2021	FY 2022	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	4039	4117	666	691	702	11	471	472	411	-61
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	4178	4246	664	692	701	9	468	468	410	-58

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to	Homelessr han 6 Mont) Homelessi to 12 Montł	ness from 6 ns		to Homeless 3 to 24 Mon			of Returns Years
	Revised FY 2021	FY 2022	Revised FY 2021	FY 2022	% of Returns	Revised FY 2021	FY 2022	% of Returns	Revised FY 2021	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	38	10	2	1	10%	1	0	0%	1	0	0%	1	10%
Exit was from ES	1484	1151	32	13	1%	10	16	1%	61	39	3%	68	6%
Exit was from TH	45	37	1	0	0%	0	4	11%	2	0	0%	4	11%
Exit was from SH	8	2	0	0	0%	0	0	0%	0	0	0%	0	0%
Exit was from PH	514	329	6	3	1%	14	2	1%	0	4	1%	9	3%
TOTAL Returns to Homelessness	2089	1529	41	17	1%	25	22	1%	64	43	3%	82	5%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	2248	2294	46
Emergency Shelter Total	2086	2067	-19
Safe Haven Total	7	8	1
Transitional Housing Total	125	108	-17
Total Sheltered Count	2218	2183	-35
Unsheltered Count	30	111	81

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	4108	4119	4171	52
Emergency Shelter Total	3966	3972	4035	63
Safe Haven Total	12	12	14	2
Transitional Housing Total	145	152	134	-18

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	217	256	276	20
Number of adults with increased earned income	9	9	18	9
Percentage of adults who increased earned income	4%	4%	7%	3%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	217	256	276	20
Number of adults with increased non-employment cash income	107	104	128	24
Percentage of adults who increased non-employment cash income	49%	41%	46%	5%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	217	256	276	20
Number of adults with increased total income	113	109	140	31
Percentage of adults who increased total income	52%	43%	51%	8%

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	74	104	113	9
Number of adults who exited with increased earned income	9	8	16	8
Percentage of adults who increased earned income	12%	8%	14%	6%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	74	104	113	9
Number of adults who exited with increased non-employment cash income	14	26	16	-10
Percentage of adults who increased non-employment cash income	19%	25%	14%	-11%

Metric 4.6 - Change in total income for adult system leavers

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	74	104	113	9
Number of adults who exited with increased total income	22	33	29	-4
Percentage of adults who increased total income	30%	32%	26%	-6%

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2506	2513	2528	15
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	801	801	583	-218
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	1705	1712	1945	233

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	2681	2713	2713	0
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	874	879	660	-219
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1807	1834	2053	219

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	4	4	0	-4
Of persons above, those who exited to temporary & some institutional destinations	0	0	0	0
Of the persons above, those who exited to permanent housing destinations	4	4	0	-4
% Successful exits	100%	100%		

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

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	2010	2028	1996	-32
Of the persons above, those who exited to permanent housing destinations	952	944	765	-179
% Successful exits	47%	47%	38%	-9%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	867	852	881	29
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	829	820	845	25
% Successful exits/retention	96%	96%	96%	0%

2023 HDX Competition Report FY2022 - SysPM Data Quality

MA-504 - Springfield/Hampden County CoC

		All ES, SH All TH All PSH, OPH			All RRH		All Street Outreach								
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non- DV Beds on HIC	2618	2727	2654	26	45	45	1171	1137	1275	1095	618	188			
2. Number of HMIS Beds	2576	2727	2620	15	34	34	884	1071	1120	187	132	188			
3. HMIS Participation Rate from HIC (%)	98.40	100.00	98.72	57.69	75.56	75.56	75.49	94.20	87.84	17.08	21.36	100.00			
4. Unduplicated Persons Served (HMIS)	4364	3975	4039	48	145	134	1110	985	1008	379	249	250	139	127	122
5. Total Leavers (HMIS)	2729	2510	1994	24	71	72	128	113	149	295	63	94	12	5	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	683	593	794	6	0	10	2	3	12	1	0	13	3	0	0
7. Destination Error Rate (%)	25.03	23.63	39.82	25.00	0.00	13.89	1.56	2.65	8.05	0.34	0.00	13.83	25.00	0.00	

2023 HDX Competition Report FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for MA-504 - Springfield/Hampden County CoC

Date of PIT Count

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

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/28/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/24/2023	Yes