

Before Starting the CoC Application

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

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

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

1. The FY 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2024 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2024 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: TX-603 - El Paso City & County CoC

1A-2. Collaborative Applicant Name: El Paso Coalition for the Homeless

1A-3. CoC Designation: CA

1A-4. HMIS Lead: El Paso Coalition for the Homeless

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:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2023 to April 30, 2024:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

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

1B-1a.	Experience Promoting Racial Equity.	
	NOFO Section III.B.3.c.	

Describe in the field below your CoC's experience in effectively addressing the needs of underserved communities, particularly Black and Brown communities, who are substantially overrepresented in the homeless population.

(limit 2,500 characters)

This is the Continuum of Care (CoC) – a transformative approach that is a game-changer for underserved communities, particularly Black and Brown communities who disproportionately bear the burden of homelessness. At its core, the CoC model is built on culturally competent services that truly understand and respect the unique backgrounds, values, and beliefs of the communities they serve. Picture bilingual staff, programs that acknowledge the distinct challenges and strengths of Black and Brown communities, and services that reflect the community they serve. But we must confront the ugly truth: systemic racism is a root cause of homelessness. The CoC model tackles this head-on, advocating for policy changes, education, and advocacy to dismantle racial disparities in housing, employment, education, and criminal justice. We cannot ignore the deep-seated trauma that many homeless individuals have endured. The CoC model prioritizes trauma-informed care, providing safe spaces and avoiding re-traumatization. This is crucial for communities of color who have faced generations of systemic trauma. The CoC's Housing First approach ensures people get permanent housing quickly, providing support needed for stability. A stable home is the foundation for addressing employment, health, and education. For communities of color, this means access to safe, affordable housing in neighborhoods with real opportunities. The CoC's coordinated entry system streamlines access to services, ensuring the process is accessible, equitable, and aware of the unique barriers communities of color face. Community involvement is at the heart of the CoC model, with education, outreach, and partnerships that give community members a real voice in shaping solutions. Importantly, the CoC model leverages data to understand homelessness and track progress. By collecting and analyzing race and ethnicity data, we can target services effectively and hold ourselves accountable for reducing homelessness in Black and Brown communities. The Continuum of Care model is a powerful framework for transforming how we address homelessness, centering equity and the unique needs of communities of color. It has the potential to create lasting change and ensure everyone has a safe, stable place to call home. We are proud to have our CoC Board composed of more than 57% Black (1 LGBTQIA+ woman and three CIS Gender men), 43% Brown (3 women)

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 your CoC's geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).	

(limit 2,500 characters)

CoC Board is composed of 43% (3 Brown CIS Gender women), 4 Black (1 LGBTQIA+ retired veteran woman, 2 CIS gender retired veteran men & 1 male with lived experience. 1)Each year an email is distributed to the Coalition’s listserv of 450 plus email addresses describing the work of the CoC including the Coalition’s role as a coordinating entity for numerous agencies that provide housing, services, and support to the homeless in our community, inviting entities to join the initiative and support the Coalition and our partners to address strategic initiatives to prevent and end homelessness. Membership applications are available on our website. Invitations are communicated, announced, publicly posted on community bulletin boards and released through electronic media (social media and CoC list serve). CoC invites community members to activities such as county-wide community task force meetings, Coalition meetings, business districts, and through many networking opportunities. 2)The CoC ensures effective communication w/individuals with disabilities by sharing invites/apps in a variety of accessible electronic formats, including CoC webpage, which is responsive to screen reader software (e.g., accessibility tags to PDF docs) and email listservs.3)The CoC ensures that Homeless/formerly homeless are continuously encouraged to join the CoC during events such as Point in Time, homeless advisory meetings (all homeless-local mental health authority), etc., and throughout the year. The CoC conducts targeted outreach to have conversations with those experiencing homelessness and what a pivotal role they can have in how the system is designed. The CoC is inclusive when soliciting new members to address equity in El Paso County. Invited entities include, for example, Ysleta del sur Pueblo, Department of Finance and Revenue (Indian Reservation); Centro de Salud Familiar La Fe, La Fe Clinic (FQHS targeting those who residing in Segundo Barrio, a low-income, Hispanic neighborhood); Center of Hope (non-profit agency serving victims of human trafficking); Casa de Colores (non-profit agency serving LGBTQIA+); Volar Center for Independent Living (non-profit agency supporting people with disabilities) and Borderland Rainbow Center (LGBTQIA+ community center)The CoC is focused on diversity in its representation.

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

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

(limit 2,500 characters)

1)CoC solicits a wide variety of individuals/organizations who weigh in on the issue of homelessness. Through the ongoing planning process which includes monthly meetings of the CoC Planning body, we rely on local expertise from nonprofits that oversee/manage homeless programs, along with homeless & formerly homeless people who have lived experience. Also, we solicit participation from our local PHAs & law enforcement in all committees. The CoC works closely with CoC’s across the state to obtain a perspective on how other communities are addressing similar issues & review best practices. 2)CoC coordinates monthly general membership meetings which are advertised on the agency’s website & announced through the listserv of 450+ email addresses. Meetings are open to the public & the agenda includes items where interested entities can offer opinions, share upcoming functions, or discuss issues with existing programs. City, ESG Recipient & a member of the CoC, frequently contacts the CoC regarding feedback from City Council Reps & their constituents. 3)The CoC ensures effective communication w/individuals with disabilities by sharing invites/apps in a variety of accessible electronic formats, including CoC webpage, which is responsive to screen reader software (e.g., accessibility tags to PDF docs) & email listservs. 4)The CoC continuously gathers information from the various meetings throughout the year in addressing/preventing homelessness. Over the past year, the Planning Committee has focused on addressing improvements to overall program performance, as evaluated in the system performance report. Over the past year, the Performance Committee has been evaluating local benchmarks, for specific subpopulations, i.e., Chronically Homeless, Youth, Survivors of DV, etc. Youth Collaborative was convened to focus on evolving the current youth homeless system, by identifying crucial positions/opinions on stabilizing the Youth Advisory Board. Of this, a focused Point in Time was developed to account for sheltered & unsheltered youth. The Youth Advisory Board continues to develop events to continue to identify homeless youth. Information gathered from providers identified the need for funds with more flexibility for preventing households from becoming homeless, i.e., Diversion. Information gathered in addressing, preventing & ending homelessness is incorporated in the ESG/CoC priorities. As a result, the CoC is in its 2nd year of administering Diversion funds.

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

(limit 2,500 characters)

1)The CoC actively notifies and encourages new proposals/applicants who are not currently funded. CoC notified the public that the local competition was open and would be accepting projects applications via email announcement on 8/3/23, on the CoC website and other community list serves. In the local competition notice, two public workshops were scheduled for 08/09/2023 for entities interested in submitting a new project proposal or for renewals with questions about the process. Handouts highlighting project criteria and competition timeline, as posted in the RFP, were distributed to attendees. 2)Local competition documentation indicated that all projects must be submitted via email with all required documents attached. Two workshops were scheduled on 8/9/23, AM for Renewals and PM for New Projects. Both workshops focused on the application process, including eligibility, and addressed any immediate questions. In addition to the workshop, CoC Staff were available via email, virtually or phone call. 3)Communicated in the local competition documentation and the workshops, was the process, the timeline, and the scoring tool. The CoC adopted the scoring and ranking of 19 FY 2023 CoC Application projects through the local RFP process. The rating/ranking tool for new and renewal projects, not only focused on performance but on community need and HUD best practices, agency capacity, ability to meet stated CoC goals and HUD priorities. 4) The CoC announces at every meeting the availability of accessible formats and ensures effective communication with individuals with disabilities by posting content and documents on our website that can be accessible to screen-reading software via PDF documents.

1C. Coordination and Engagement

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC’s geographic area.	

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

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

In the chart below select yes or no to indicate whether your CoC:

1.	Consulted with ESG Program recipients in planning and allocating ESG Program funds?	Yes
2.	Provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?	Yes
3.	Ensured local homelessness information is communicated and addressed in the Consolidated Plan updates?	Yes
4.	Coordinated with ESG recipients in evaluating and reporting performance of ESG Program recipients and subrecipients?	Yes

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated?	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure family members are not separated?	Yes
3.	Worked with CoC and ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients?	No
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance?	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers?	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 works and coordinates closely with 14 school district Homeless Liaisons, SEA and LEAs to ensure McKinney-Vento educational services are being met and to identify children eligible for homeless education services. Participation assures that programs are actively engaging with schools and the CoC's policies and that programs address the educational needs of youth. The CoC convenes quarterly with school districts and shelter staff. CoC's policies ensure homeless children in CoC/ESG programs are enrolled in school and connected to services in collaboration with School District Homeless Liaisons. Shelters are provided materials that enforce students' rights to continuing education services regardless of homeless status. School district homeless liaisons collaborate with runaway shelters to connect runaway youth with appropriate resources based on their age. Texas Education for Homeless Children and Youth (TEHCY) provides resources and services to ensure that all Texas children living in homeless situations can enroll in, attend, and succeed in school. CoC policy required that providers serving households w/children designate a specialized staff person as an educational liaison to inform households of their eligibility for schooling. The CoC has strong collaborative relationships with each of the school districts in the CoC Geographic area. Strong partnerships have made a positive impact on the efficacy in linking homeless children back into school with transportation and any services they may need under McKinney-Vento. All Homeless Liaisons participate routinely in membership meetings of the CoC. The CoC has a formal partnership with a Homeless Liaison from Socorro ISD through their participation on the CoC Board. 1C-4b. Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services. NOFO Section V.B.1.d

1C-4b.	Informing Individuals and Families Who Have Recently Begun 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 have recently begun experiencing homelessness of their eligibility for educational services.

(limit 2,500 characters)

Providers who work with families with children or unaccompanied youth attend State & local education mtgs. Provider staff at family programs have a designated position (family advocate) that work with & meet with relevant school personnel in the appropriate school district to discuss issues the children in the program may be experiencing that may impact their education. Emergency Shelters & Transitional Housing programs have policy/procedures, publicly posted, informing residents of their right to educational services for homeless children. At the time of intake, Case Managers provide information to residents that details the steps which will be taken to ensure that parents are aware of & take advantage of their rights under McKinney-Vento, to include, uniforms, transportation, school supplies & after school tutoring, which is provided by Region 19, local Education Service Center. The CoC, SEA & LEA ensure that shelter staff are trained regularly to ensure that families seek out & receive services in a timely manner. The homeless liaisons & shelter staff work to maximize benefits for the homeless children. The CoC has an RRH program for youth that has a formalized MOU with a large school district. CoC policy requires that providers serving households with children designate a specialized staff person as an educational liaison to inform households of their eligibility for schooling. The liaison provides direct support to set up services on the household's behalf to ensure there is no disruption in education services to those experiencing homelessness or who are transitioning from shelter to permanent housing. The CoC provides quarterly training on HUD funded programs & eligibility. The CoC also collaborates with UTEP FHAR (Foster Homeless Adoptive Resources). This collaboration expands educational services needs among homeless households who are no longer school age.

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	Yes	Yes
2.	Child Care and Development Fund	Yes	Yes
3.	Early Childhood Providers	Yes	Yes
4.	Early Head Start	Yes	Yes
5.	Federal Home Visiting Program—(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	Yes	Yes
7.	Healthy Start	No	No
8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking—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	Yes
3.	Anti-trafficking Service Providers	Yes
	Other Organizations that Help this Population (limit 500 characters)	
4.		

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

Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:

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

(limit 2,500 characters)

The CoC coordinates with our local Domestic Violence shelter for the safety needs needed by victims and survivors of DV, Dating Violence, Stalking and Sexual Assault: 1) The DV Emergency Transfer Plan prioritizes safety and victim centered services to prioritize safety. Our DV provider, who is active in the CoC, offers trauma-informed, victim centered services that focus on maintaining safety/security, referrals to PH interventions that prioritize safety, confidential ES and 24-hour hotline. The Transfer Plan also requires all CoC providers to be trauma-informed and to troubleshoot other possible options to resolve in a safe way. The Transfer Plan has been in effect since 2020. 2) Coordinated Entry Policies ensure survivors have access to all resources. Coordinated Entry (CE) staff receives ongoing training on safety protocols, and how to notify participants fleeing or attempting to flee DV or sexual assault. Currently, CE refers DV victims to DV center hotline. The CoC is working with our DV provider to implement their newly funded CE project. The shelter assists victims to navigate the criminal justice and social service systems to meet their needs and maintain their safety, based on choice. The CoC has 3 shelters that provide safe and confidential shelter/services to survivors of Domestic Violence. As part of the CoC, the shelter provides consistent guidance to the CoC and community on issues surrounding victims and provides needed services. CoC coordinates housing services w/shelters through referral and collaboration at the DV Center to ensure victims are given safe options and safety planning is received. Safety and security are maintained through safety planning and following all applicable laws and statutes guiding confidentiality and disclosure of victims. CoC ensures DV training so non-victim service providers are knowledgeable about safety precautions and resources to assist victims.

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

(limit 2,500 characters)

CoC has implemented a coordinated entry process that addresses the unique needs of DV survivors, prioritizing their safety & confidentiality.

Trauma-Informed Approach: DV survivors have experienced significant trauma. Therefore, all assessments & interactions are conducted in a trauma-informed manner to minimize re-traumatization. Staff are trained to be sensitive to the survivor's emotional state, to listen without judgment, & to empower the survivor to make their own decisions whenever possible.

Confidentiality Protocols: The CoC has strict confidentiality protocols in place to protect the survivor's privacy. All staff & volunteers are required to sign confidentiality agreements, & information is shared only on a need-to-know basis. The CoC uses secure communication methods & stores records in a locked, secure location.

Safety Planning: The CoC works with the survivor to develop a personalized safety plan. This plan identifies potential risks & outlines strategies to mitigate those risks. It may include things like changing contact information, varying daily routines, & having a plan for emergency situations.

Direct Referral to DV Providers: When appropriate, the CoC bypasses regular service providers & directly refers survivors to domestic violence hotlines or organizations. These organizations specialize in providing support to domestic violence survivors & can offer more targeted assistance.

Collaboration with DV Providers: The CoC collaborates with DV providers to ensure survivors receive the support needed. These providers offer best practices for serving DV survivors & help the CoC develop policies & procedures that are trauma-informed & survivor-centered.

Cultural Competency: The CoC strives to provide culturally competent services. Staff are trained to be aware of their own biases & to provide services that are respectful of the survivor's culture. They also have access to interpreters & cultural brokers as needed.

Minimal Assessment: The CoC minimizes the number of assessments & interviews that survivors must go through. They only collect the information that is absolutely necessary to resolve the survivor's immediate housing crisis. This helps to reduce the stress & trauma of the assessment process.

Risk Assessment Tools: The CoC uses risk assessment tools to identify the level of danger the survivor is in & to develop an appropriate referral strategy. These tools help to ensure that survivors who are in imminent danger are prioritized

1C-5c.	Coordinated Annual Training on Best Practices to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

In the chart below, indicate how your CoC facilitates training for project staff and coordinated entry staff that addresses best practices on safety planning and confidentiality protocols:

		Project Staff	Coordinated Entry Staff
1.	Training Occurs at least annually?	Yes	Yes
2.	Incorporates Trauma Informed best practices?	Yes	Yes
3.	Incorporates Survivor-Centered best practices?	Yes	Yes
4.	Identifies and assesses survivors' individual safety needs?	Yes	Yes
5.	Enhances and supports collaboration with DV organizations?	Yes	Yes
6.	Ensures survivors' rights, voices, and perspectives are incorporated?	Yes	Yes
	Other? (limit 500 characters)		
7.			

1C-5d.	Implemented VAWA-Required Written Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below:

1.	whether your CoC's written policies and procedures include an emergency transfer plan;
2.	how your CoC informs all households seeking or receiving CoC Program assistance about their rights to an emergency transfer;
3.	what your CoC requires households to do to request emergency transfers; and
4.	what your CoC does in response to households requesting emergency transfers.

(limit 2,500 characters)

1. The CoCs written policies and procedures include an emergency transfer plan. 2) The CoC program prioritizes keeping participants fully informed about their rights, particularly related to emergency planning. From the initial intake and at least annually thereafter, the CoC program ensures that all participants clearly understand their rights. 3) A critical component of this is the development of a personalized emergency plan for each participant. The CoC program works closely with each individual or family to create a plan tailored to their specific needs and circumstances. These plans include essential contact information, details about service providers, specific emergency instructions, and information about the participant's functional and support needs. They must inform their DV Advocate or CE of their request to activate their emergency transfer plan.

4)The CoC program recognizes the importance of ready access to these emergency plans. As such, it ensures that plans are readily available and easily accessible to participants at all times. To keep these plans relevant and effective, the CoC program reviews and updates them with participants at least annually, and whenever there is a change in the participant's circumstances. Training is another crucial aspect of the CoC program's approach. Participants receive comprehensive training on their emergency plans, including how to execute them during emergency situations. This empowers individuals and families to feel better prepared for any crises that may arise. Confidentiality is strictly maintained for all emergency plans, in accordance with applicable federal and state laws. The CoC program understands the sensitive nature of this information and safeguards it appropriately. Through these proactive measures, the CoC program ensures that participants are fully aware of their rights related to emergency planning and are well-equipped to navigate emergency situations. Once the client requests their emergency transfer plan to be activated advocates, housing manager, landlord, and any other instruction on the transfer plan is set into motion to successfully remove the DV survivor from any danger.

1C-5e.	Facilitating Safe Access to Housing and Services 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 ensures households experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within your CoC's geographic area.

(limit 2,500 characters)

CoC has taken concrete steps to ensure that households reeling from trauma or fearing for their safety due to domestic violence, dating violence, sexual assault, or stalking have swift, safe access to all the housing & services available within its geographic area. **Coordinated Entry Process:** The CoC streamlined the process for quickly identifying, assessing, & connecting these households with the most appropriate housing & services. This minimizes the trauma of having to relive their stories multiple times with different providers. There are times where CE will bypass all CoC protocols to connect the DV survivor directly with a DV service provider to minimize re-traumatization. **Adhering to Strict Confidentiality & Safety Protections:** The CoC & all participating organizations are prioritizing strict confidentiality & safety protocols to shield survivors' identities & locations from abusers. This includes using secure, confidential referral systems & ensuring that no one is turned away due to a lack of availability. **Providing Priority Access:** Households fleeing situations are given priority access to all available housing programs, including emergency shelters, transitional housing, RRH & PSH. This ensures they quickly get the safe housing they desperately need. **Offering Mobile Advocacy Services:** The CoC is funding mobile advocacy services that can meet survivors in a safe location of their choice, rather than requiring them to risk being seen at a fixed office or building that an abuser may know about. **Operating 24/7 Crisis Hotlines:** DV service providers provide round-the-clock crisis hotlines that survivors can call for immediate support & referrals to safe housing & services. Hotlines are staffed by trained advocates who provide instant guidance & connect to vital resources. **Partnering with Specialized Providers:** The CoC is building strong partnerships with local domestic violence & sexual assault providers, shelters, & rape crisis centers. **Utilizing Flexible Funding:** The CoC is using flexible funding to meet the unique needs of survivors, such as providing short-term rental assistance, security deposits, moving costs, or replacing essential belongings like clothing & documents that were lost or left behind in the escape. **Assisting with Housing Search:** The CoC is providing housing search assistance specifically tailored to the safety needs of survivors, such as finding apartments with secure entry systems, locating units, and trustworthy landlords.

1C-5f.	Identifying and Removing Barriers 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 ensures survivors receive safe housing and services by:	
	1. identifying barriers specific to survivors; and	
	2. working to remove those barriers.	

(limit 2,500 characters)

Addressing the systemic barriers within homeless response systems that hinder the safe housing of survivors of DV is crucial. To ensure safety for victims, protocols are established for CE to bypass regular service providers when appropriate & direct to a DV 24-hour hotline. Otherwise, specific questions facilitate alternate interventions, relying on the guidance/expertise of DV providers in serving DV in a true client-centered approach based on what they identify as their immediate need. One critical need for many survivors, that has often been overlooked when considering the services DV programs provide, is stable housing. DV programs typically offer safety planning, counseling, advocacy, support groups, & some form of temporary safe housing (shelter/transitional housing), but increasingly, survivors need assistance securing safe & stable long-term housing. CoC consistently monitors data, i.e., PIT, HIC, APR, CAPER, to assess the needs of the community when analyzing gaps in services & barriers, specifically related to services for survivors. CoC coordinates with our local DV shelter for services needed by victims. The DV shelter assists victims in navigating the criminal justice & social service systems to meet their needs & maintain their safety, based on choice. DV survivors are given top priority when working with a DV service provider to ensure that they do not experience any barriers in their time of need or transfer emergency.

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

(limit 2,500 characters)

1) The CoC continues its collaboration with the Borderland Rainbow Center (BRC), an LGBTQIA+ community center in El Paso County. The BRC helps the CoC understand the evolving needs of the LGBTQIA+ community and provides training as needed to enhance members' knowledge. In July-August 2024, the CoC received Sexual Harassment and Fair Housing Act training from the Texas Workforce Commission and HUD's Equal Access Rule training regarding LGBTQIA+ individuals and families. Trauma-informed care, motivational interviewing, harm reduction, racial equity, and LGBTQIA+ cultural competency are standards for all street outreach, CE, and providers within the CoC. Additional partners include the Dept. of Public Health (HOPWA), Sun City Pride, and PFLAG.2) The CoC is developing anti-discrimination policies aligned with the Equal Access Final Rule and Gender Identity Final Rule. The CE process prohibits screening out individuals due to perceived barriers, including income status, substance abuse history, domestic violence, resistance to services, disability-related needs, eviction history, poor credit, lease violations, or criminal record. The CE process documents participants' membership in protected classes but does not use this as justification for restricting referral options.3) The CoC assists in developing and implementing anti-discrimination policies consistent with HUD guidance. We monitor CoC Program-funded projects to ensure their policies align with practices. The CoC reviews programmatic benchmarks and adherence to Performance Policies & Procedures annually. Fair Housing and Equal Access are incorporated into all training (RRH, PSH, CE, etc.).4) CoC Program-funded projects not adhering to program requirements receive a monitoring compliance notification from the Performance Analyst outlining findings and concerns. Agencies must respond in writing within 30 days and address findings promptly.

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

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 only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Housing Authority of the City of El Paso a.k.a. HOME		No	Yes

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

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

(limit 2,500 characters)

1) The Continuum of Care (CoC) is fortunate to have established strong working relationships with the City of El Paso Housing Authority (HACEP) and El Paso County Housing Authority. The CoC proactively educates both Public Housing Agencies (PHAs) on homelessness issues and the need for Permanent Supportive Housing (PSH) options beyond CoC-funded programs. As a result of these efforts, HACEP has adopted a homeless preference for public housing. Ongoing discussions aim to increase the preference for Housing Choice Vouchers (HCVs). El Paso County Housing Authority has partnered with the CoC for strategic planning and is reviewing its policies to establish a homeless preference. The CoC maintains regular one-on-one meetings and email communication with both PHAs, supplemented by data on existing PSH programs. This collaborative process enables the CoC and PHAs to assess the current needs of the homeless population effectively. The CoC actively engages with both PHAs serving the geographic area: HACEP and El Paso County Housing Authority. HACEP provides greater access to HCVs, and manages HUD-Veterans Affairs Supportive Housing (VASH) vouchers in collaboration with the local VA. El Paso County Housing Authority manages HUD-VASH vouchers in collaboration with the VA and HCV programs. The CoC will continue collaborating with both PHAs to share Point-in-Time (PIT) and Homeless Management Information System (HMIS) data for reviewing preference criteria.

2) The CoC has initiated discussions with both HACEP and El Paso County Housing Authority about adopting or increasing homeless prioritization within their programs. The CoC will continue these conversations to maximize opportunities for homeless individuals to access PHA resources.

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

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

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

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

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

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	Yes
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	Yes
8.	Other Units from PHAs:	

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

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

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Preventing People Transitioning from Public Systems from Experiencing Homelessness.	
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NOFO Section V.B.1.h.

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the public systems 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.
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1.	Prisons/Jails?	Yes
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	Yes
4.	Foster Care?	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
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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 2024 CoC Program Competition.	17
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 2024 CoC Program Competition that have adopted the Housing First approach.	17
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 2024 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.	
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NOFO Section V.B.1.i.

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.
Describe in the field below:

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

(limit 2,500 characters)

1)The Continuum of Care (CoC) ensures Housing First compliance by reviewing project policies, procedures, and performance reports. Factors assessed include income, origin, homelessness duration, and disabilities. 2) The Performance Committee ensures strategies are in place to meet this measure. The CoC conducts quarterly evaluations of all projects, regardless of funding, against local benchmarks. 1-lack of income; 2-where households are originating from, i.e., streets, 3-reported length of time households are homeless, 4-reported disabilities, i.e. mental health, substance abuse disorders, physical disabilities. Reviewing these various data points in HMIS provides a detailed portrayal of each of the households. After the CoC Competition, the CoC works with programs to improve standards. New and renewal projects must sign a Housing First Agreement.3)CoC staff review all projects, regardless of funding source, in evaluating performance metrics as it relates to the CoCs local benchmarks. The frequency is quarterly. After all most recent versions of program Policies & Procedures are submitted during and after the CoC Competition, the CoC works with programs to address & improve program standards. In addition, the CoC reviews all APRs prior to being uploaded into SAGE. In addition to APR, new & renewal CoC projects are required to sign a Housing First Agreement. To improve Housing First fidelity, the CoC conducts regular evaluations, prioritizes continuous improvement, and uses assessment tools. Guidance is distributed to ensure accurate implementation. The CoC actively seeks Housing First funding, emphasizing an ongoing commitment to these principles, such as CoCBuilds.

1D-3.	Street Outreach—Data—Reaching People Least Likely to Request Assistance.	
	NOFO Section V.B.1.j.	

Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

For years, the CoC has spearheaded a crucial outreach consortium, tirelessly working to locate every individual forced to live on the streets. Secured funding from various donors & agencies support this comprehensive initiative, which specifically targets vulnerable populations such as youth, LGBTQIA+, veterans, those grappling with mental health disorders, & families in desperate circumstances.

But the situation has grown even more dire. Since TX Governor Greg Abbott's anti-camping ban took effect on 9/1/21, the lives of those experiencing homelessness have become even more precarious. That's why the CoC has swiftly established an MOU with the El Paso Police Department channel one & developed emergency protocols called Homeless Outreach Street Programs (HOST). HOST is racing against time to identify the size & location of camps, assess the specific needs of the people there, & connect them with vital services like substance abuse treatment, mental health care, & safe housing. Our teams work around the clock, seven days a week, including after hours & for emergencies. We've set up a 'Channel 1' hotline with the El Paso Police Department so they can reach our outreach teams immediately to address urgent situations.

The CoC is committed to relentless engagement with those who are the hardest to reach, carefully building trust with individuals who have been let down time & time again by the system. We've assembled specialized teams to reach marginalized groups like youth, LGBTQIA+ individuals, veterans, & those struggling with mental health disorders. We're targeting encampments with a high concentration of people who have been chronically homeless. Working hand in hand with police to identify those who have fallen through the cracks & documented in the HMIS database.

The stakes are too high. The CoC will keep fighting to ensure that 100% of our geographic area is covered, that no one is left behind. We'll keep seeking out every last dollar of ESG, SSVF, SAMSHA, RHY funding, & donations from foundations, private donors, & volunteers. We'll keep expanding our teams until every individual experiencing homelessness has been reached & connected with the support they desperately need.

We can't afford to let bureaucracy get in the way. The CoC is ready to do whatever it takes to prevent criminalization of homelessness & to ensure every person has access to safe, dignified housing & services. We won't rest until the word 'homeless' is a relic of the past.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

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

	Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness
1.	Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	Yes	Yes

2.	Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	Yes	Yes
3.	Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?	Yes	Yes
4.	Other:(limit 500 characters)		

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

	HIC Longitudinal HMIS Data	2023	2024
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	400	598

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:

- works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and
- promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1)CoC systematically keeps staff informed through email distribution, through agenda items at membership meetings, through dissemination of training opportunities including webinars & conferences. Mainstream benefit providers partners are TX HHS (SNAP, TANF, people of disabilities, etc.), EP County General Assistance, FQHCCs, & Molina Health Care. CoC provides guidance on SOAR training to providers to ensure quick access to SSA benefits. CoC disseminates information on the availability of mainstream resources. State/local benefit programs are invited to membership meetings to disseminate information on programs that would benefit our population, i.e... Peer recovery, TANF/food stamps, rehab,etc. CoC staff are encouraged to attend benefits meetings & review benefit program websites to ensure they are aware of changes & opportunities. CoC collaborates with providers assisting with ACA applications & linkages to health care through mobile units, multiple clinics. CoC collaborates with local county hospitals that offer healthcare options for those who are experiencing homelessness. One FQHC is funded by the National Healthcare for the Homeless Foundation for a dedicated clinic for the homeless. The county hospital & the FQHC work together to coordinate health care coverage to address medical needs. Second FQHC, provided a letter of commitment stating that they will provide access to treatment & recovery services for all program participants in CoC (see attachment MOU + letter of commitment). 2) A key strategy that the CoC has implemented over the past 6 years is for our CoC Program-funded projects participation in the SSI/SSDI Outreach, Access, & Recovery (SOAR) process. CoC program-funded projects are required to participate in SOAR training & use the SOAR process to better identify, engage, & enroll homeless households with disabilities so they can receive cash assistance they are entitled to. Our CoC Compliance Director has completed the online SOAR Adult Curriculum on May 15, 2023 and has completed SOAR Leadership Academy Training on August 10, 2023, he is now the El Paso SOAR Lead. Changes to our local CoC NOFO and application requiring all agencies that receive CoC funding have at least on SOAR certified advocate on site. The requirement for all agencies was the completion of one SOAR application for 2024.

ID-7.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
	NOFO Section V.B.1.n.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to develop CoC-wide policies and procedures that:	
1.	respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1)The CoC will adhere strictly to all local, state, and federal guidelines for implementing policies and procedures during a state of emergency. Should the County/City receive additional funding in such an event, the CoC will ensure all funds are allocated and utilized appropriately. The CoC is fully committed to adhering to the Public Health Department's Isolation and Quarantine guidelines for the City/County of El Paso, aligning all actions with the Center for Disease Control (CDC) recommendations for isolation and quarantine. The CoC will consider all available evidence-based public health interventions to reduce COVID-19 infection and spread. In the event of any other outbreak, the CoC will comply fully with CDC and Public Health Department directives.

2) It is well-documented that households experiencing homelessness are increasingly susceptible to COVID-19. As such, the CoC has enacted policies to prioritize this vulnerable population, including: supporting staff and residents in staying up-to-date with COVID vaccines, providing COVID testing as needed, maintaining a stock of personal protective equipment, ensuring supplies for hand hygiene, cleaning, and disinfection are always available and implementing isolation protocols for residents who test positive

The CoC remains hyper-vigilant regarding U.S. outbreaks of E. coli, Listeria, Salmonella, Measles, and COVID-19 mutations, standing ready to respond effectively should these penetrate our city.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.n.	
	Describe in the field below how your CoC:	
1.	effectively shared information related to public health measures and homelessness; and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

As we continue to navigate the challenges posed by COVID-19, its emerging mutations, and the ever-present threat of other infectious diseases, the importance of robust collaboration, data sharing, and proactive protocols has never been more clear. The [Name of Your Organization] is committed to fortifying our defenses and enhancing our ability to swiftly respond to infectious disease outbreaks that could impact our community.

Strengthening Partnerships and Data Sharing

1) We are in active discussions with the Paso Del Norte Public Health Exchange (PHIX) to establish a formal collaboration. PHIX facilitates secure, electronic data sharing between a network of hospitals, emergency departments, clinics, public health agencies, and other healthcare providers. This partnership will grant our providers access to patients' comprehensive medical records at the point of care, thereby improving treatment outcomes.

2) Simultaneously, we are sharing data with the Texas Homeless Data Sharing Network (THDSN), a collaborative database comprised of nine Texas Continuums of Care. This partnership enables us to provide critical COVID-19 vaccination data to Texas Health and Human Services (HHS), promoting a more coordinated statewide response.

Addressing vulnerabilities and enhancing protocols, because of the COVID-19 pandemic, its ongoing mutations, has underscored the importance of vigilance and proactive planning. We have identified key areas for improvement and are taking swift action to bolster our response:

1. **Vaccination Support:** We are working closely with staff and residents to ensure access to the latest vaccines and boosters, promoting herd immunity within our community.
2. **Rapid Testing:** We have implemented protocols for rapid testing to quickly identify and isolate cases, preventing potential outbreaks.
3. **PPE and Supply Management:** We are maintaining a robust stock of personal protective equipment (PPE), hand hygiene supplies, and cleaning/disinfection materials to safeguard our community.
4. **Isolation Protocols:** We have established clear procedures for the immediate isolation of individuals who test positive for any communicable or infectious disease, minimizing the risk of transmission. The health and safety of our community is our top priority. We will continue to monitor the situation closely and implement additional measures as necessary to protect those we serve. Ongoing vigilance and cooperation are crucial in our collective efforts to prevent outbreak

1D-8.	Coordinated Entry Standard Processes.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	can serve everybody regardless of where they are located within your CoC's geographic area;	
2.	uses a standardized assessment process to achieve fair, equitable, and equal access to housing and services within your CoC;	
3.	collects personal information in a trauma-informed way; and	
4.	is updated at least annually using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 characters)

1)The Coordinated Entry System (CES) is designed to ensure that all individuals in need, regardless of their location within the Continuum of Care (CoC) geographic area, have fair, equitable, and equal access to housing and services. This is achieved through the use of the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT).

2)The VI-SPDAT is a standardized assessment tool used across the CES to evaluate an individual's or household's vulnerability and service needs. It takes into account factors such as the length of homelessness, presence of disabilities, and risk factors that may impact an individual's ability to obtain and maintain housing.
 By using the VI-SPDAT, the CES can prioritize those with the greatest need and vulnerability, ensuring that the most appropriate and intensive interventions are targeted to those who will benefit the most. This helps to make the best use of the limited resources available within the CoC.

3)The CES also recognizes the importance of collecting personal information in a trauma-informed way. This means that the assessment process is conducted with sensitivity and respect for the individual's experiences and with an understanding of the potential impacts of trauma.
 Trauma-informed care is an approach that acknowledges the high prevalence of trauma and its impact on individuals' lives. It aims to create a safe and supportive environment where individuals feel comfortable sharing their information and are empowered in their path towards housing and stability.

4)Importantly, the CoC is committed to continuously improving the VI-SPDAT. Annually, the CoC updates the assessment tool by incorporating feedback from participating projects and clients participating in the CES. This ensures that the VI-SPDAT remains a relevant and effective tool for identifying needs and prioritizing access to housing and services. In the third quarter of 2024 we implemented for CE Assessors to begin the timeline documentation of all possible chronically homeless clients onto a standardized chronicity and disability form.

1D-8a.	Coordinated Entry–Program Participant-Centered Approach.	
	NOFO Section V.B.1.o.	

	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 needs and preferences; and
4.	takes steps to reduce burdens on people seeking assistance.

(limit 2,500 characters)

1)The CES ensures all individuals regardless of location within the CoC geographic area, have fair, equitable, & equal access to housing & services. Since 2023 partnerships with agencies in central (Punto de Partida & opioid addiction center), the westside (Mustard Seed Café, which serves warm delicious meals to those in need), Northeast (Sanaremos, an opioid addiction center) & in Fabens (El Paso County Housing Authority), who provide office space for our CES assessors. In addition the CoC established an outreach task force to proactively identify & engage homeless individuals not reached by traditional services. This task force combines CE assessors with agency outreach teams, leveraging the expertise of both to provide immediate assessment & connection to resources in the field. Utilizing data from the Homeless Outreach Statistics Tool (HOST) program, the task force targets areas with high concentrations of homelessness. Through proactive, in-person outreach, they build trust with individuals, provide information, & facilitate real-time connection to appropriate services. Follow-through is key, with the task force providing ongoing support & advocacy to help individuals access resources & work toward stabilization & permanent housing. By going to where people are at & providing immediate, relevant support, the task force is reaching & engaging those most in need. 2)This is achieved through the use of the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). The VI-SPDAT is a standardized assessment tool used across the CES to evaluate an individual's or household's vulnerability & service needs. It takes into account factors such as the length of homelessness, the presence of disabilities, & risk factors that may impact an individual's ability to obtain & maintain housing. 3)CES also recognizes the importance of collecting personal information in a trauma-informed way. The assessment process is conducted with sensitivity & respect for the individual's experiences & with an understanding of the potential impacts of trauma. Trauma-informed care acknowledges the high prevalence of trauma & impact on individuals' lives. It creates a safe & supportive environment for sharing their information & are empowered in their path towards housing & stability. 4)Importantly, the CoC is committed to continuously improving the VI-SPDAT. Annually, the CoC updates the assessment tool by incorporating feedback from participating projects & client

1D-8b.	Coordinated Entry–Informing Program Participants about Their Rights and Remedies–Reporting Violations.	
NOFO Section V.B.1.o.		
Describe in the field below how your CoC through its coordinated entry:		
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

1) Each project participating in CE is required to post or otherwise make publicly available a notice (provided by the CoC) that describes coordinated entry. This notice should be posted in the agency waiting areas, as well as any areas where participants may congregate or receive services (e.g., dining hall). All staff at each agency are required to know which personnel within their agency can discuss & explain CE to a participant who seeks more information. CoC shall affirmatively market its housing & supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to apply in the absence of special outreach, & maintains records of those marketing activities. All aspects of the Coordinated Entry process comply with all Federal, State, & local Fair Housing laws & regulations. Participants will not be “steered” toward any housing facility or neighborhood because of race, color, national origin, religion, sex, disability, or the presence of children. 2) Locations where persons are likely to access or attempt to access the CoC’s Coordinated Entry System include signs or brochures displayed in prominent locations informing participants of their right to file a non-discrimination complaint & containing the contact information needed to file a non discrimination complaint. Requirements associated with filing a non discrimination complaint, if any, will be included on the signs or brochures. 3) When a complaint is received, the Coordinated Access Oversight Committee (CAOC) will complete an investigation of the complaint within 60 days by attempting to contact & interview a reasonable number of persons who are likely to have relevant knowledge, & by attempting to collect any documents that are likely to be relevant to the investigation. Within 30 days after completing the investigation, the CAOC will write an adequate report of the investigation’s findings, including the investigator’s opinion about whether inappropriate discrimination occurred & the action(s) recommended by the investigator to prevent discrimination from occurring in the future. If appropriate, the investigator may recommend that the complainant be re-assessed or re-prioritized for housing or services. The report will be kept on file for two years. Unresolved complainants will be recommended to seek legal assistance & will be provided HUDs Discrimination Hotline. 1D-10.

1D-9.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.p.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	03/09/2023

1D-9a.	Using Data to Determine if Racial Disparities Exist in Your CoC’s Provision or Outcomes of CoC Program-Funded Homeless Assistance.	
	NOFO Section V.B.1.p.	

Describe in the field below:

1.	the data your CoC used to analyze whether any racial disparities are present in your CoC’s provision or outcomes of CoC Program-funded homeless assistance; and
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2.	how your CoC analyzed the data to determine whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance.
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(limit 2,500 characters)

1)CoC has been discussing Racial Equity in our community for 6 years. The initial phase focused on highlighting the scope of racial disparities of those experiencing homelessness and comparing those data points to US Census data. From there the community focused on data from CE referrals and program acceptance. This step highlighted the inequitable rates and what changes are needed to ensure equitable rates. Based on these findings, a committee was created to address (to include someone with lived experience) these findings and to determine whether any identified racial disparities are being perpetrated by processes within our system. This guidance was derived from participating in HUDs CE Prioritization and Assessment Community Workshop. Addressing racial equity was part of the scoring in the FY 2024, 2023, FY 2022 CoC, and FY 2021 local competition. The CoC is currently dealing with one of our working committees on how to monitor and address disparities in access to CoC Program-funded projects. This working group consists of agencies representing emergency shelters, street outreach programs, rapid rehousing and permanent supportive housing programs. When analyzing data from HMIS/PIT and comparing to Census data, BIOPIC is underrepresented in our homeless population. BIOPIC represents a majority of County population. 2)In developing the Independent Review Team for the FY2021 CoC applications, CoC solicited volunteers from a broad range of entities to ensure diversity in the group. Hispanics and African Americans, both of whom are overrepresented in the local homelessness population, were represented on the IRT. Projects were also scored based on narrative responses that described how their agency is addressing racial inequities and what future planning they are doing towards an equitable system specifically the racial and ethnic makeup of the agency's leadership staff and board, the initiatives and efforts the agency implemented to increase the representation of people of color in leadership positions, the agency's efforts to increase cultural and racial competency among staff/volunteers/program participants, how the agency analyzed data and information about race and ethnicity and examples of how agency addresses racial inequities for participants in your programs. The CoC did not identify any racial disparities. CoC continues to monitor data.

1D-9b.	Implemented Strategies to Prevent or Eliminate Racial Disparities.	
	NOFO Section V.B.1.p	

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

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	Yes
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	No
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes
4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes

5.	Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness?	Yes
6.	Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector?	Yes
7.	Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness?	Yes
8.	Is your CoC educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity?	Yes
9.	Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness?	Yes
10.	Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system?	Yes
11.	Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness?	Yes
Other:(limit 500 characters)		
12.	Continue to monitor discriminated White Non-Hispanic Households at the ES level	Yes

1D-9c.	Plan for Ongoing Evaluation of System-level Processes, Policies, and Procedures for Racial Equity.	
	NOFO Section V.B.1.p.	

Describe in the field below your CoC's plan for ongoing evaluation of system-level processes, policies, and procedures for racial equity.

(limit 2,500 characters)

The Continuum of Care (CoC) is committed to ongoing evaluation and improvement of system-level processes, policies, and procedures to ensure racial equity in the delivery of homeless services. Here is an overview of our current plan. HMIS: We collect race and ethnicity data for all participants and conduct regular analysis to identify trends and disparities in service access, engagement, and outcomes. Based on findings, we develop and implement action plans to address disparities and improve racial equity. OAT: We provide ongoing training and technical assistance to ensure fair and equitable assessment processes and mitigate bias. We monitor OAT data regularly for signs of bias or disparities in assessment outcomes. SOAR: We provide training and technical assistance to ensure accurate collection of race and ethnicity data. We analyze SOAR data regularly to identify trends and disparities in service access, engagement, and outcomes. Based on findings, we develop and implement action plans to address disparities and improve racial equity. CoC-Conducted Unit Inspections using NSPIRE: We conduct regular unit inspections to assess the physical condition and safety of facilities and monitor for signs of bias. We take corrective action to address any findings of bias or inequity in the provision of facilities. CoC-Level Policies and Procedures: We have a racial equity policy in place that outlines our commitment to racial equity and the strategies for achieving it. We provide ongoing training to CoC staff and stakeholders on the racial equity policy and their roles and responsibilities. We regularly monitor and evaluate the implementation of the racial equity policy and make necessary updates and improvements.

1D-9d.	Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities.	
	NOFO Section V.B.1.p.	
	Describe in the field below:	
1.	the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and	
2.	the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.	

(limit 2,500 characters)

1)CoC is continuously reviewing various levels of data that is reviewed in HMIS. CoC reviews all programs (regardless of funding) quarterly as per benchmarks set by the Performance and Benchmark Committee, since 2013. As this committee reviews detailed data, this process will highlight internal program processes that need to be addressed. The CoC has implemented; 1)SOAR Over the past year of reviewing Annual Performance Reports, we identified a trend, where there was a higher percentage of CH households that were exiting PSH/RRH without any income. As a result, we implemented scoring criteria in this years local competition. CoC will provide guidance with each program case manager on identifying qualifying CH households for SOAR implementation. Next year’s competition will have a more weighted scoring on the # of CH households were linked and approved for SSI/SSDI via SOAR and tracked in OAT; 2)Uninhabitable Units-during the administration of EHV with our local PHA, it was discovered that CoC units were not meeting the requirements of the HQS. This was addressed by creating an inspection team that focuses on inspecting units with case managers, to have a better understanding of inspecting for habitability standards; 3)CE Referral Action-based on our HMIS system, we were analyzing data from the CE Project and identifying the length of time it took for agencies to take action. Referrals were sitting and action wasn’t being taken to contact clients for assistance. As a result, the Performance and Benchmarks Committee discussed in depth and implemented a local benchmark that gives agencies 3 days to take action on the referral; 4)Documentation of Chronically Homeless-In reviewing referrals of CH households, and following the referral to we have unearthed a plethora of problematic documentation. CoC is in the process of developing a guided and user-friendly process for consistency purposes; and 5)Veteran By-Name List-To address higher quality of data needed for the Veteran By-Name List, HMIS staff developed additional reporting to provide agencies (SSVF grantees and VA) the tool to improve data accuracy. 2)Tools utilized are customized reporting from HMIS plus comparable HMIS systems and the online application tracker (OAT) for applications submitted by agencies using SOAR.

1D-10.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts.	
	NOFO Section V.B.1.q.	
	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 decisionmaking processes.	

(limit 2,500 characters)

The Continuum of Care (CoC) recognizes the critical importance of centering the voices and perspectives of individuals who have personally experienced homelessness in our leadership and decision-making processes. Our current board, comprised of 43% women of color (three who identify as Brown, cisgender) and 4 Black individuals (one LGBTQIA+ retired veteran woman, two cisgender retired veteran men, and one man with lived experience of homelessness), reflects our commitment to this principle. We are actively building on this strong foundation through the following ongoing outreach efforts. Social Media Announcements: We leverage our social media platforms to widely publicize opportunities for leadership involvement and decision-making participation. We regularly post about open positions on our board and committees, publicize meetings where key decisions are made, and share information about how individuals can get involved. Targeted Outreach: We conduct targeted outreach to organizations serving individuals who have experienced homelessness, such as shelters, drop-in centers, and peer support groups. We partner with these organizations to spread the word about opportunities for involvement and provide support to help individuals from these communities participate. Peer Outreach: We train and deploy peers (individuals with lived experience of homelessness) to conduct outreach to their networks. We have seen the power of peers in reaching and engaging others who have experienced homelessness. Culturally Specific Outreach: We conduct outreach specifically tailored to communities of color and other marginalized groups disproportionately impacted by homelessness. We partner with culturally specific organizations and use culturally appropriate outreach strategies. Supports for Participation: We provide support to help individuals with lived experience of homelessness participate fully in leadership and decision-making. This includes offering stipends, childcare assistance, access to transportation, and other accommodations as needed. Leadership Development Opportunities: We provide opportunities for individuals with lived experience of homelessness to develop their leadership skills. This includes offering training, mentorship programs, and opportunities to take on increasing leadership roles over time. Ongoing Engagement: We prioritize ongoing engagement with individuals who have experienced homelessness, rather than one-time participation.

1D-10a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

You must upload the Lived Experience Support Letter 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.	Routinely included in the decisionmaking processes related to addressing homelessness.	2	1
2.	Participate on CoC committees, subcommittees, or workgroups.	5	1
3.	Included in the development or revision of your CoC's local competition rating factors.	1	0

4. Included in the development or revision of your CoC's coordinated entry process.	1	1
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1D-10b. Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
NOFO Section V.B.1.q.	

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

(limit 2,500 characters)

CoC has developed a process in identifying and implementing best practices, including supportive services for employment and client-tailored wrap-around services. This process helps the household and case manager identify the most appropriate income-generating path for them, whether it's applying for public benefits due to disability or beginning the process of education and training leading to employment. CoC has also fostered partnerships between employment vendors for training and education. For example, the American GI Forum's partnership with TX Workforce focuses on training homeless households to enter the workforce. CoC Member organizations provide professional development and employment opportunities within their programs. This is a common practice among some of our providers. The process begins with offering peer support job training and internship placement. They are then offered employment.

1D-10c. Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
NOFO Section V.B.1.q.	

Describe in the field below:

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

(limit 2,500 characters)

1)Each of the CoC Program-funded projects incorporate into their policies & procedures how to gather feedback from service participants on their experience receiving assistance. However, the feedback that is collected during the Point in Time has provided insight as to why the unsheltered remain unsheltered & the specific services they requested. The top three services that the unsheltered community has requested are, help finding a place to live, help finding a job, & transportation. We have also found the answer as to why the unsheltered will not sleep in a shelter. Some answers provided were infestation, drug use, violence, & theft. 2) CoC Program-funded projects collect feedback by: 1. PH programs having monthly meetings with program participants on their experience while in the program & how case managers can improve; 2. DV provider administers client surveys regularly; 3. PH programs conduct exit interviews with questions about their experience in the program; 4. Youth providers meet with program participants monthly to discuss how to improve & strengthen services. 3)The CoC has dedicated time & resources to addressing the issues presented by both unsheltered & agency feedback. One July 11, 2023 the CoC hosted the Planning Meeting where member of the CoC addressed the resources most requested by unsheltered individuals. Each agency identified how their agency would be able to fulfill the service needs of the unsheltered in help finding a place to live, help find a job, & transportation. To assist with finding a place to live, individuals would have to call the CE hotline in to receive a referral to an agency. To serve the unsheltered immediately, CE has created a hybrid of Outreach & Assessor. The Outreach Assessor will have the capability of conducting the initial assessment on the spot, create a referral to the agency that best meets their needs according to the Vi-SPDAT & then transport them to the agency where they can receive assistance. This process will help with finding a place to live, address the transportation issue, & the agency assisting with RRH will create a tailored plan to determine what steps must be taken to get the client employed. Another example of how feedback has made a difference at the agency level is the DV Provider. Their clients requested a change in operating hours so that they could continue working without worrying about a curfew.

1D-11.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.s.	
	Describe in the field below at least two steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

(limit 2,500 characters)

The CoC works with its member partners to provide technical assistance and support as they work on specific housing development projects to increase the affordable housing supply. The CoC advises and supports addressing land use policies as well as zoning and regulatory barriers to housing development as member partners encounter them. This has included addressing NIMBY (Not In My Back Yard) concerns as well as formal policies restricting development.

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Advance Public Notice of Your CoC's Local Competition Deadline, Scoring and Rating Criteria.	
	NOFO Section V.B.2.a. and 2.g.	

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC's local competition.	08/16/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC's local competition.	08/16/2024

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

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.

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

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

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
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1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below. NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
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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)?	260
2.	How many renewal projects did your CoC submit?	16
3.	What renewal project type did most applicants use?	PH-RRH

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

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	the severe barriers your CoC considered.

(limit 2,500 characters)

1)The CoC created an objective scoring that rewards projects for prioritizing chronic homelessness (CH), reducing barriers, and meeting or exceeding local performance measures. The focus of this year's tool was to incorporate local performance measures. Projects that serve CH exclusively are also prioritized. Threshold criteria include that all projects must participate in CE which assesses and prioritizes CH households and severity of needs and vulnerabilities for program openings. During ranking, the score was considered first for each applicant. Scoring criteria included varied performance thresholds by project type. The project narrative, housing first questionnaire, eLOCCS reports, and HMIS/comparable database reports were used when determining ranking. 2)The CoC and Performance and Benchmarks Committee have been developing local benchmarks since 2013. This process evaluates benchmarks yearly and ensures that strategies have been established/implemented to meet the local benchmarks. One of the benchmarks is the time that it takes for a household to get housed beginning from the CE referral, to project acceptance, to the household being enrolled, to an actual move-in date. The local benchmark for all RRH and PSH programs is 30 days. 3)The CoC provided opportunities for projects that serve high-barrier persons to receive additional application points. Also included was a section that addressed Housing First, which gave the reviewing team which projects would implement a housing first/low barrier approach to vulnerable populations, including persons with criminal backgrounds (sex offenders, convicted murderers), the LGBTQ population, and persons with drug or alcohol addiction. 4)The CoC project renewal scoring tool analyzes each PH housing program data from the APR that is created on random timelines that do not coincide with their operating years. The CoC and the Performance and Benchmarks Committee recognize that programs that serve CH may experience more challenges. The CoC Board reviews the performance outcomes for these projects within the broader context of the need for the project and the additional challenges of higher barrier populations. If the project is serving vulnerable populations and the project is needed to address these populations, the CoC Board may recommend renewal of the project even if its performance outcomes may not be as high as those of other projects.

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 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 that proposed 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 steps the projects took or will take to eliminate the identified barriers.	

(limit 2,500 characters)

1)The CoC uses input from people of different races and ethnicities, however, our CoC is unique in that the BIOPIC is under-represented. By actively involving and listening to individuals from racial and ethnic groups in the local homelessness population, we ensure that their voices are heard and that the rating factors used to review project applications are aligned with their needs and priorities. This approach promotes transparency, equity, and community engagement in addressing homelessness. When reviewing Census stats for El Paso County, Hispanic population represents approximately 76%. When comparing to our homeless statistics Hispanics are under-represented. Prior to the release of the NOFO, the CoC gathered input from the CoC PH Collaborative Committee. This group is comprised of Hispanic, Non-Hispanic, and Black. A detailed conversation on past scoring and rating factors and changes for the upcoming competition. 2) The CoC is unique in that our homeless population (BIOPIC) is under represented. The CoC Board is comprised of Hispanic, Non-Hispanic, Black. The governing board is the deciding body in forming and finalizing the FY 2023 CoC Slate. 3)The CoC is unique in that our homeless population (BIOPIC) is under represented. Local service providers are vigilant in assuring that their programs are equitable when serving households regardless of age, sex, gender, religion, ethnicity, race. The CoC closely monitors data to identify over-representation should it occur.

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

(limit 2,500 characters)

The Governing Body did not reallocate this year.

1E-4a.	Reallocation Between FY 2019 and FY 2024.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	No
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1E-5.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	No
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 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/14/2024

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/14/2024
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	10/28/2024
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1E-5d.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	

You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	10/28/2024
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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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 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.	Clarity Human Services: Bitfocus
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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 2024 HIC data into HDX.	05/10/2024
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2A-4.	Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

	In the field below:
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases; and
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2024 HMIS Data Standards.

(limit 2,500 characters)

1)The CoC works closely with our DV Provider, Center Against Sexual and Family Violence, and with their HMIS comparable database, OSNIUM. Our HMIS staff have had various meetings with OSNIUM staff to ensure that the data elements being collected are from the most recent HUD Data Standards.
 2) HMIS Staff has worked closely with OSNIUM Staff in reviewing reports being created from their system and comparing to hard data, this process has confirmed that the reports being generated from OSNIUM are able to provide de-identified aggregate data and is submitted to the CoC quarterly. The deidentified data provided by the DV Provider is monitored for all DV programs managed by CASFV to ensure conformance to local performance metrics. The process utilized for monitoring and evaluating program performance is followed for all DV programs.

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

Using the 2024 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	811	132	463	49.10%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	325	0	195	60.00%
4. Rapid Re-Housing (RRH) beds	591	26	521	84.44%
5. Permanent Supportive Housing (PSH) beds	164	0	141	85.98%
6. Other Permanent Housing (OPH) beds	48	0	0	0.00%

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

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

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

(limit 2,500 characters)

1) The CoC will continue working with the Opportunity Center for the Homeless (OC) to encourage adopting a license and usage of HMIS, improve data quality, and rely on the geographical HMIS to manage their two large ES programs serving individuals. The CoC will continue dialogue with the shelter serving undocumented clients to participate in HMIS. 2) Technical advisors were granted to our CoC in addressing HMIS Policies & Procedures. Specifically, concerns from the OC. The CoC is working closely with TA to address concerns and to possibly amend Policies & Procedures that will address concerns. The CoC, through the Coalition as HMIS Administrator, intends to increase the OC's usage of HMIS through compliance with City requirements as well as refresher training, increasing licenses for OC staff data entry and adjusting the OC HMIS administrator's access role to allow for reviewing all OC programs collectively. To improve data quality, the Coalition will provide auto-exit functionality and scan technology, along with data quality monitoring to ensure accuracy and completeness. Finally, it is the intent of the Coalition in collaboration with the City and County, to work with the OC on using a single system to manage their homeless program data by providing technical support and ad hoc reporting capabilities to ensure all their data needs are being met. Progress will be monitored weekly regarding these initiatives.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2024 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 January 24, 2024, 11:59 p.m. EST?	Yes

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 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 2024 PIT count.	01/25/2024
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2024 PIT count data in HDX.	05/10/2024
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

1) Sheltered and Unsheltered, is a thorough planning process identifying those who are experiencing homelessness and chronic homelessness. This includes youth providers, El Paso Human Services and El Paso Center for Children. Between the two youth providers mentioned, the planning process assures that their run-away emergency shelter, aging out of foster emergency shelter, LGBTQ TH program, CoC RRH, CoC PSH, ESG RRH, are an integral part of the yearly Point-In-Time count. All shelter case managers are thoroughly trained in HIC and PIT. Shelters are provided with a list of critical data elements expected to be collected and receive training on how data is submitted into the app. Data gathered from PIT is comprehensive from shelters serving: 1) individuals chronic and non-chronic, 2) Families with children chronic and non-chronic; and 3) veterans chronic and non-chronic and 4) Youth. In addition to demographic questions, the Coalition requests that each person experiencing homelessness on the date of the PIT complete an app-based survey to inform the CoC about their homelessness, i.e. how long they've been homeless, the reasons why they are homeless or continue to be homeless, whether or not they have any physical/mental disability which contributes to their homelessness, along with a question regarding any services they've required but not received. Responses from this app-based survey are used throughout the year to assess gaps in services and unmet need and to illustrate the nature and scope of homelessness in the El Paso CoC. Formerly homeless youth group was consulted with and contributed to the planning process. 2) The CoC always encourages both youth providers to engage their youth in participating in this process. This year a youth that was enrolled in the LGBTQ TH program, did participate with the Youth Street Outreach Coordinator. 3) In 2023, the CoC administered Youth Point-In-Time. In our CoC, street youth are well hidden and can be a challenge to locate. Former homeless youth and aging out of foster provided guidance in locating youth. This was instrumental in locating the very 'hidden' youth households in the streets.

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 2023 and 2024, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;	
3.	describe whether your CoC's PIT count was affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs' geographic; and	
4.	describe how the changes affected your CoC's PIT count results; or	
5.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2024.	

(limit 2,500 characters)

- 1) The Continuum of Care (CoC) didn't change its Point-in-Time (PIT) count methodology between 2023 & 2024, but 2023's data quality improvements carried over. A live comm& center, established in 2023, monitored data in real-time, allowing immediate contact with volunteers about discrepancies. The sheltered count saw a 100% increase in volunteers per shelter, extra training, & experienced volunteers leading the count.
- 2) The CoC didn't change its unsheltered PIT count methodology between 2023 & 2024, but again, 2023's data quality improvements remained. The 2023-established live comm& center continued. The partnership with Veteran Affairs, begun in 2023, provided transportation to PIT teams & allowed care packages for the unhoused.
- 3) The recent arrival of displaced individuals seeking shelter affected the PIT count. While manageable, the 11% of new arrivals who were asylum seekers led to shelters operating over capacity. Service providers adapted, but the surge highlighted the need for flexible response plans. The CoC remains committed to providing access to shelter & services.
- 4) The 2024 Point-in-Time (PIT) count revealed a mild shift in the demographics of individuals & families experiencing homelessness within our Continuum of Care (CoC). There was an 11% increase in those seeking asylum. This has caused a minor influx to our top ten categories of individuals & families experiencing homelessness. Asylum seekers often arrive with zero income, contributing to the rise of this group within our homeless population. The stress & uncertainty of their immigration status, coupled with the lack of a stable income, puts them at increased risk of homelessness. First-time homelessness also increased, likely due to the vulnerable state of many asylum seekers. Without established support networks, they may be more prone to experiencing homelessness for the first time. The asylum-seeking population also reported higher instances of mental health conditions. The trauma associated with fleeing one's home country & navigating the asylum process can exacerbate existing mental health conditions or trigger new ones. Long-term disabilities were another area of concern. Asylum seekers may have experienced physical trauma or torture in their home countries, leading to chronic disabilities. Others may develop disabilities due to the harsh conditions of their journey to seek safety. Substance abuse as a coping mechanism for trauma is also a concern.

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

(limit 2,500 characters)

1)Our community is experiencing a severe rise in the overall cost of living (rent, groceries, gas, utilities). Risk factors identified are households, with fixed incomes (SSI/SSDI/SSRI). We are seeing elderly households, families, individuals, youth. Over the past two years rent has continuously increased for individuals/families who have become homeless for the first time utilizing HMIS. From 2020 to 2024, there has been a 44.75% increase in Fair Market Rent Values. This is a TREMENDOUS increase. These increases are a tremendous strain on households who are on a fixed income. Minimum wage in TX is \$7.25/hour. 2)Strategies that the CoC uses to address households at risk of becoming homeless are programs that provide financial management, credit repair, childcare, utility, and rental assistance services (homeless prevention) to help at-risk households maintain their housing. Diversion is a vital program that has flexibility in accordance with the needs of the clients. The CoC continues to focus on building more flexible funding to work in conjunction with ESG prevention. Unfortunately, unless these elevated cost of living issues and low living wages are addressed at a state and federal level, sustaining these funds discussed (diversion/prevention), is only going to continue to be a bandaid. 3) The El Paso Coalition for the Homeless is responsible for ensuring strategies have been established/implement

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 CoC's geographic area?	No

2C-2.	Reducing Length of Time Homeless—CoC's Strategy.	
	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 strategy to reduce the length of time individuals and families remain homeless. |

(limit 2,500 characters)

1)As habitable housing units are less available, the CoC has encountered the decreased length of time it takes for all households to get housed. According to the most recent LSA Report, the average length of time a household is homeless is a median of 38 days. The creation of AFFORDABLE units is needed. The challenge for households is once the subsidy expires, their ability to continue without subsidized rental assistance is significant. The CoCs strategy over the past year has been focused on Emergency Housing Vouchers and Housing Choice Vouchers. The CoC is in the process of discussing further with local Community Housing Development Organizations and the HOME program. 2) On a quarterly, semiannual, and annual basis, utilizing HMIS data, the CoC and Performance and Benchmarks Committee monitor the average length of program stay and evaluate households with the longest length of stay to determine their recurring factors. In addition to monitoring, needed tools and best practices are provided to ensure length of stay is decreased. CoC is working with ES, RRH and TH programs to ensure they are connecting participants with employment opportunities and mainstream benefits. The CoC uses By Name list tools to track data regarding the length of homelessness for specific populations including veterans, youth, and chronically homeless. CE Policies require prioritization to be given to households with the longest lengths of homelessness. 3) The El Paso Coalition for the Homeless along with the Performance and Benchmarks Committee is responsible for ensuring strategies have been established/implemented to meet this measure.

2C-3.	Successful Permanent Housing Placement or Retention –CoC's Strategy.	
	NOFO Section V.B.5.d.	

In the field below:

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

(limit 2,500 characters)

1)The CoC continues to emphasize Housing First and low/no barrier approach to help homeless persons obtain and maintain permanent affordable housing. A vital part of the strategy for the CoC to ensure that the CE is fully functional in identifying and prioritizing households with high acuity. The CoC has implemented a system for clients who are in PSH and have stabilized and whose service needs have decreased, these clients are offered PH options, which makes available units for moving persons directly from the street. The CoC works collaboratively with PSH partners in addressing and meeting this performance measure and strategies to make improvements. The Coalition continues efforts to engage landlords who are willing to offer low/no barrier housing to those experiencing homelessness. The CoC also focuses on connecting households to housing subsidies, i.e., HCV, Section 811, Section 211. Performance metrics have also been adopted by the CoC's Performance Committee to review the Average Length of Time (Days) from Start Date to Move-in for PSH to evaluate and potentially expedite the process. This strategy has been consistent over the past several years. Data from HUDHDX2 is closely monitored. From SPM FY 2023, where there was a 94.5% of persons successful exits/retention. 2) The CoC monitors the LSA as well as SPM strategies to increase rates at which households in PH, other than RRH retain their PH are, the CoC has been focusing with new local PH interventions that increase home-based case managers to ensure that households in PH interventions receive case management while in the program, ensuring the engagement of clients to ensure that they are meeting their individualized service plans and are stable. The CoC is also in the process of revitalizing the focus on improving access of the SOAR process which is mandated for all CoC-funded programs. 3) The El Paso Coalition for the Homeless along with the Performance and Benchmarks Committee is responsible for ensuring strategies have been established/implemented to meet this measure.

2C-4.	Reducing Returns to Homelessness--CoC's Strategy.	
	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 that individuals and families return to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,500 characters)

In evaluating LSA from FY 2023, overall returns to homelessness stand at 27.8%. HMIS data analysis has identified households who return to homelessness and the characteristics of those experiencing multiple bouts of homelessness in our community. The CoC has identified common factors among households (families/individuals) by analyzing HMIS data. According to LSA, the higher percentage of households returning to homelessness were those who were unsheltered. The CoC's strategy continues to prioritize collaboration with local mental health authorities to emphasize mental health stability, in addition to working with agencies serving individuals with substance abuse disorders.

Based on data, the CoC reports to the Performance Committee, comprised of representatives from ES, TH, mental health providers, CE staff, and PH programs. The committee will focus on identifying those returning to homelessness and target them for services that may not have been previously offered, such as increased mental health services and a stronger focus on income streams including employment opportunities. To reduce returns to homelessness, the CoC has implemented the following strategies: CE is utilizing VISPDAT to identify vulnerabilities of those experiencing homelessness, with referral into PH programs based on score. Programs providing PSH must prioritize beds for those households with the longest histories of homelessness and/or most episodes of homelessness. Best practices training on case management and strengthening collaborations that focus on developing linkages and resources to provide supports to households at risk of returning to homelessness will be provided. The CoC believes case management is crucial in ensuring households can remain stably housed. Agencies providing RRH or TH assistance must provide at least 6 months of follow-up services to ensure households have transitioned and remain stable in PH. The bonus project will create a CH project with a high level of case management, a mental health clinic, and a 24/7 case management presence, all within the same structure. This project is designed to reduce recidivism. The El Paso Coalition for the Homeless, the Performance Committee, and the CE Oversight Committee are responsible for ensuring strategies have been established and implemented to meet this measure.

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

(limit 2,500 characters)

1) The CoC continues to ensure program participants are connected with mainstream resources for employment. The process helps the household and case manager identify the most appropriate income-generating path for them and to begin the process of education and training leading to employment. The CoC has also organized partnerships between employment vendors for training and education. Programs within our CoC have employment specialists that have developed partnerships with businesses who have a preference for hiring those who are experiencing homelessness including those who have a sex offense in their background. In reviewing our System Performance Data FY 2023 for both Stayers and Leavers, there are increases across the board. A decrease in Total Income for Leavers with a total of a FY 2022 was 20% to 17% this FY. increase from the previous year. 2) The CoC has a partnership with TX Workforce Solutions in working with heads of households and individuals in gaining employment while receiving SSI/SSDI. The VAs Compensated Work Therapy works with homeless veterans to gain employment. American GI Forum has been awarded a grant from TX Workforce that targets those who are homeless and unemployed, it provides assistance and necessary tools to obtain employment, i.e., transportation, equipment, uniforms, etc. TX Workforce has a designated employee who spends 8 hours a week working with migrant farmworkers in exploring other avenues of employment. 3) The El Paso Coalition for the Homeless is responsible for ensuring strategies have been established/implemented to meet this measure.

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

(limit 2,500 characters)

1) The CoC continues to ensure program participants are connected with mainstream resources of non-employment AND employment income for which they are eligible. CoC has established a goal of 30% of program participants exiting programs with non-employment income. CoC has developed a process for identifying and implementing best practices, including supportive services for employment and client-tailored wrap-around services. This process helps the household and case manager identify the most appropriate income-generating path for them, whether it's applying for public benefits due to disability or beginning the process of education and training leading to employment. A key strategy implemented over the past year was our CoCs participation in the SSI/SSDI Outreach, Access, and Recovery (SOAR) process. CoC program funded projects are required to participate in SOAR training and use the SOAR process to better identify, engage, and enroll homeless households with disabilities so they can receive the cash assistance they are entitled to. A SOAR Steering committee has been established as an ongoing support system to assist those completing applications and discuss barriers and solutions encountered. This effort will continue indefinitely. The CoC strategy focuses on providing each of the program case managers with the tools needed to guide program participants when accessing mainstream resources, i.e., SOAR, TANF, SNAP. TX HHS provides direct training with programs that give the case manager the ability to directly apply on behalf of the household. Coalition staff also provides direct training. In reviewing the most System Performance Data FY 2023, Stayers increased and Leavers decreased. The most significant decrease is for Leavers with a total of FY 2023 at 8.4%, a 3.6% decrease from the previous year. 2) The Coalition and the Performance Committee are responsible for ensuring strategies have been established/implemented to meet this measure.

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

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

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

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 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.r.	

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

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

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

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

(limit 2,500 characters)

Not Applicable

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 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 Serve Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

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

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

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

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

(limit 2,500 characters)

Not Applicable

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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 2024 Priority Listing.

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

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

4A-3.	Data Assessing Need for New DV Bonus Housing Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.j.(1)(c) and I.B.3.j.(3)(c)	

1.	Enter the number of survivors that need housing or services:	1,703
2.	Enter the number of survivors your CoC is currently serving:	239
3.	Unmet Need:	1,464

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

(limit 2,500 characters)

- 1) According to the Texas Council on Family Violence, there is a 71.4% of survivors needed help looking for housing and 32.7% of survivors needed help keeping their current housing. CoC calculated #s by utilizing both HMIS and data from our comparable HMIS system - # of DV survivors needing housing or services subtracting the # of DV survivors housed based on the capacity of shelter beds.
- 2) CoC calculated #'s by utilizing both HMIS and data from our comparable HMIS system
- 3) As the operator of the CE, the CoC continues to see increases of the # of DV referrals.

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	
	Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.	
Applicant Name		
Paso del Norte Ce...		
La Posada Home, Inc.		

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

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	

Enter information in the chart below on the project applicant that applied for one or more New DV Bonus housing projects included on your CoC's FY 2024 Priority Listing for New Projects:

1.	Applicant Name	Paso del Norte Center of Hope
2.	Rate of Housing Placement of DV Survivors–Percentage	87%
3.	Rate of Housing Retention of DV Survivors–Percentage	74%

4A-3b.1.	Applicant's Housing Placement and Retention Data Explanation.	
	NOFO Section I.B.3.j.(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 the rate of housing placement;
2.	whether the rate for housing placement accounts for exits to safe housing destinations;
3.	how the project applicant calculated the rate of housing retention; and
4.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1-The projected percentages were determined based on the anticipated number of families to be served by the project. 2-It's essential to clarify that exits to safe housing destinations, such as survivors finding alternative safe housing or transitioning to permanent housing, should not be classified as housing retention failures. 3-As long as survivors are successfully moving into safe & stable environments, these exits should not have an adverse impact on the retention rate.4- Center of Hope will collect data through a comparable database via Bitfocus: Clarity Human Services.

4A-3c.	Applicant's Experience Housing DV Survivors.	
	NOFO Section I.B.3.j.(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;
3.	determined survivors' supportive services needs;
4.	connected survivors to supportive services; and

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

(limit 2,500 characters)

1-The Center will utilize a Housing First approach by reducing barriers to eligibility, providing service engagement to maintain housing, and addressing issues contributing to homelessness once clients are housed. Permanent housing will be provided as quickly as possible without preconditions. 2-The Center conducts immediate safety assessments over the phone before in-person meetings. Victims in immediate danger are connected with law enforcement. Most referrals come from local partners and are assessed through Coordinated Entry.3-The Lotus VCSL-LPT Goals Beliefs Change system facilitates a victim-centered, survivor-led process of assessing and structuring life goals. This tool and other survivor-developed materials support clients in identifying resources to escape trafficking and build a future in freedom.4-The Center provides five distinct programs: Prevention and early intervention, Emergency shelter and Crisis Response, Children and Youth Services, Adult Services, and Anti-Trafficking Care Coordination. Services include 24/7 crisis response, basic needs, case management, advocacy, transportation, support, mental health services, and justice support.5-All project staff will be well-versed and trained in these principles. Staff will also be trained on community resources to connect clients with necessary support for sustaining their housing.

4A-3d.	Applicant's Experience in Ensuring DV Survivors' Safety.	
	NOFO Section I.B.3.j.(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 survivors' information and locations confidential;
4.	training staff on safety and confidentiality policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1-Initial Contact and Intake, informed consent is obtained, explaining confidentiality limits and risks. Anonymity is allowed, providing support while prioritizing safety. A trauma-informed approach validates feelings, avoids blame, and uses open-ended questions. 2-Determining Appropriate Housing, an individualized approach assesses risks and needs, exploring shelter, transitional housing, and rapid rehousing options. Prioritizing safety, services, location, and culture, the survivor must consent to the plan. A transition plan outlines support, with follow-up and adjustments. 3-Confidentiality, information and locations are stored securely, with staff trained on confidentiality. Access is limited, with secure communication and privacy settings. Survivors are informed about information use, and privacy is considered in planning. 4-Train staff on emergency procedures. Maintain strict visitor policies, verifying identities. Keep unit locations confidential, using secure communication and coded addresses. Establish a quick response system with law enforcement. 5-Security Measures for Units, implement robust safety protocols for congregate and scattered site units. Install security cameras, alarms, and secure entry systems. Ensure well-lit premises and safe outdoor spaces. Conduct regular safety audits and drills.

4A-3d.1.	Applicant's Experience in Evaluating Its Ability to Ensure DV Survivors' Safety.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement throughout the project's operation.

(limit 2,500 characters)

The project also evaluated its implementation of the Housing First approach, which prioritizes providing survivors with permanent housing as quickly as possible and then offering support services. Recognizing that stable housing is a critical foundation for safety, the project assessed its progress in securing and maintaining housing for survivors.

Safety planning was another crucial area of evaluation. The project assessed whether it was effectively working with survivors to develop personalized safety plans and ensuring they were aware of available resources and options to enhance their safety.

Throughout the project's operation, several areas for improvement were identified. It was recognized that domestic violence is a leading cause of homelessness for women and their children, highlighting the need for more effective strategies to address survivors' housing needs. The project acknowledged the importance of strengthening partnerships with housing providers and exploring innovative solutions to increase access to stable housing.

4A-3e.	Applicant's Experience in Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below the project applicant's experience in:

- | | |
|----|--|
| 1. | prioritizing placement and stabilization of survivors; |
| 2. | placing survivors in permanent housing; |

3.	placing and stabilizing survivors consistent with their preferences; and
4.	placing and stabilizing survivors consistent with their stated needs.

(limit 2,500 characters)

Trauma Informed Care (TIC) principles through a partnership and guidance from the El Paso Child Guidance Center (EPCGC), in collaboration with the National Council for Behavioral Health (NCBH). Trust Based Relational Intervention (TBRI) training is an attachment-based, trauma-informed intervention designed to meet the complex needs of children, families and systems impacted by trauma. Staff received TBRI training from the Karyn Purvis Institute of Child Development at Texas Christian University. Motivational Interviewing (MI) developed in part by clinical psychologists William R. Miller and Stephen Rollnick, is a directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence. Staff at the Center completed MI training with the Child Sex Trafficking Team at the Texas Governor’s Office and Baylor University Continuing Education that was customized for responders working with victims of human trafficking and CSEY in 2020. Case Managers use the Lotus VCSL-LPT Goals Beliefs Change system for client case management. This tool, developed by Dr. Karen Countryman-Roswurm, at the Wichita State University Center for Combating Human Trafficking was created to assist advocates in facilitating a victim-centered, survivor-led process of assessing, structuring, guiding, and monitoring life goals, beliefs, and change toward prosperity. The tool is an ongoing assessment instrument that addresses multiple life dimensions broken down in the following sections, family, creativity, biological, psychological, social, vocational, financial, or spiritual aspects of a client’s life. Clients will be given the opportunity to see available housing options prior to making any decisions, to include local (i.e., East, West, or Central El Paso), cost (if applicable), what utilities are included or not, and length of time (if rapid re-housing) or permanent placement. Case Managers will assist with step-by-step details of how the process would work for housing and services to ensure that the clients can make the most informed decision possible for their best interests.

4A-3f.	Applicant’s Experience in Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(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.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures survivors and staff interactions are based on equality, and minimize power differentials;
----	--

2.	providing survivors access to information on trauma, e.g., training staff on providing survivors with information on the effects of trauma;
3.	emphasizing survivors' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
4.	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;
5.	providing a variety of opportunities for survivors' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
6.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

At the Center of Hope, we're revolutionizing the way survivors of domestic violence are supported. We've abandoned punitive approaches in favor of empowering programs that foster autonomy, mutual respect, and minimized power differentials. Our staff aren't authorities, they're guides. We've created a sanctuary where every voice reverberates and every individual is valued. Our doors are flung open, welcoming all, irrespective of income, gender, race, type of abuse, disabilities, or any other factor. We're the refuge ready to cradle anyone who steps across our threshold. But acceptance is merely the foundation. We've pledged ourselves to excellence. Our staff endure rigorous training programs in victim advocacy and trauma-informed care. We know the unfathomable agony our participants have endured, and we're devoted to meeting them in that pain, armed with compassion, understanding, and the tools for healing. Our support groups, nurtured by seasoned and compassionate staff, are oxygen for survivors. Within these protected and nourishing spaces, participants unearth the knowledge and skills to comprehend their trauma and seize back their lives. We don't merely slap on a band-aid – we illuminate the path to profound, enduring transformation. We journey with our participants every step of the way. Our staff forge hand-in-hand partnerships with each individual, crafting personalized housing stability plans that harmonize with their distinct goals and dreams. We don't impose our vision of success – we embolden participants to sculpt their own. Through skills training in budgeting, job searching, and beyond, we fortify participants with the confidence and readiness to flourish in independent living. At the Center of Hope, we're fervent believers in the boundless potential of every survivor, and we're devoted to helping them unleash it. Yet we know that authentic support means meeting people where they are, and that looks different for everyone. That's why we're deeply devoted to cultural competence and non-discrimination. We provide interpretation services in every language, ensuring that language barriers never obstruct healing. Annually, our staff and volunteers immerse themselves in rigorous training on ethnic and cultural sensitivity, because we know that equitable care demands truly seeing and understanding every participant. At the Center of Hope, everyone is welcome, and everyone is valued. We offer so much more than just individual support – we're a community. Our support groups on healthy relationships, boundary setting, and the impacts of domestic violence provide a space for participants to connect, share, and grow alongside peers who understand their journey. For parents, we know that healing ripples out to the whole family. That's why we offer parenting support groups and childcare services, so that every participant can fully immerse themselves in their own healing. Our case managers work intimately with each participant to create personalized plans, provide referrals, and facilitate access to resources like childcare and legal services. At the Center of Hope, we're not just supporting individuals – we're nurturing whole families and communities. The Center of Hope is more than just a program – it's a lighthouse for survivors of domestic violence. It's a place where the shattered and marginalized are made whole, where the silenced discover their voice, and where the oppressed find liberation. It's a testament to the boundless strength and resilience of every survivor, and a reminder that no one deserves to live in fear. At the Center of Hope, we don't just believe in the possibility of healing – we make it a reality, every single day.

4A-3g.	Applicant's Experience Meeting Service Needs of DV Survivors.	
NOFO Section I.B.3.j.(1)(d)		

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

(limit 5,000 characters)

The Center of Hope provides initial evaluations to determine the eligibility of each individual or family for assistance, as well as the amount and types of assistance needed to gain stability in permanent housing. These evaluations are conducted in accordance with centralized or coordinated assessment requirements and Center of Hope policies and procedures. The Center prioritizes individuals and families with higher needs and who are most vulnerable, utilizing a Housing First approach to assist participants in moving to permanent housing as quickly as possible. Client choice is prioritized by assisting participants in finding permanent housing based on their unique strengths, needs, preferences, and financial resources. (1) Prevention and early intervention services, (2) Emergency shelter and Crisis Response Services, (3) Children and Youth Services (CSEY), (4) Adult Services, and (5) Anti-Trafficking Care Coordination. The Center provides 24/7 crisis response services upon notification from law enforcement, care coordinators, medical providers, local shelters, the victims themselves, and other community members. In addition to crisis response, basic needs, intensive case management, advocacy, transportation, personal/emotional support, mental health services, and support in justice activities are provided to any individual, family or group who have been identified as being a victim of sex or labor trafficking. Due to safety concerns regarding domestic violence, clients decide when they are ready to exit the shelter portion of the project and move to permanent housing. FMR and rent reasonableness are used to assess the amount of rent, and the length of assistance is based on funding guidelines and individual needs. Case management and other assistance occur at least every two weeks (or as needed) for clients who exit the shelter for the rapid rehousing part of the program. Recertification for households occurs every three months, where case managers work with each client to determine income gained and other factors that might affect participant needs and funding for continuation. From day one, the Center identifies and implements high-quality, research-based, culturally and linguistically competent intervention strategies for delivering services to survivors of dating violence, stalking, domestic violence, and sexual assault on their path to safety and self-sufficiency. The focus is on promoting resilience, economic stability, and self-sufficiency for individuals and families served by this project. Also, from the first month, the range of voluntary support services available to survivors is expanded to ensure a smooth transition into permanent housing, and established relationships with landlords are maintained to ensure clients can move into permanent housing as soon as possible. The Center believes it's necessary to address the problem of domestic violence homelessness from two separate angles; the first being providing shelter to domestic violence survivors and the second providing crucial intensive services (case management, therapy, support groups, education, job search assistance, mediation with landlords, rental assistance, furnishings, house search assistance, legal access, etc.) to help them acquire and retain safe, permanent housing. Clients are empowered to return to a permanent housing situation as quickly as possible without having to meet preconditions.

4A-3h.	Applicant's Plan for Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	
	Describe in the field below how the project(s) will:	
	1. prioritize placement and stabilization of program participants;	
	2. place program participants in permanent housing;	
	3. place and stabilize program participants consistent with their preferences; and	
	4. place and stabilize program participants consistent with their stated needs.	

(limit 2,500 characters)

The Center of Hope prioritizes individuals and families with higher needs and greater vulnerability, utilizing a Housing First approach to assist participants in quickly transitioning to permanent housing. Recognizing that each client is the expert on their own life, we prioritize client choice by supporting participants in securing permanent housing tailored to their unique strengths, needs, preferences, and financial resources.

We empower clients to swiftly return to permanent housing without having to meet preconditions. We align with their preferences by conducting individualized assessments of housing needs, involving participants in the housing search, offering diverse housing options, and soliciting ongoing feedback.

To address stated needs, we conduct comprehensive trauma-informed assessments, provide service-enriched housing options, partner with community service providers, and develop individualized housing stability plans. By considering both preferences and needs, we promote long-term housing stability and well-being.

4A-3i.	Applicant's Plan for Administering Trauma-Informed, Survivor-Centered Practices in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	
	Describe in the field below examples of how the new project(s) will:	
	1. establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant and staff interactions are based on equality, and minimize power differentials;	
	2. provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
	3. 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;	
	4. 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;	
	5. provide a variety of opportunities for program participants' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
	6. offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

At the Center of Hope, we're revolutionizing the way survivors of domestic violence are supported. We've abandoned punitive approaches in favor of empowering programs that foster autonomy, mutual respect, and minimized power differentials. Our staff aren't authorities, they're guides. We've created a sanctuary where every voice reverberates and every individual is valued. Our doors are flung open, welcoming all, irrespective of income, gender, race, type of abuse, disabilities, or any other factor. We're the refuge ready to cradle anyone who steps across our threshold. But acceptance is merely the foundation. We've pledged ourselves to excellence. Our staff endure rigorous training programs in victim advocacy and trauma-informed care. We know the unfathomable agony our participants have endured, and we're devoted to meeting them in that pain, armed with compassion, understanding, and the tools for healing. Our support groups, nurtured by seasoned and compassionate staff, are oxygen for survivors. Within these protected and nourishing spaces, participants unearth the knowledge and skills to comprehend their trauma and seize back their lives. We don't merely slap on a band-aid – we illuminate the path to profound, enduring transformation. We journey with our participants every step of the way. Our staff forge hand-in-hand partnerships with each individual, crafting personalized housing stability plans that harmonize with their distinct goals and dreams. We don't impose our vision of success – we embolden participants to sculpt their own. Through skills training in budgeting, job searching, and beyond, we fortify participants with the confidence and readiness to flourish in independent living. At the Center of Hope, we're fervent believers in the boundless potential of every survivor, and we're devoted to helping them unleash it. Yet we know that authentic support means meeting people where they are, and that looks different for everyone. That's why we're deeply devoted to cultural competence and non-discrimination. We provide interpretation services in every language, ensuring that language barriers never obstruct healing. Annually, our staff and volunteers immerse themselves in rigorous training on ethnic and cultural sensitivity, because we know that equitable care demands truly seeing and understanding every participant. At the Center of Hope, everyone is welcome, and everyone is valued. We offer so much more than just individual support – we're a community. Our support groups on healthy relationships, boundary setting, and the impacts of domestic violence provide a space for participants to connect, share, and grow alongside peers who understand their journey. For parents, we know that healing ripples out to the whole family. That's why we offer parenting support groups and childcare services, so that every participant can fully immerse themselves in their own healing. Our case managers work intimately with each participant to create personalized plans, provide referrals, and facilitate access to resources like childcare and legal services. At the Center of Hope, we're not just supporting individuals – we're nurturing whole families and communities. The Center of Hope is more than just a program – it's a lighthouse for survivors of domestic violence. It's a place where the shattered and marginalized are made whole, where the silenced discover their voice, and where the oppressed find liberation. It's a testament to the boundless strength and resilience of every survivor, and a reminder that no one deserves to live in fear. At the Center of Hope, we don't just believe in the possibility of healing – we make it a reality, every single day.

4A-3j.	Applicant's Plan for Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(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)

Center of Hope has a diverse and bilingual team that are strong advocates, culturally sensitive, and trained in Trauma-Informed Care (TIC) with significant partnering and support from medical and mental health institutions, agencies providing services to migrants, and workforce entities such as the region's local workforce board. Implementing a TIC approach is critical for incorporating cultural humility and inclusivity as core components of our services. Each family receives care according to their individual needs in a non-judgmental environment. Case managers attend yearly trainings on topics such as sexual assault exams, legal remedies for victims, protective orders, TIC, and awareness to have a better understanding in victims' assistance. Additionally, program policy requires a language access plan for certain positions to be fully bilingual (English/Spanish) in addition to a provision for providing translation for those victims who speak a language other than English or Spanish. Staff interactions with the households it serves are grounded in the ethics and values of the agency. They seek to understand the values, beliefs, traditions and historical context of clients and incorporate this knowledge into their assessments and interventions. They demonstrate the use of effective intervention skills when working with clients from diverse cultural backgrounds. They engage in continuing professional development to foster knowledge, skills and abilities in working with clients from diverse cultural backgrounds.

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

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	

Enter information in the chart below on the project applicant that applied for one or more New DV Bonus housing projects included on your CoC's FY 2024 Priority Listing for New Projects:

1.	Applicant Name	La Posada Home, Inc.
2.	Rate of Housing Placement of DV Survivors–Percentage	76%
3.	Rate of Housing Retention of DV Survivors–Percentage	86%

4A-3b.1.	Applicant's Housing Placement and Retention Data Explanation.	
	NOFO Section I.B.3.j.(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 the rate of housing placement;	
	2. whether the rate for housing placement accounts for exits to safe housing destinations;	
	3. how the project applicant calculated the rate of housing retention; and	
	4. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

(limit 1,500 characters)

1-The projected percentages were determined based on the anticipated number of families to be served by the project. 2-It's essential to clarify that exits to safe housing destinations, such as survivors finding alternative safe housing or transitioning to permanent housing, should not be classified as housing retention failures. 3-As long as survivors are successfully moving into safe and stable environments, these exits should not have an adverse impact on the retention rate.4- La Posada collects data through a comparable database via Bitfocus :Clarity Human Services.

4A-3c.	Applicant's Experience Housing DV Survivors.	
	NOFO Section I.B.3.j.(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;	
	3. determined survivors' supportive services needs;	
	4. connected survivors to supportive services; and	
	5. moved survivors from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1-The Joint TH-RRH provides a comprehensive continuum of care for families experiencing homelessness, addressing immediate needs, fostering stability, & guiding families toward self-sufficiency & permanent housing. 2-Upon enrollment, each participant’s needs, goals, & challenges will be assessed. This assessment will guide the development of an individualized housing stability plan tailored to their specific needs & goals. These plans will be monitored on a monthly basis to ensure progress and address any evolving needs. Participants will undergo educational assessments to identify their strengths & areas for improvement. 3-Case managers play a crucial role in connecting survivors to the appropriate supportive services and resources within the community. 4- Supportive service provided by la Posada include counseling for children & adults, self-help classes, job training skills, job search assistance, support groups, & other ancillary services. Services are also provided to empower clients to overcome barriers that might limit their housing success such as poor credit history, arrears, & legal issues. Case managers help to negotiate lease agreements with landlords, resolve crises, and provide referrals & linkages to resources related to benefits, employment, and other services provided through partnerships in the community. 5-The Joint TH-RRH project’s commitment to monthly monitoring ensures that participants receive continuous support and that their progress is tracked. This approach allows for adjustments to their service plan as needed.

4A-3d.	Applicant’s Experience in Ensuring DV Survivors’ Safety.	
	NOFO Section I.B.3.j.(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 survivors’ information and locations confidential;	
	4. training staff on safety and confidentiality policies and practices; and	
	5. taking security measures for units (congregate or scattered site), that support survivors’ physical safety and location confidentiality.	

(limit 2,500 characters)

1-The project applicant ensures that participants are placed in a private, and confidential setting, where survivors can discuss their situations without fear of being overheard. Survivor-centered and trauma-informed interviewing techniques are utilized by staff performing the intake process with participants. 2-Each participant’s specific safety needs are assessed, and individualized safety plans are developed.3-La Posada receives funds and support from the Violence Against Woman Act (VAWA) and by grant regulations, all participants must remain anonymous to protect their identities from their aggressors. The participants’ responsibility regarding confidentiality is to keep the location of the Emergency Shelter, the identity of other program participants, and any information about other program participants confidential. 4-All project staff undergo mandatory training on safety and confidentiality policies and practices. Joint TH-RRH project will operate with a trauma-informed and person-centered approach and outcomes, maintaining confidentiality throughout the process. 5- Services like Protective Orders, police reports, and safety planning are provided to ensure participants’ safety before transitioning to their home.

4A-3d.1.	Applicant's Experience in Evaluating Its Ability to Ensure DV Survivors' Safety.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement throughout the project's operation.

(limit 2,500 characters)

La Posada's Mission is to provide culturally and linguistically competent services to families affected by crime and homelessness: Transforming lives affected by DV. La Posada Home has been providing services to homeless women and their children for 38 years. Domestic violence remains the leading cause of homelessness among female-headed households. Eight years ago, La Posada shifted its shelter focus to exclusively support survivors of sexual assault, domestic violence, dating violence, and stalking. Client records are secured in an office, in a fire-proof, locked cabinet. There is no access to clients' records other than to authorized staff. Older records are stored off-site in a climate-controlled, secured facility. The shelter and the program follow a strict confidentiality protocol to protect survivors. Additionally, the shelter ensures safety with wrought iron guards, secure door-opening protocols, security cameras, and staff extensively trained in client protection. When survivors transition to housing, staff members ensure that placements are at the survivor's discretion, located far from the perpetrator, with confidential services to safeguard their location. If necessary, options for safe relocation are also provided to ensure ongoing safety.

4A-3e.	Applicant's Experience in Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below the project applicant's experience in:

- | | |
|----|--|
| 1. | prioritizing placement and stabilization of survivors; |
| 2. | placing survivors in permanent housing; |
| 3. | placing and stabilizing survivors consistent with their preferences; and |
| 4. | placing and stabilizing survivors consistent with their stated needs. |

(limit 2,500 characters)

1-La Posada will prioritize individuals and families with higher needs and who are the most vulnerable utilizing a Housing first approach to assist participants to move to permanent housing as quickly as possible. The client is the expert of his/her life and as such client-choice is prioritized by assisting participants to move to permanent housing based on unique strengths, needs, preferences, and financial resources. 2- La Posada’s focus on promoting resiliency, economic stability, and self-sufficiency for individuals and families served by this project. Also, from the first month it will expand the range of voluntary support services available to survivors to assure transition into permanent housing and it will maintain the relationship with landlords already established to assure clients can move into permanent housing as soon as possible. 3- This ability plays a significant role in psychological health and well-being. Self-determination allows people to feel that they have control over their choices and lives. During our years of working with rental assistance programs, clients have always been the experts of their lives. They have the right to choose their housing since they know their wants and needs. 4-Clients are asked about preferences about neighborhoods and the type of units. The Rapid Rehousing Liaison (RRL) then looks for options following the clients’ request.

4A-3f.	Applicant’s Experience in Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(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. establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures survivors and staff interactions are based on equality, and minimize power differentials;	
	2. providing survivors access to information on trauma, e.g., training staff on providing survivors with information on the effects of trauma;	
	3. emphasizing survivors’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
	4. 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;	
	5. providing a variety of opportunities for survivors’ connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
	6. offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

1-La Posada upholds a non-punitive approach in our programs, ensuring that punitive interventions are not part of the agency's practice. Instead, La Posada actively promotes the autonomy of each client, empowering them to take control of their journeys toward healing and stability. Interactions between La Posada participants and staff are founded on the principles of equality and mutual respect. La Posada works diligently to minimize power differentials, recognizing that every participant brings their unique experiences, strengths, and needs to the table. La Posada operates as a guide in our clients' processes, providing support, resources, and a safe space where their voices are heard and valued. Eligibility for services are determined without regard to:

- Income;
- Gender or sexual orientation;
- Race, color, and national origin;
- Type or severity of abuse;
- Disabilities, as defined by the Americans with Disabilities Act;
- Number of previous times services have been sought from La Posada or other domestic violence programs;
- Cultural barriers of this organization, including language;
- Number of children accompanying the victim;
- Location of the batter;
- Immediacy of danger; and
- Whether the individual contributes, donates, or pays for those services.

2- La Posada places a strong emphasis on staff training, ensuring that all team members complete a comprehensive 40-hour victim advocacy training upon joining the project. The program's approach to case management is rooted in trauma-informed care, prioritizing the well-being of the program's participants. In addition, La Posada offers a range of support groups facilitated by our experienced staff, focusing on topics related to trauma. These groups serve as valuable resources, equipping survivors with the knowledge to understand the impact of trauma and providing them with essential tools to navigate their unique experiences. 3- La Posada staff works closely with participants to develop a housing stability plan specific to that individual to work toward survivor-defined goals and aspirations. Participants will be able to develop skills in budgeting, savings, and job search, as well as, increase their confidence and readiness for independent living. This approach ensures that the program aligns with participants' objectives and empowers them to take charge of their future.

4- La Posada staff receives training on equal access, cultural competence, and non-discrimination. All La Posada programs offer interpretation in the client's native language, if other than Spanish, over the phone through Language Line and sign language through a local certified interpreting agency. Each year La Posada offers staff and volunteer training from local and/or state presenters on ethnic and/or cultural sensitivity issues This ensures that all participants, regardless of their background, receive equitable services. 5- La Posada participants have access to various support groups focused on topics such as healthy relationships, boundary setting, understanding the impacts of domestic violence, and sexual respect. These groups provide a supportive and nurturing environment where participants can connect with peers, share experiences, and work toward personal growth and healing. 6- La Posada offers parenting support groups available to all participants. To ensure that participants can fully engage in these groups, childcare services are provided to accommodate their needs. In addition, the program's dedicated case managers will work closely with each participant to create individualized plans. Should a participant require assistance with childcare or legal services, the case managers will be equipped to provide referrals and facilitate access to these resources.

4A-3g.	Applicant's Experience Meeting Service Needs of DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	

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

(limit 5,000 characters)

La Posada Home, Inc. will provide an initial evaluation to determine the eligibility of each individual or family's eligibility for assistance and the amount and types of assistance the individual or family needs to gain stability in permanent housing. These evaluations will be conducted in accordance with the centralized or coordinated assessment requirements and La Posada Home, Inc. Policy, and Procedures. La Posada will prioritize individuals and families with higher needs and who are the most vulnerable utilizing a Housing first approach to assist participants to move to permanent housing as quickly as possible. The client is the expert of his/her life and as such client-choice is prioritized by assisting participants to move to permanent housing based on unique strengths, needs, preferences, and financial resources. Because of safety concerns regarding domestic violence, clients will decide when they are ready to exit the shelter portion of the project and move to permanent housing. Fair Market Value and Rent Reasonableness will be utilized to assess the amount of rent. Length will be based on funding guidelines as well as individual needs. Case management and other assistance will take place at least once every two weeks (or as needed) for clients who exit the shelter for the rapid rehousing part of the program. Recertification for households will take place every three months, where case managers will work with each client to determine income gained and other factors that might affect participant's needs and funding for continuation. From day one La Posada will continue to identify and implement high-quality research-based, culturally, and linguistically competent intervention strategies for delivery of services to survivors of dating violence, stalking, DV and sexual assault on their road to safety and self-sufficiency. It will focus on promoting resiliency, economic stability, and self-sufficiency for individuals and families served by this project. Also, from the first month it will expand the range of voluntary support services available to survivors to assure transition into permanent housing and it will maintain the relationship with landlords already established to assure clients can move into permanent housing as soon as possible. La Posada Home believes it's necessary to attack the problem of DV homelessness from two separate angles; the first being providing shelter to DV survivors and the second providing crucial intensive ancillary services (case management, therapy, support groups, education, job search assistance, mediation with landlords, rental assistance, furnishings, house search assistance, legal access, etc.) to help them acquire and retain safe, permanent housing. We expect that 100% of survivors will be safe after entering the program and 75% will be able to maintain safe housing for a minimum of 6 months after ending assistance. La Posada Home believes housing is a right, and DV and other issues that have contributed to a household's homelessness can best be addressed once they are housed in a safe, secure shelter. Clients are empowered to return to a permanent housing situation as quickly as possible without having to wait to meet preconditions.

4A-3h.	Applicant's Plan for Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	
	Describe in the field below how the project(s) will:	
1.	prioritize placement and stabilization of program participants;	
2.	place program participants in permanent housing;	
3.	place and stabilize program participants consistent with their preferences; and	
4.	place and stabilize program participants consistent with their stated needs.	

(limit 2,500 characters)

La Posada will prioritize individuals and families with higher needs and who are the most vulnerable utilizing a Housing first approach to assist participants in moving to permanent housing as quickly as possible. The client is the expert of his/her life and as such client choice is prioritized by assisting participants to move to permanent housing based on unique strengths, needs, preferences, and financial resources. 2-Clients are empowered to return to a permanent housing situation as quickly as possible without having to wait to meet preconditions. 3-Aligning with Preferences by conducting individualized assessments of housing preferences, involving participants in the housing search, offering diverse housing options, soliciting ongoing feedback 4-Addressing Stated Needs, by conducting comprehensive needs assessments, using a trauma-informed approach, providing service-enriched housing options, partnering with community service providers, and developing individualized housing stability plans. By considering both preferences and needs, the project will promote long-term housing stability and well-being.

4A-3i.	Applicant's Plan for Administering Trauma-Informed, Survivor-Centered Practices in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	
	Describe in the field below examples of how the new project(s) will:	
1.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant and staff interactions are based on equality, and minimize power differentials;	
2.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
3.	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;	
4.	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;	
5.	provide a variety of opportunities for program participants' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
6.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

1-La Posada upholds a non-punitive approach in our programs, ensuring that punitive interventions are not part of the agency's practice. Instead, La Posada actively promotes the autonomy of each client, empowering them to take control of their journeys toward healing and stability. Interactions between La Posada participants and staff are founded on the principles of equality and mutual respect. La Posada works diligently to minimize power differentials, recognizing that every participant brings their unique experiences, strengths, and needs to the table. La Posada operates as a guide in our clients' processes, providing support, resources, and a safe space where their voices are heard and valued. Eligibility for services are determined without regard to:

- Income;
- Gender or sexual orientation;
- Race, color, and national origin;
- Type or severity of abuse;
- Disabilities, as defined by the Americans with Disabilities Act;
- Number of previous times services have been sought from La Posada or other domestic violence programs;
- Cultural barriers of this organization, including language;
- Number of children accompanying the victim;
- Location of the batter;
- Immediacy of danger; and
- Whether the individual contributes, donates, or pays for those services.

2- La Posada places a strong emphasis on staff training, ensuring that all team members complete a comprehensive 40-hour victim advocacy training upon joining the project. The program's approach to case management is rooted in trauma-informed care, prioritizing the well-being of the program's participants. In addition, La Posada offers a range of support groups facilitated by our experienced staff, focusing on topics related to trauma. These groups serve as valuable resources, equipping survivors with the knowledge to understand the impact of trauma and providing them with essential tools to navigate their unique experiences. 3- La Posada staff works closely with participants to develop a housing stability plan specific to that individual to work toward survivor-defined goals and aspirations. Participants will be able to develop skills in budgeting, savings, and job search, as well as, increase their confidence and readiness for independent living. This approach ensures that the program aligns with participants' objectives and empowers them to take charge of their future.

4- La Posada staff receives training on equal access, cultural competence, and non-discrimination. All La Posada programs offer interpretation in the client's native language, if other than Spanish, over the phone through Language Line and sign language through a local certified interpreting agency. Each year La Posada offers staff and volunteer training from local and/or state presenters on ethnic and/or cultural sensitivity issues This ensures that all participants, regardless of their background, receive equitable services. 5- La Posada participants have access to various support groups focused on topics such as healthy relationships, boundary setting, understanding the impacts of domestic violence, and sexual respect. These groups provide a supportive and nurturing environment where participants can connect with peers, share experiences, and work toward personal growth and healing. 6- La Posada offers parenting support groups available to all participants. To ensure that participants can fully engage in these groups, childcare services are provided to accommodate their needs. In addition, the program's dedicated case managers will work closely with each participant to create individualized plans. Should a participant require assistance with childcare or legal services, the case managers will be equipped to provide referrals and facilitate access to these resources.

4A-3j.	Applicant's Plan for Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(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)

The program will implement regular focus group sessions that bring together previous participants who have successfully transitioned through the projects' housing program. These sessions will create a space for open dialogue, where participants can share their insights, challenges, and suggestions for improvement. The program currently conducts surveys to collect feedback from current and past participants. Incorporating the voices and perspectives of survivors with diverse lived expertise into the project's ongoing operations, feedback mechanisms, and decision-making processes ensures that the program remains responsive to the evolving needs of its participants.

4B. Attachments Screen For All Application Questions

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

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
 - . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
 - . We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	HACEP Admission P...	10/30/2024
1C-7. PHA Moving On Preference	No		
1D-10a. Lived Experience Support Letter	Yes	Support Letter	10/30/2024
1D-2a. Housing First Evaluation	Yes	Housing First Ass...	10/30/2024
1E-2. Local Competition Scoring Tool	Yes	Local Scoring Too...	10/30/2024
1E-2a. Scored Forms for One Project	Yes	New Project Score...	10/30/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	Reduced and Rejec...	10/30/2024
1E-5a. Notification of Projects Accepted	Yes	Renewal and New P...	10/30/2024
1E-5b. Local Competition Selection Results	Yes	Local Competition...	10/30/2024
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Screen Shot	10/30/2024
1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification to CoC	10/30/2024

2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HDX Competition R...	10/30/2024
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No	Care Coordination...	10/30/2024
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: HACEP Admission Policy

Attachment Details

Document Description:

Attachment Details

Document Description: Support Letter

Attachment Details

Document Description: Housing First Assessment Tool

Attachment Details

Document Description: Local Scoring Tools for New and Renewal Projects

Attachment Details

Document Description: New Project Score Cards

Attachment Details

Document Description: Reduced and Rejected Notification

Attachment Details

Document Description: Renewal and New Project Acceptance Notification

Attachment Details

Document Description: Local Competition Results

Attachment Details

Document Description: Screen Shot

Attachment Details

Document Description: Notification to CoC

Attachment Details

Document Description: HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: Care Coordination MOU

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	10/21/2024
1B. Inclusive Structure	10/29/2024
1C. Coordination and Engagement	10/29/2024
1D. Coordination and Engagement Cont'd	10/29/2024
1E. Project Review/Ranking	10/29/2024
2A. HMIS Implementation	10/30/2024
2B. Point-in-Time (PIT) Count	10/30/2024
2C. System Performance	10/30/2024
3A. Coordination with Housing and Healthcare	10/29/2024
3B. Rehabilitation/New Construction Costs	10/29/2024
3C. Serving Homeless Under Other Federal Statutes	10/29/2024

4A. DV Bonus Project Applicants	10/30/2024
4B. Attachments Screen	10/30/2024
Submission Summary	No Input Required

Targeted Funding [24 CFR 982.204(e)]

HUD may award a PHA funding for a specified category of families on the waiting list. The PHA must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, the PHA may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

HACEP Policy

HACEP administers the following types of targeted funding:

- Veterans Affairs Supportive Housing (VASH)
- Mainstream
- Continuum of Care: Siesta Gardens & Veteran's Lodge
- Foster Youth Initiative

HACEP Policy

When a person receiving Continuum of Care funding leaves the program the person's assistance is terminated and the assistance is not transferable.

Excerpt from the PHAs HCV Admin Plan

917 N. Ochoa St. Apt. 1
El Paso, TX 79902

10/30/2024

6044 Gateway Blvd. East
Suite 410
El Paso, TX 79905

Dear CoC Lead Applicant, El Paso Coalition for the Homeless,

I'm writing to express my strong support for the El Paso Coalition for the Homeless and their work within the Continuum of Care (CoC). As someone who has personally experienced homelessness, I can attest to the transformative power of the programs and services that the CoC funds.

My journey began when I found myself without a place to call home. It was a desperate and frightening time, but thankfully, I was connected with the YWCA's Rapid Rehousing program. The initial assistance they provided was a lifeline, offering immediate support during my most vulnerable moments. They assisted me in obtaining an apartment, paid the first months rent, deposit and several months of rent thereafter. The YWCA helped me secure a voucher for the HOME Emergency Housing program, which gave me a safe and stable place to live. Allowing me to work on vehicles while allowing me to continue studying towards my Masters degree.

This stability was the foundation upon which I could rebuild my life. I've now been in the HOME program for almost five years, and the progress I've made is immense. I've had the opportunity to pursue my education, and I'm on track to complete my Master's degree from the University of Texas at El Paso in 2026. This achievement would have been unimaginable during my time on the streets.

I'm deeply grateful for programs like the ones funded by the CoC. Without this continuum of care – from rapid rehousing to long-term support – I wouldn't be where I am today. The CoC's commitment to providing a range of services, tailored to individual needs, is what allows people to truly stabilize and thrive.

As someone who has walked this path, I've seen firsthand the impact of the Lead Applicant's work and their funded agencies, have on my life. Their dedication to the CoC's mission is evident in the lives they've transformed. I wholeheartedly support their continued leadership within the CoC.

I urge you to recognize the importance of the CoC and the vital role the Lead Applicant plays in its success. Please continue to support their efforts, so they can continue providing the services that change lives like mine.

Sincerely,



Pinchas Ophir Baruch



Housing First Standards Assessment Tool

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and

Provider Info tab: The Provider Information tab should be completed *prior* to beginning the assessment. Specifically, the **Project Name, Project Type, Target Sub-Population served, and Date of Assessment** fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: *Access, Evaluation, Services, Housing, Leases, and Project-Specific*. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed,

Project Type	Applicable Standards
Coordinated Entry	Access & Evaluation; Project-specific
Street Outreach	Access & Evaluation; Project-specific
Emergency Shelter	Access & Evaluation; Service & Housing; Project-specific
Transitional Housing	Access & Evaluation; Service & Housing; Leases; Project-specific
Rapid Rehousing	Access & Evaluation; Service & Housing; Leases; Project-specific
Permanent Supportive Housing	Access & Evaluation; Service & Housing; Leases; Project-specific

Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as “Always”, “Sometimes,” or “Not at all”.

Tab	Description	Purpose
-----	-------------	---------

Instructions	Tool overview and aim	Offers instruction to users on the assessment tool
Provider Info	Input provider, project and general assessment information	Determines project-specific standards for consideration
Standards - Access & Evaluation	Input compliance with standards concerning participant access to the project and input, project evaluation and performance management	Assesses whether access and evaluation are compliant with Housing First principles
Standards - Leases	Input compliance with standards concerning the lease and occupancy agreements, where applicable	Assesses whether leases and occupancy agreements are compliant with Housing First principles
Standards - Services & Housing	Input compliance with standards concerning the service and housing models and structure, where applicable	Assesses whether services and housing are compliant with Housing First principles
Standards – Project-Specific	Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable	Assesses whether specific project standards are compliant with Housing First principles
Report Summary	Displays assessment scores and conclusions, and highlights non-compliant standards	Printable summary of the assessment



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	
Acronym (If Applicable)	EPCH
Year Incorporated	2003
EIN	35-2192809
Street Address	6044 Gateway Blvd East Suite 410
Zip Code	79905

Project Information	
Project Name	Coordinated Entry
Project Budget	181000
Grant Number	TX0622
Name of Project Director	Camille Castillo
Project Director Email Address	ccastillo.epch@elp.twcbc.com
Project Director Phone Number	915-843-2170
Which best describes the project *	Coordinated Entry
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	
	People in Recovery

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Camille Castillo
CEO Email Address	ccastillo.epch@elp.twcbc.com
CEO Phone Number	915-843-2170
Name of Staff Member Guiding Assessment	Alejandro Vasquez
Staff Email Address	avasquez.epch@elp.twcbc.com
Staff Phone Number	915-843-2170

Assessment Information	
Name of Assessor	Alejandro Vasquez
Organizational Affiliation of Assessor	El Paso Coalition for the Homeless
Assessor Email Address	avasquez.epch@elp.twcbc.com
Assessor Phone Number	915-843-2170
Date of Assessment	Oct 30 2024



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source. <i>Optional notes here</i>	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1. <i>Optional notes here</i>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/ <i>Optional notes here</i>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable. <i>Optional notes here</i>	Always	Always	Always

Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project. <i>Optional notes here</i>	Always	Always	Always
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented. <i>Optional notes here</i>	Always	Always	Always
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies. <i>Optional notes here</i>	Always	Always	Always
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction. <i>Optional notes here</i>	Always	Always	Always
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services. <i>Optional notes here</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

This section is not applicable. Please see following section.

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Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

This section is not applicable. Please see following section.

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Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	<p>Coordinated Entry does not screen people out for perceived barriers</p> <p>Coordinated Entry does not screen people out for assistance due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, minimal linkages to other services, the type or extent of disability-related services or supports that are needed, or criminal justice history.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Project 2	<p>Process to assess project-level policies and alert CoC</p> <p>Written policies and procedures exist to determine which projects have project-level policies that screen out "high barrier" households, and the steps that the coordinated entry provider will take to alert the CoC of these projects, thereby enabling the CoC to take steps to assist these projects in adopting Housing First principles.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Project 3	<p>RRH as a bridge to permanent supportive housing</p> <p>Rapid Re-Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See HUD's Rapid Re-Housing Brief here: https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)</p> <p><i>Optional notes here</i></p>	Always	Always	Always
	<p>No additional standards</p> <p><i>Optional notes here</i></p>	Please select answer	Please select answer	Please select answer
	<p>No additional standards</p>	Please select answer	Please select answer	Please select answer

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

	Standard	Population Specific Standards	Say It	Document It	Do It
Population 1	Recovery housing is offered as one choice among other housing opportunities	Connection to recovery housing reflects individual choice for this path toward recovery. Abstinence-only spaces are incorporated into a Housing First model wherever possible, thus providing this type of recovery option to those who choose it. Recovery supports are offered, particularly connections to community-based treatment options.	Always	Always	Always
		<i>Optional notes here</i>			
Population 2	Services include relapse support	Housing and services include relapse support that does not automatically evict or discharge a participant from the project for temporary relapse. Relapse support might include referrals to outpatient treatment or direct provision of outpatient services or the ability to hold a unit for a certain period of time (30-90 days) while the participant undergoes residential treatment.	Always	Always	Always

Optional notes here

Population 3

Services support sustained recovery

Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connections to community-based treatment options.

Always

Always

Always

Optional notes here

Population

No additional standards

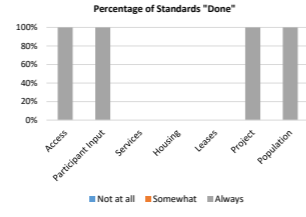
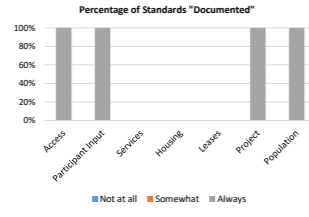
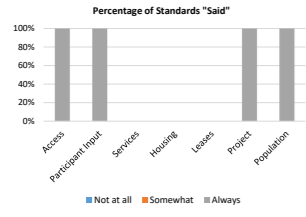
Optional notes here



Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Your score: 90
Max potential score: 90

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



Non-Compliant Standards ("Not at all" to Whether Standard is Said)

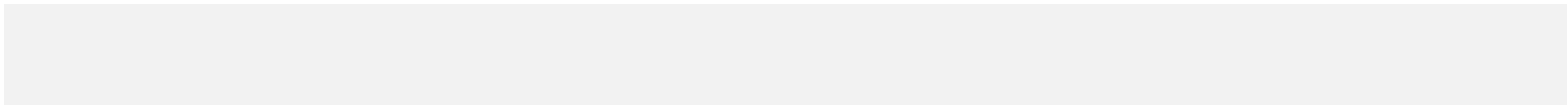
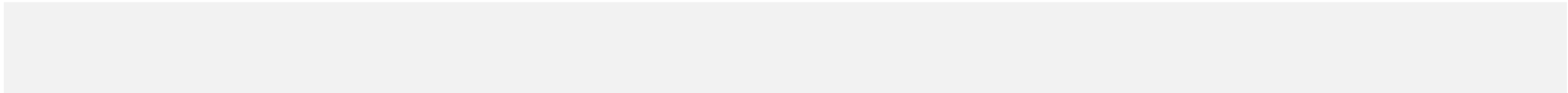
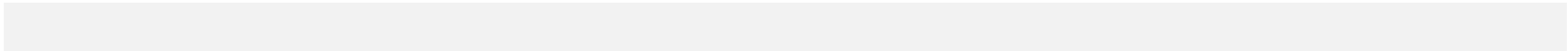
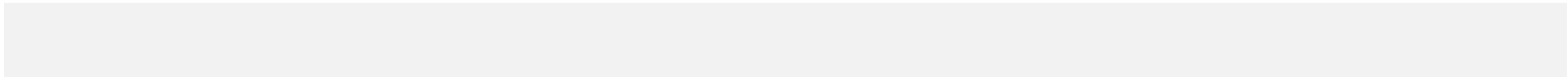
Category No. Name Standard

Non-Documented Standards ("Not at All" to Whether Standard is Documented)

Category No. Name Standard

Non-Evidenced Standards ("Not at All" to Whether Standard is Done")

Category No. Name Standard



Example	Document	Findings	N	Name	Standard	Category	Notes	Not at all	Not at all	Not at all
Always	Always	Always	0	0	Admission to projects is not contingent on pre-requirements such as abstinence, minimum income requirements, health or mental health history, medication adherence, etc. - critical justice	Access	Optimal notes here	Access	10	
Always	Always	Always	0	0	Projects do not deny assistance for unnecessary reasons	0	Optimal notes here	Access	10	
Always	Always	Always	0	0	Professors and steering committees that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.	Access	Optimal notes here	Access	10	
Always	Always	Always	0	0	Equal access is provided in accordance with the 2012 and 2014 Equal Access Rules, meaning that any project funded by IHED must ensure equal access for persons regardless of race's sexual orientation	Access	Optimal notes here	Access	10	
Always	Always	Always	0	0	Admission process is expedited with speed and efficiency	0	Optimal notes here	Access	10	
Always	Always	Always	0	0	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants	Access	Optimal notes here	Access	10	
Always	Always	Always	0	0	Intake processes are person-centered and flexible	0	Optimal notes here	Access	10	
Always	Always	Always	0	0	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules.	Access	Optimal notes here	Access	10	
Always	Always	Always	0	0	The provider/project accepts and makes referrals directly to providers within participants in the CoC-designated Coordinated Entry process as part of streamlined community-wide system access and steps. If these processes are not yet implemented, projects	Access	Optimal notes here	Access	10	
Always	Always	Always	0	0	Exits from homelessness are avoided	0	Optimal notes here	Access	10	
Always	Always	Always	0	0	Projects that can no longer serve particular households within the coordinated entry process, or the community's existing referral process of coordinated entry processes are not yet implemented, projects	Access	Optimal notes here	Access	10	
Always	Always	Always	0	0	Participant education is ongoing	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Projects provide ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout waitlist, participants are informed	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Projects ensure regular, formal opportunities for participation	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Projects provide participant choice in services	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participants are able to choose from an array of services. Services offered are housing-focused and include the following areas of support: employment and income, childhood and education, community	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Staff are trained in cultural and anti-racism strategies	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Service support is as permanent as the housing	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Service continuation as permanently available and accessible for participants in Permanent Supportive Housing - Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Services are continued despite change in housing or other	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Wherever possible, participants continue to be offered services even if they have their housing unit or had their caregiver project, or if they are placed in a short-term treatment program. Ideally, the	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participant engagement is a core component of service delivery	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Self-paced effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other maintainers	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Services are culturally appropriate with translation services	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Staff are trained in cultural and anti-racism strategies (include)	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Services support a participant's ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Housing is not dependent on participation in services	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or documentation of progress in	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Substance use is not a reason for termination	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participants are only terminated from the project for violations in the lease or occupancy agreement, as applicable. Contractual agreements or an addendum to the lease do not include conditions for	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	The rules and regulations of the project are consistent on par	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participants have the option to transfer to another project	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Transfers should be accommodated for reasons who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Wherever possible, city	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Housing is considered permanent (not applicable for Transitional)	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Housing is not time-limited (though not assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party.	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participant choice is fundamental	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In practice, In practice,	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Leases are the same for participants as for other tenants	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable for the participant and owner's choice. People experiencing	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participants receive education about their lease or occupancy	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers share in their legal-defined roles and responsibilities.	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Movements are used to prevent evictions	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Projects or building management, with services support, incorporates a culture of eviction resistance, reinforced through practices and policies that prevent lease violations and evictions among peers.	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Providing stable housing is a priority	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Projects engage in a commitment effort to hold housing for participants, even if they have their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Rent payment policies respond to tenants' needs (or apply)	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Coordinated Entry does not screen people out for perceived	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Which issues are accountable to the rental agreement, adjustments may be needed on a case-by-case basis. As necessary, participants are given special payment arrangements for rent arrears and/or a	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Processes to assess project-level policies and align CoC	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Written policies and procedures exist to determine which projects have project-level policies that screen out "high barrier" households, and the steps that the coordinated entry provider will take to	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	HEH as a bridge to permanent supportive housing	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Best-fit Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See IHED's Rapid Re-Housing	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Recovery housing is offered as one choice among the	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Connections to recovery housing reflects individual choice for the path toward recovery. Abstinence-only spaces are incorporated into a Housing First model whenever possible, thus providing the type	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Services include relapse support	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Housing and services include relapse support that does not automatically evict or discharge a participant from the project for temporary relapse. Relapse support might include referrals to outpatient	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Always	Always	Always	0	0	Services support sustained recovery	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	Recovery projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term	Participant In	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	0	Optimal notes here	Participant In	Optimal notes here	Participant In

Order of columns:
 Not documented (1-3)
 Not documented (3-5)
 Not documented (5-10)



This page does not comprise part of the assessment. It is for information only.

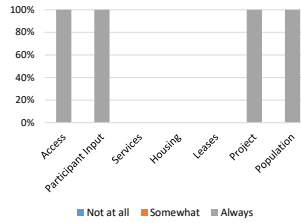
Numbers	Access			Participant Input			Services			Housing			Leases			Project-specific			Population		
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always
Please select answer	0			0			21			12			21			0			0		
Say it	0	0	7	0	0	2	0	0	0	0	0	0	0	0	0	0	0	3	0	0	3
Document it	0	0	7	0	0	2	0	0	0	0	0	0	0	0	0	0	0	3	0	0	3
Do it	0	0	7	0	0	2	0	0	0	0	0	0	0	0	0	0	0	3	0	0	3
Checks	-			-			-			-			-			-			-		

Percentages	Access			Participant Input			Services			Housing			Leases			Project-specific			Population		
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always
Please select answer				0%			300%			300%			300%			0%			0%		
Say it	0%	0%	100%	0%	0%	100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	100%	0%	0%	100%
Document it	0%	0%	100%	0%	0%	100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	100%	0%	0%	100%
Do it	0%	0%	100%	0%	0%	100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	100%	0%	0%	100%
Number of standards	7			2			7			4			7			3			3		

'Say It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	0%	0%	0%	100%	100%
Check	-						

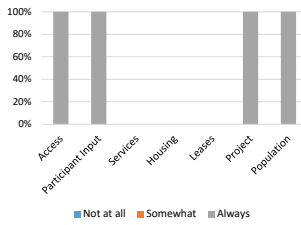
"Say It" Standards, by Category and Response



'Document It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	0%	0%	0%	100%	100%
Check	-						

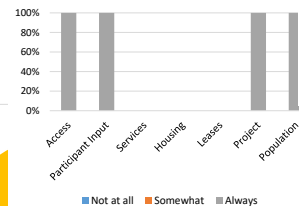
"Do It" Standards, by Category and Response



'Do It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	0%	0%	0%	100%	100%
Check	-						

"Document It" Standards, by Category and Response



Supportive Housing Standards Rating	Pointer
Start	Value 90
Initial	Pointer 3
Middle	End 90
End	
Max	

Score: 90

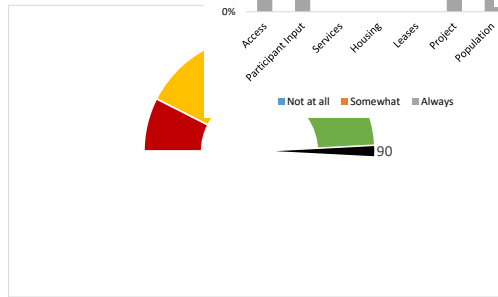
Standard Numbers	With special pop	Without special pop
Coordinated entry	15	12
Street outreach	15	12
Emergency shelter	26	23
Transitional housing	33	30
Rapid rehousing	33	30
Permanent supportive housing	33	30

Max answer score (for 'always') 6 3 categories (say, document, do) x 2 max points for 'always'

Answer Numbers	With special pop	Without special pop
Coordinated entry	90	72
Street outreach	90	72
Emergency shelter	156	138
Transitional housing	198	180
Rapid rehousing	198	180
Permanent supportive housing	198	180

Project type	Coordinated Entry	1
Special population	People in Recovery	1

Evaluation max score 90





Assumptions for the standards

This page does not comprise part of the assessment. It is for information only.

Project standards

Standards	Coordinated Entry	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Rehousing	Permanent Supportive Housing	Joint Transitional Housing & Rapid Rehousing
Title	Coordinated Entry does not screen people out for perceived barriers	Projects screen for health and safety needs	Focus of emergency shelter is on safe and responsive temporary shelter	Quick access to TH assistance	Quick access to RRH assistance	Quick access to PSH assistance	Quick access to RRH assistance
Project 1	Coordinated Entry does not screen people out for assistance due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, minimal linkages to other services, the type or extent of disability-related services or supports that are needed, or criminal justice history.	Outreach projects screen people contacted through outreach as soon as possible for critical health and safety needs, providing immediate response to people with the most severe needs.	Participants and staff understand that the primary goals of the emergency shelter are to provide temporary accommodation that is safe, respectful, and responsive to individual needs and that participants are offered permanent housing as quickly as possible, regardless of perceived barriers.	A transitional housing project ensures quick linkage to a unit and services based on participant choice.	A Rapid Re-housing project ensures quick linkage to rapid rehousing assistance, based on participant choice.	A permanent supportive housing project ensures quick linkage to a unit and wrap-around services, based on participant needs, preferences, and resource availability.	A Rapid Re-housing project ensures quick linkage to rapid rehousing assistance, based on participant choice.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	Process to assess project-level policies and alert CAC	Street outreach projects are focused on providing access to housing and services	Housing comes first	Transitional housing is focused on safe and quick transition to permanent housing	RRH services support people in maintaining their housing	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	RRH services support people in maintaining their housing
Project 2	Written policies and procedures exist to determine which projects have project-level policies that screen out "high barriers" households, and the steps that the coordinated entry provider will take to alert the CAC of these projects, thereby enabling the CAC to take steps to assist these projects in adopting Housing First principles.	Participants and staff understand that the primary goals of street outreach are to provide access to temporary housing and services and/or re-housing participants as quickly as possible, regardless of perceived barriers. Street outreach projects reflect the low barriers orientation of the Coordinated Entry process.	If a temporary shelter placement is made, assessment and planning for permanent housing placement begins as quickly as possible. People who are unsheltered are not required to first enter an emergency shelter in order to access permanent housing placement assistance and enter permanent housing.	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.	Participants and staff understand that a primary goal of rapid rehousing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with most severe service needs and help participants stay housed, regardless of other perceived barriers.	Participants and staff understand that a primary goal of permanent housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	RRH as a bridge to permanent supportive housing	Street outreach is linked to Coordinated Entry		TH projects provide appropriate services	Providers continuously assess a participant's need for assistance	Property Management duties are separate and distinct from services/case management	Providers continuously assess a participant's need for assistance
Project 3	Rapid Re-Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See HED's Rapid Re-Housing Brief here: https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)	Written policy and procedures detail a process by which street outreach staff ensure that persons assessed on the streets are offered the same standardized process as persons assessed through site-based access points. Outreach teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing. Based on the CAC's decision about how street outreach is incorporated into the assessment process, street outreach projects must comply with the CAC's decision.	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) when the participant chooses transitional housing. Services are not required in order to participate in housing.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.	In order to provide clear roles of staff for participants in terms of lease and rules conformance as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communication and meetings regarding Participants to address tenancy issues in order to preserve tenancy.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street outreach continuously engages those experiencing homelessness and on the street		Housing comes first			Transitional housing is focused on safe and quick transition to permanent housing
Project 4	No additional standards	Through continuous engagement strategies, a street outreach project provides quick linkage to housing and services when a person is ready to engage.	No additional standards	No individuals or families, including those who are unsheltered, are required to enter a transitional housing project in order to access permanent housing placement assistance and enter permanent housing.	No additional standards	No additional standards	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street Outreach engagements inform the community's efforts to improve their crisis response system		TH projects provide appropriate services			
Project 5	No additional standards	Communities use street outreach engagements with those on the street and in encampments to understand and remove barriers to those accessing the crisis response system.	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.	No additional standards	No additional standards	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title							
Project 6	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards

Project standards

Standards	Youth and Young Adults	People in Recovery	Domestic Violence Survivors	None of the above
Title	Services are offered	Recovery housing is offered as one choice among other housing opportunities	Participant safety is a priority at all points of engagement and in all planning processes	
Population 1	Services are focused on ensuring that youth transition to independence.	Connection to recovery housing reflects individual choice for their path toward recovery. Abstinence-only options are incorporated into a Housing First model wherever possible, thus providing this type of recovery option to those who choose it. Recovery supports are offered, particularly connections to community-based treatment options.	Led by the survivor, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety. Recovery supports are offered, particularly connections to community-based treatment options.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Projects include positive youth development principles	Services include relapse support	Survivor-driven advocacy is available	
Population 2	Youth projects should include positive youth development orientation. Positive youth development builds on strengths and resiliency. By focusing on strengths and assets, rather than what might be "wrong," youth are empowered and are equipped to make positive decisions.	Housing and services include relapse support that does not automatically exist or discharge participants from the project for temporary relapse. Relapse support might include referrals to outpatient treatment or direct provision of outpatient services or the ability to hold a unit for a certain period of time (30-90 days) while the participant undergoes residential treatment.	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Projects use flexible and survivor-focused approaches to overcome barriers survivors may face in accessing services through traditional models.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Staff use harm reduction practices and approaches	Services support sustained recovery	Housing stability is a priority	
Population 3	Youth models employ a harm reduction and recovery orientation, including those developed for youth and young adults with substance use and additional. Projects may make abstinence-based models available for youth and young adults; however, the choice should be with the participant, not with the project.	Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connections to community-based treatment options.	Providers support survivors and their children to retain or obtain safe, stable housing and location of housing. Housing is located in an area that is considered safe from the abusive relationship.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Project design accounts for the age of youth and young adults to be served			
Population 4	Developmentally-appropriate project design ensures that project entry and on-going participation is not predicated on behaviors or experiences that youth and young adults may not currently have or if they were older would not result in consequences. For example, projects should accept and allow continued participation for youth who do not have income or immediate prospects of income because their age has not allowed them the opportunity to gain employment.	No additional standards	No additional standards	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	



Housing First Standards Assessment Tool

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and

Provider Info tab: The Provider Information tab should be completed *prior* to beginning the assessment. Specifically, the **Project Name, Project Type, Target Sub-Population served, and Date of Assessment** fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: *Access, Evaluation, Services, Housing, Leases, and Project-Specific*. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed,

Project Type	Applicable Standards
Coordinated Entry	Access & Evaluation; Project-specific
Street Outreach	Access & Evaluation; Project-specific
Emergency Shelter	Access & Evaluation; Service & Housing; Project-specific
Transitional Housing	Access & Evaluation; Service & Housing; Leases; Project-specific
Rapid Rehousing	Access & Evaluation; Service & Housing; Leases; Project-specific
Permanent Supportive Housing	Access & Evaluation; Service & Housing; Leases; Project-specific

Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as “Always”, “Sometimes,” or “Not at all”.

Tab	Description	Purpose
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Instructions	Tool overview and aim	Offers instruction to users on the assessment tool
Provider Info	Input provider, project and general assessment information	Determines project-specific standards for consideration
Standards - Access & Evaluation	Input compliance with standards concerning participant access to the project and input, project evaluation and performance management	Assesses whether access and evaluation are compliant with Housing First principles
Standards - Leases	Input compliance with standards concerning the lease and occupancy agreements, where applicable	Assesses whether leases and occupancy agreements are compliant with Housing First principles
Standards - Services & Housing	Input compliance with standards concerning the service and housing models and structure, where applicable	Assesses whether services and housing are compliant with Housing First principles
Standards – Project-Specific	Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable	Assesses whether specific project standards are compliant with Housing First principles
Report Summary	Displays assessment scores and conclusions, and highlights non-compliant standards	Printable summary of the assessment



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	Center Against Sexual and Family Violence
Acronym (If Applicable)	CASFV
Year Incorporated	
EIN	74-1945924
Street Address	580 Giles, El Paso TX
Zip Code	79915

Project Information	
Project Name	Coordinated Entry
Project Budget	\$ 85,450.00
Grant Number	TX0524L6T032304
Name of Project Director	Hector Garcia
Project Director Email Address	harcia@casfv.org
Project Director Phone Number	9155931000 ext 401
Which best describes the project *	Coordinated Entry
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	Domestic Violence Survivors

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Sandra Garcia
CEO Email Address	sagarcia@casfv.org
CEO Phone Number	9155931000 ext 403
Name of Staff Member Guiding Assessment	Sandra Garcia
Staff Email Address	Same as above
Staff Phone Number	Same as above

Assessment Information	
Name of Assessor	Alejandro Vasquez
Organizational Affiliation of Assessor	El paso Coalition for the Homeless
Assessor Email Address	avasquez.epch@elp.twcbc.com
Assessor Phone Number	9158432170
Date of Assessment	Nov 02 2016



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	<p>Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	<p>Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	<p>Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	<p>Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable.</p> <p><i>Optional notes here</i></p>	Always	Always	Always

Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project. <i>Optional notes here</i>	Always	Always	Always
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented. <i>Optional notes here</i>	Always	Always	Always
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies. <i>Optional notes here</i>	Always	Always	Always
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction. <i>Optional notes here</i>	Always	Always	Always
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services. <i>Optional notes here</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

This section is not applicable. Please see following section.

Always

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Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

This section is not applicable. Please see following section.

Always

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This section is not applicable. Please see following section.

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Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	<p>Coordinated Entry does not screen people out for perceived barriers</p> <p>Coordinated Entry does not screen people out for assistance due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, minimal linkages to other services, the type or extent of disability-related services or supports that are needed, or criminal justice history.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Project 2	<p>Process to assess project-level policies and alert CoC</p> <p>Written policies and procedures exist to determine which projects have project-level policies that screen out "high barrier" households, and the steps that the coordinated entry provider will take to alert the CoC of these projects, thereby enabling the CoC to take steps to assist these projects in adopting Housing First principles.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Project 3	<p>RRH as a bridge to permanent supportive housing</p> <p>Rapid Re-Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See HUD's Rapid Re-Housing Brief here: https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)</p> <p><i>Optional notes here</i></p>	Always	Always	Always
	<p>No additional standards</p> <p><i>Optional notes here</i></p>	Always	Always	Always
	<p>No additional standards</p>	Always	Always	Always

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

	Standard	Population Specific Standards	Say It	Document It	Do It
Population 1	Participant safety is a priority at all points of engagement and in all planning processes	Led by the survivor, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety. <i>Optional notes here</i>	Always	Always	Always
Population 2	Survivor-driven advocacy is available	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Project uses flexible and survivor-focused approaches to overcome barriers survivors may face in accessing services through traditional models.	Always	Always	Always

Optional notes here

Population 3

Housing stability is a priority

Providers support survivors and their children to retain or obtain safe, stable housing. Survivors choose the type of housing and location of housing. Housing is located in an area that is considered safe from the abusive relationship.

Always

Always

Always

Optional notes here

Population

No additional standards

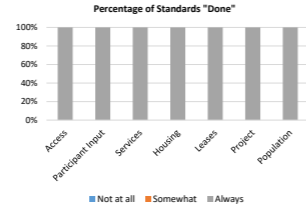
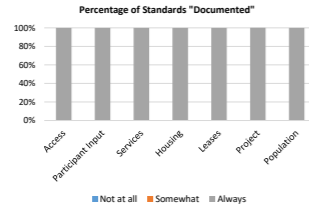
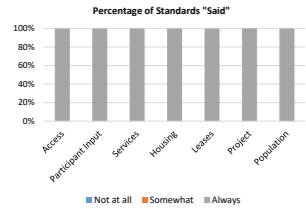
Optional notes here



Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Your score: 210
Max potential score: 90

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



Non-Compliant Standards ("Not at all" to Whether Standard is Said)

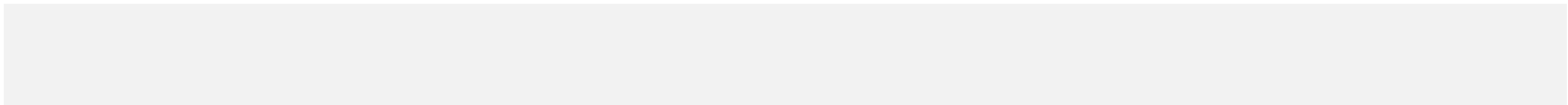
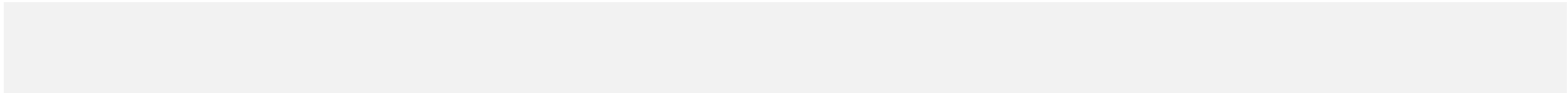
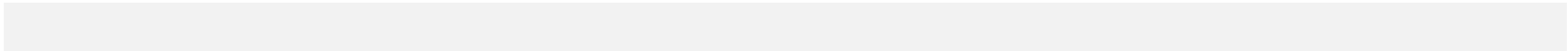
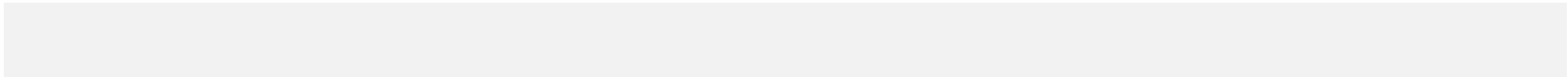
Category No. Name Standard

Non-Documented Standards ("Not at All" to Whether Standard is Documented)

Category No. Name Standard

Non-Evidenced Standards ("Not at All" to Whether Standard is Done")

Category No. Name Standard



Example	Document	Findings	N	Name	Standard	Category	Notes	Not at all	Not at all	Not at all
Always	Always	Always	0	0	Admission to projects is not contingent on pre-qualifications such as absence of substance abuse, minimum income requirements, health or mental health history, medication adherence, etc. Critical parts 1	Access	Optimal notes here	10		
Always	Always	Always	0	0	Projects do not deny assistance for unnecessary reasons	0	Optimal notes here	10		
Always	Always	Always	0	0	Professors and steering committees that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #11.	Access	Optimal notes here	10		
Always	Always	Always	0	0	Access regardless of sexual orientation, gender identity, etc.	1	Equal access is provided in accordance with the 2012 and 2014 Equal Access Rules, meaning that any project funded by HEDD must ensure equal access for persons regardless of one's sexual orientation	Access	Optimal notes here	10
Always	Always	Always	0	0	Admission process is expedited with speed and efficiency	0	Optimal notes here	10		
Always	Always	Always	0	0	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants	Access	Optimal notes here	10		
Always	Always	Always	0	0	Intake processes are person-centered and flexible	0	Optimal notes here	10		
Always	Always	Always	0	0	The provider/project accepts and makes referrals directly to	0	Optimal notes here	10		
Always	Always	Always	0	0	Participants in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and steps. If these processes are not yet implemented, projects 1	Access	Optimal notes here	10		
Always	Always	Always	0	0	Extra homechecks are avoided	0	Optimal notes here	10		
Always	Always	Always	0	0	Projects that can no longer serve particular households within the coordinated entry process, or the community's existing referral process of coordinated entry processes are not yet implemented, projects 1	Access	Optimal notes here	10		
Always	Always	Always	0	0	Participant education is ongoing	0	Optimal notes here	10		
Always	Always	Always	0	0	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout waitlist, participants are informed	Participant In	Optimal notes here	10		
Always	Always	Always	0	0	Project creates regular, formal opportunities for participant feedback	Participant In	Optimal notes here	10		
Always	Always	Always	0	0	Project provides participant choice in services	0	Optimal notes here	10		
Always	Always	Always	0	0	Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community	Participant In	Optimal notes here	10		
Always	Always	Always	0	0	Not applicable. Please see following within.	0	Optimal notes here	10		
Always	Always	Always	0	0	Service support is as permanent as the housing	0	Optimal notes here	10		
Always	Always	Always	0	0	Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up	Services	Optimal notes here	10		
Always	Always	Always	0	0	Services are continued despite change in housing or	0	Optimal notes here	10		
Always	Always	Always	0	0	Wherever possible, participants continue to be offered services even if they leave their housing unit or had their occupancy agreement, or if they are placed in a short-term treatment facility. Ideally, the	Services	Optimal notes here	10		
Always	Always	Always	0	0	Participant engagement is a core component of service delivery	0	Optimal notes here	10		
Always	Always	Always	0	0	Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other maintenance	Services	Optimal notes here	10		
Always	Always	Always	0	0	Services are culturally appropriate, with translation services	0	Optimal notes here	10		
Always	Always	Always	0	0	Staff are trained in cultural and non-clinical strategies (such	0	Optimal notes here	10		
Always	Always	Always	0	0	Housing is not dependent on participation in services	0	Optimal notes here	10		
Always	Always	Always	0	0	Substance use is not a reason for termination	0	Optimal notes here	10		
Always	Always	Always	0	0	The rules and regulations of the project are consistent on par	0	Optimal notes here	10		
Always	Always	Always	0	0	Participants have the option to transfer to another project	0	Optimal notes here	10		
Always	Always	Always	0	0	Housing is considered permanent (not applicable for Transitional	0	Optimal notes here	10		
Always	Always	Always	0	0	Participant choice is fundamental	0	Optimal notes here	10		
Always	Always	Always	0	0	Leaves are the same for participants as for other tenants	0	Optimal notes here	10		
Always	Always	Always	0	0	Participants receive education about their lease or occupancy	0	Optimal notes here	10		
Always	Always	Always	0	0	Monitors are used to prevent eviction	0	Optimal notes here	10		
Always	Always	Always	0	0	Providing stable housing is a priority	0	Optimal notes here	10		
Always	Always	Always	0	0	Best permanent policies respond to tenants' needs (as applicable)	0	Optimal notes here	10		
Always	Always	Always	0	0	Coordinated Entry does not screen people out for assistance due	0	Optimal notes here	10		
Always	Always	Always	0	0	Process to assess project-level policies and alter CoC	0	Optimal notes here	10		
Always	Always	Always	0	0	HEH is a bridge to permanent supportive housing	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		
Always	Always	Always	0	0	Additional standards	0	Optimal notes here	10		

(Order of columns:
Not documented (2-3)
Not documented (3-5)
Not documented (30-5)



This page does not comprise part of the assessment. It is for information only.

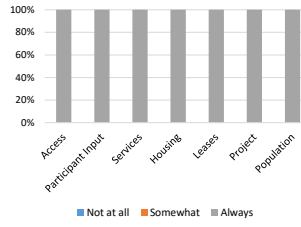
Numbers	Access			Participant Input			Services			Housing			Leases			Project-specific			Population		
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always
Please select answer	0			0			0			0			0			-6			0		
Say it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	3
Document it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	3
Do it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	3
Checks	-			-			-			-			-			-			-		

Percentages	Access			Participant Input			Services			Housing			Leases			Project-specific			Population		
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always
Please select answer	0%			0%			0%			0%			0%			-200%			0%		
Say it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	100%
Document it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	100%
Do it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	100%
Number of standards	7			2			7			4			7			3			3		

'Say It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	100%
Check	-						

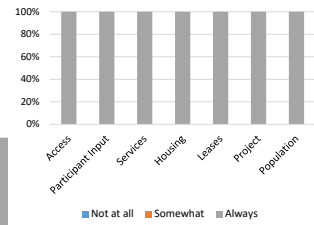
"Say It" Standards, by Category and Response



'Document It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	100%
Check	-						

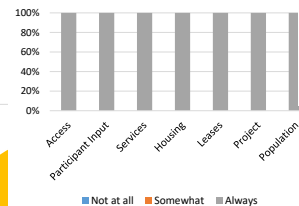
"Do It" Standards, by Category and Response



'Do It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	100%
Check	-						

"Document It" Standards, by Category and Response



Supportive Housing Standards Rating	Pointer
Start	Value 210
Initial	Pointer 3
Middle	End 90
End	
Max	

Score: 210

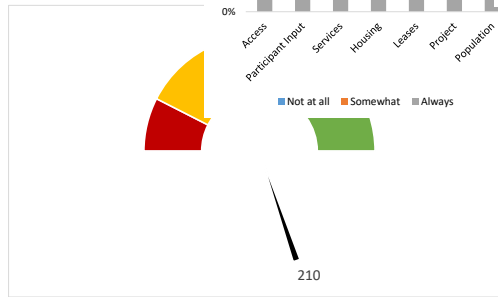
Standard Numbers	With special pop	Without special pop
Coordinated entry	15	12
Street outreach	15	12
Emergency shelter	26	23
Transitional housing	33	30
Rapid rehousing	33	30
Permanent supportive housing	33	30

Max answer score (for 'always') 6 3 categories (say, document, do) x 2 max points for 'always'

Answer Numbers	With special pop	Without special pop
Coordinated entry	90	72
Street outreach	90	72
Emergency shelter	156	138
Transitional housing	198	180
Rapid rehousing	198	180
Permanent supportive housing	198	180

Project type	Coordinated Entry	1
Special population	Domestic Violence Survivors	1

Evaluation max score 90





Assumptions for the standards

This page does not comprise part of the assessment. It is for information only.

Project standards

Standards	Coordinated Entry	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Rehousing	Permanent Supportive Housing	Joint Transitional Housing & Rapid Rehousing
Title	Coordinated Entry does not screen people out for perceived barriers	Projects screen for health and safety needs	Focus of emergency shelter is on safe and responsive temporary shelter	Quick access to TH assistance	Quick access to RRH assistance	Quick access to PSH assistance	Quick access to RRH assistance
Project 1	Coordinated Entry does not screen people out for assistance due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, minimal linkages to other services, the type or extent of disability-related services or supports that are needed, or criminal justice history.	Outreach projects screen people contacted through outreach as soon as possible for critical health and safety needs, providing immediate response to people with the most severe needs.	Participants and staff understand that the primary goals of the emergency shelter are to provide temporary accommodation that is safe, respectful, and responsive to individual needs and that participants are offered permanent housing as quickly as possible, regardless of perceived barriers.	A transitional housing project ensures quick linkage to a unit and services based on participant choice.	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice.	A permanent supportive housing project ensures quick linkage to a unit and wrap-around services, based on participant needs, preferences, and resource availability.	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	Process to assess project-level policies and alert CAC	Street outreach projects are focused on providing access to housing and services	Housing comes first	Transitional housing is focused on safe and quick transition to permanent housing	RRH services support people in maintaining their housing	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	RRH services support people in maintaining their housing
Project 2	Written policies and procedures exist to determine which projects have project-level policies that screen out "high barriers" households, and the steps that the coordinated entry provider will take to alert the CAC of these projects, thereby enabling the CAC to take steps to assist these projects in adopting Housing First principles.	Participants and staff understand that the primary goals of street outreach are to provide access to temporary housing and services and/or re-housing participants as quickly as possible, regardless of perceived barriers. Street outreach projects reflect the low barriers orientation of the Coordinated Entry process.	If a temporary shelter placement is made, assessment and planning for permanent housing placement begins as quickly as possible. People who are unsheltered are not required to first enter an emergency shelter in order to access permanent housing placement assistance and enter permanent housing.	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.	Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with the most severe service needs and help participants stay housed, regardless of other perceived barriers.	Participants and staff understand that a primary goal of permanent housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	RRH as a bridge to permanent supportive housing	Street outreach is linked to Coordinated Entry		TH projects provide appropriate services	Providers continuously assess a participant's need for assistance	Property Management duties are separate and distinct from services/case management	Providers continuously assess a participant's need for assistance
Project 3	Rapid Re-Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See HED's Rapid Re-Housing Brief here: https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)	Written policy and procedures detail a process by which street outreach staff ensures that persons assessed on the streets are offered the same standardized process as persons assessed through site-based access points. Outreach teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing. Based on the CAC's decision about how street outreach is incorporated into the assessment process, street outreach projects must comply with the CAC's decision.	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) when the participant chooses transitional housing. Services are not required in order to participate in housing.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.	In order to provide clear roles of staff for participants in terms of lease and rules conformance as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communication and meetings regarding Participants to address tenancy issues in order to preserve tenancy.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street outreach continuously engages those experiencing homelessness and on the street		Housing comes first			Transitional housing is focused on safe and quick transition to permanent housing
Project 4	No additional standards	Through continuous engagement strategies, a street outreach project provides quick linkage to housing and services when a person is ready to engage.	No additional standards	No individuals or families, including those who are unsheltered, are required to enter a transitional housing project in order to access permanent housing placement assistance and enter permanent housing.	No additional standards	No additional standards	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street Outreach engagements inform the community's efforts to improve their crisis response system					TH projects provide appropriate services
Project 5	No additional standards	Communities use street outreach engagements with those on the street and in encampments to understand and remove barriers to those accessing the crisis response system.	No additional standards	No additional standards	No additional standards	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title							
Project 6	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards

Project standards

	Youth and Young Adults	People in Recovery	Domestic Violence Survivors	Note of the above
Title	Services are offered	Recovery housing is offered as one choice among other housing opportunities	Participant safety is a priority at all points of engagement and in all planning processes	
Population 1	Services are focused on ensuring that youth transition to independence.	Connection to recovery housing reflects individual choice for their path toward recovery. Abstinence-only options are incorporated into a Housing First model wherever possible, thus providing this type of recovery option to those who choose it. Recovery supports are offered, particularly connections to community-based treatment options.	Led by the survivor, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety. Recovery supports are offered, particularly connections to community-based treatment options.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Projects include positive youth development principles	Services include relapse support	Survivor-driven advocacy is available	
Population 2	Youth projects should include positive youth development orientation. Positive youth development builds on strengths and resiliency. By focusing on strengths and assets, rather than what might be "wrong," youth are empowered and are equipped to make positive decisions.	Housing and services include relapse support that does not automatically exist or discharge participants from the project for temporary relapse. Relapse support might include referrals to outpatient treatment or direct provision of outpatient services or the ability to hold a unit for a certain period of time (30-90 days) while the participant undergoes residential treatment.	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Projects use flexible and survivor-focused approaches to overcome barriers survivors may face in accessing services through traditional models.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Staff use harm reduction practices and approaches	Services support sustained recovery	Housing stability is a priority	
Population 3	Youth models employ a harm reduction and recovery orientation, including those developed for youth and young adults with substance use and additional. Projects may make abstinence-based models available for youth and young adults; however, the choice should be with the participant, not with the project.	Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connections to community-based treatment options.	Providers support survivors and their children to retain or obtain safe, stable housing and location of housing. Housing is located in an area that is considered safe from the abusive relationship.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Project design accounts for the age of youth and young adults to be served			
Population 4	Developmentally-appropriate project design ensures that project entry and on-going participation is not predicated on behaviors or experiences that youth and young adults may not currently have or if they were older would not result in consequences. For example, projects should accept and allow continued participation for youth who do not have income or immediate prospects of income because their age has not allowed them the opportunity to gain employment.	No additional standards	No additional standards	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	



Housing First Standards Assessment Tool

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and

Provider Info tab: The Provider Information tab should be completed *prior* to beginning the assessment. Specifically, the **Project Name, Project Type, Target Sub-Population served, and Date of Assessment** fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: *Access, Evaluation, Services, Housing, Leases, and Project-Specific*. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed,

Project Type	Applicable Standards
Coordinated Entry	Access & Evaluation; Project-specific
Street Outreach	Access & Evaluation; Project-specific
Emergency Shelter	Access & Evaluation; Service & Housing; Project-specific
Transitional Housing	Access & Evaluation; Service & Housing; Leases; Project-specific
Rapid Rehousing	Access & Evaluation; Service & Housing; Leases; Project-specific
Permanent Supportive Housing	Access & Evaluation; Service & Housing; Leases; Project-specific

Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as “Always”, “Sometimes,” or “Not at all”.

Tab	Description	Purpose
-----	-------------	---------

Instructions	Tool overview and aim	Offers instruction to users on the assessment tool
Provider Info	Input provider, project and general assessment information	Determines project-specific standards for consideration
Standards - Access & Evaluation	Input compliance with standards concerning participant access to the project and input, project evaluation and performance management	Assesses whether access and evaluation are compliant with Housing First principles
Standards - Leases	Input compliance with standards concerning the lease and occupancy agreements, where applicable	Assesses whether leases and occupancy agreements are compliant with Housing First principles
Standards - Services & Housing	Input compliance with standards concerning the service and housing models and structure, where applicable	Assesses whether services and housing are compliant with Housing First principles
Standards – Project-Specific	Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable	Assesses whether specific project standards are compliant with Housing First principles
Report Summary	Displays assessment scores and conclusions, and highlights non-compliant standards	Printable summary of the assessment



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	Center Against Sexual and Family Violence
Acronym (If Applicable)	CASFV
Year Incorporated	
EIN	74-1945924
Street Address	580 Giles, El Paso TX
Zip Code	79915

Project Information	
Project Name	Joint Combo TH-RRH
Project Budget	\$ 281,706.00
Grant Number	TX0730D6T032300
Name of Project Director	Hector Garcia
Project Director Email Address	hgarcia@casfv.org
Project Director Phone Number	9155931000 ext 401
Which best describes the project *	Joint Transitional Housing & Rapid Rehousing
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	Domestic Violence Survivors

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Sandra Garcia
CEO Email Address	sagarcia@casfv.org
CEO Phone Number	9155931000 ext 403
Name of Staff Member Guiding Assessment	Sandra Garcia
Staff Email Address	Same as above
Staff Phone Number	Same as above

Assessment Information	
Name of Assessor	Alejandro Vasquez
Organizational Affiliation of Assessor	El paso Coalition for the Homeless
Assessor Email Address	avasquez.epch@elp.twcbc.com
Assessor Phone Number	9158432170
Date of Assessment	Nov 02 2016



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source. <i>Optional notes here</i>	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1. <i>Optional notes here</i>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/ <i>Optional notes here</i>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable. <i>Optional notes here</i>	Always	Always	Always

Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project. <i>Optional notes here</i>	Always	Always	Always
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented. <i>Optional notes here</i>	Always	Always	Always
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies. <i>Optional notes here</i>	Always	Always	Always
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction. <i>Optional notes here</i>	Always	Always	Always
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services. <i>Optional notes here</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

	Standard	Lease and Occupancy Definition / Evidence	Say It	Document It	Do It
Leases 1	Housing is considered permanent (not applicable for Transitional Housing)	Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party. <i>Optional notes here</i>	Always	Always	Always
Leases 2	Participant choice is fundamental	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit. <i>Optional notes here</i>	Always	Always	Always
Leases 3	Leases are the same for participants as for other tenants	Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants’ and owner’s choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market. <i>Optional notes here</i>	Always	Always	Always
Leases 4	Participants receive education about their lease or occupancy agreement terms	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities. <i>Optional notes here</i>	Always	Always	Always

Leases 5	Measures are used to prevent eviction	<p>Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 6	Providing stable housing is a priority	<p>Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 7	Rent payment policies respond to tenants' needs (as applicable)	<p>While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.</p> <p><i>Optional notes here</i></p>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

	Standard	Services Definition / Evidence	Say it	Document it	Do it
Services 1	Projects promote participant choice in services	<p>Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Services 2	Person Centered Planning is a guiding principle of the service planning process	<p>Person-centered Planning is a guiding principle of the service planning process</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Services 3	Service support is as permanent as the housing	<p>Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Services 4	Services are continued despite change in housing status or placement	<p>Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays.</p> <p><i>Optional notes here</i></p>	Always	Always	Always

Services 5	Participant engagement is a core component of service delivery	Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time.	Always	Always	Always
		<i>Optional notes here</i>			
Services 6	Services are culturally appropriate with translation services available, as needed	Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate, culturally-specific services. Translation services are provided when needed to ensure full comprehension of the project. Projects that serve families with children should have family-friendly rules that allow for different schedules based on work and school hours and have services that allow parents to participate in activities without having to constantly supervise their children themselves (i.e. can use the bathroom or take a shower without their children being in the bathroom with them).	Always	Always	Always
		<i>Optional notes here</i>			
Services 7	Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)	Services support a participant's ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and addiction are a part of some participants' lives. Participants are engaged in non-judgmental communication regarding their behavior and are offered education regarding how to avoid risky behaviors and engage in safer practices.	Always	Always	Always
		<i>Optional notes here</i>			
	Standard	Housing Definition / Evidence	Say It	Document It	Do It
Housing 1	Housing is not dependent on participation in services	Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or demonstration of progress made on a service plan. Services must be offered by staff, but are voluntary for participants.	Always	Always	Always
		<i>Optional notes here</i>			
Housing 2	Substance use is not a reason for termination	Participants are only terminated from the project for violations in the lease or occupancy agreements, as applicable. Occupancy agreements or an addendum to the lease do not include conditions around substance use or participation in services. If the project is a recovery housing model focused on people who are in early recovery from drugs or alcohol (as outlined in HUD's Recovery Housing Brief), different standards related to use and subsequent offer of treatment may apply. See HUD's Recovery Housing brief here: https://www.hudexchange.info/resource/4852/recovery-housing-policy-brief/	Always	Always	Always

Optional notes here

Housing 3	The rules and regulations of the project are centered on participants' rights	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets.	Always	Always	Always
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Optional notes here

Housing 4	Participants have the option to transfer to another project	Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.	Always	Always	Always
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Optional notes here



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	Quick access to RRH assistance	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice. <i>Optional notes here</i>	Always	Always	Always
Project 2	RRH services support people in maintaining their housing	Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers. <i>Optional notes here</i>	Always	Always	Always
Project 3	Providers continuously assess a participant's need for assistance	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments. <i>Optional notes here</i>	Always	Always	Always
Project 4	Transitional housing is focused on safe and quick transitions to permanent housing	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the services needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing. <i>Optional notes here</i>	Always	Always	Always
Project 5	TH projects provide appropriate services	TH projects provide appropriate services to meet the participants health and safety needs (e.g., persons in early recovery; domestic violence survivors; those who need special accommodations) when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.	Always	Always	Always

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

	Standard	Population Specific Standards	Say It	Document It	Do It
Population 1	Participant safety is a priority at all points of engagement and in all planning processes	Led by the survivor, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety. <i>Optional notes here</i>	Always	Always	Always
Population 2	Survivor-driven advocacy is available	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Project uses flexible and survivor-focused approaches to overcome barriers survivors may face in accessing services through traditional models.	Always	Always	Always

Optional notes here

Population 3

Housing stability is a priority

Providers support survivors and their children to retain or obtain safe, stable housing. Survivors choose the type of housing and location of housing. Housing is located in an area that is considered safe from the abusive relationship.

Always

Always

Always

Optional notes here

Population

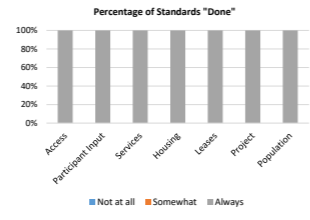
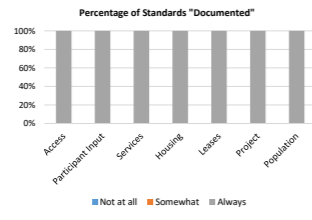
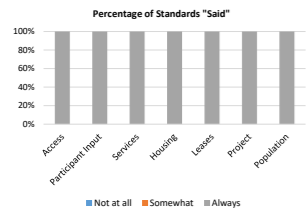
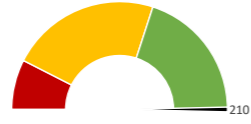
No additional standards

Optional notes here



Your score: **210**
Max potential score: 210

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



Non-Compliant Standards ("Not at all" to Whether Standard is Said)

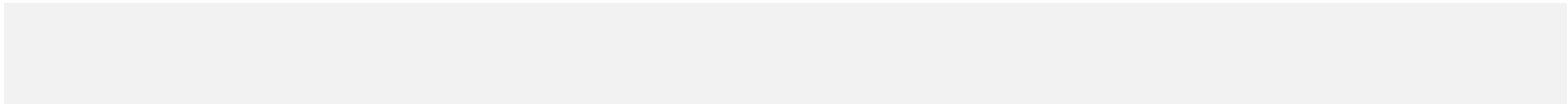
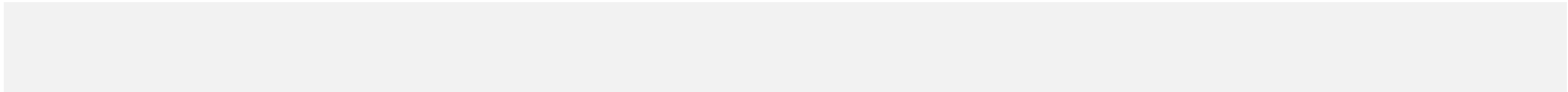
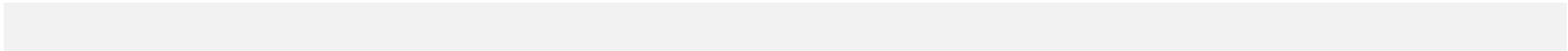
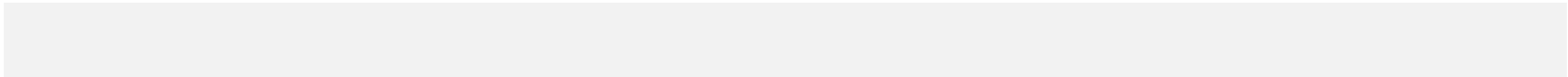
Category No. Name Standard

Non-Documented Standards ("Not at All" to Whether Standard is Documented)

Category No. Name Standard

Non-Evidenced Standards ("Not at All" to Whether Standard is Done")

Category No. Name Standard



Example	Document	Findings	N	Name	Standard	Category	Notes	Not at all	Not at all	Not at all
Always	Always	Always	0	0	Admission to projects is not contingent on pre-requirements such as abstinence, minimum income requirements, health or mental health history, medication adherence, etc. critical justice	Access	Optimal notes here			
Always	Always	Always	0	0	Projects do not deny assistance for unnecessary reasons	Access	Optimal notes here			
Always	Always	Always	0	0	Professors and steering committees that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.	Access	Optimal notes here			
Always	Always	Always	0	0	Access regardless of sexual orientation, gender identity, etc.	Access	Optimal notes here			
Always	Always	Always	0	0	Equal access is provided in accordance with the 2012 and 2014 Equal Access Rules, meaning that any project funded by HED must ensure equal access for persons regardless of one's sexual orientation	Access	Optimal notes here			
Always	Always	Always	0	0	Admission process is expedited with speed and efficiency	Access	Optimal notes here			
Always	Always	Always	0	0	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants	Access	Optimal notes here			
Always	Always	Always	0	0	Intake processes are person-centered and flexible	Access	Optimal notes here			
Always	Always	Always	0	0	Intake and assessment procedures are focused on the individual or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules.	Access	Optimal notes here			
Always	Always	Always	0	0	The provider/project accepts and makes referrals directly	Access	Optimal notes here			
Always	Always	Always	0	0	Admission to participants in the CoC-Designed Coordinated Entry process as part of streamlined community-wide system access and steps. If these processes are not implemented, projects	Access	Optimal notes here			
Always	Always	Always	0	0	Exits to homelessness are avoided	Access	Optimal notes here			
Always	Always	Always	0	0	Projects that can no longer serve particular households within the coordinated entry process, or the community's existing referral process of coordinated entry processes, are not implemented, projects	Access	Optimal notes here			
Always	Always	Always	0	0	Participant education is ongoing	Participant In	Optimal notes here			
Always	Always	Always	0	0	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout services, participants are informed	Participant In	Optimal notes here			
Always	Always	Always	0	0	Project creates regular, formal opportunities for participants	Participant In	Optimal notes here			
Always	Always	Always	0	0	Project provides regular, formal opportunities for participants	Participant In	Optimal notes here			
Always	Always	Always	0	0	Project provides participant choice in services	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participant can opt to choose from an array of services. Services offered are housing-focused and include the following areas of support: employment and income, childhood and education, community	Participant In	Optimal notes here			
Always	Always	Always	0	0	Person-Centered Planning is a guiding principle of the service	Participant In	Optimal notes here			
Always	Always	Always	0	0	Person-Centered Planning is a guiding principle of the service planning process	Participant In	Optimal notes here			
Always	Always	Always	0	0	Service support is as permanent as the housing	Participant In	Optimal notes here			
Always	Always	Always	0	0	Service continuation as permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up	Participant In	Optimal notes here			
Always	Always	Always	0	0	Services are continued despite change in housing or	Participant In	Optimal notes here			
Always	Always	Always	0	0	Whenever possible, participants continue to be offered services even if they leave their housing unit or had their occupancy agreement, or if they are placed in a short-term treatment. Ideally, the	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participant engagement is a core component of service delivery	Participant In	Optimal notes here			
Always	Always	Always	0	0	Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other maintainers	Participant In	Optimal notes here			
Always	Always	Always	0	0	Services are culturally appropriate with translation services	Participant In	Optimal notes here			
Always	Always	Always	0	0	Project staff are sensitive to and respect the cultural aspects of diverse households. Whenever possible, staff demographics reflect the participant population they serve in order to provide appropriate	Participant In	Optimal notes here			
Always	Always	Always	0	0	Staff are trained in cultural and non-clinical strategies (such	Participant In	Optimal notes here			
Always	Always	Always	0	0	Services support a participant's ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use can	Participant In	Optimal notes here			
Always	Always	Always	0	0	Housing is not dependent on participation in services	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or documentation of progress in	Participant In	Optimal notes here			
Always	Always	Always	0	0	Substance use is not a reason for termination	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participants are only terminated from the project for violations in the lease or occupancy agreement, as applicable. Continuation agreements or an addendum to the lease do not include conditions for	Participant In	Optimal notes here			
Always	Always	Always	0	0	The rules and regulations of the project are centered on just	Participant In	Optimal notes here			
Always	Always	Always	0	0	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants can	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participants have the option to transfer to another project	Participant In	Optimal notes here			
Always	Always	Always	0	0	Transfers should be accommodated for reasons that reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, city	Participant In	Optimal notes here			
Always	Always	Always	0	0	Housing is considered permanent (not applicable for Transitional	Participant In	Optimal notes here			
Always	Always	Always	0	0	Housing, not time-limited (though rent assistance may be) and leaves are automatically renewable upon expiration, except with prior notice by either party.	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participant choice is fundamental	Participant In	Optimal notes here			
Always	Always	Always	0	0	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In practice, in	Participant In	Optimal notes here			
Always	Always	Always	0	0	Leaves are the same for participants as for other tenants	Participant In	Optimal notes here			
Always	Always	Always	0	0	Leases do not have any provisions that would not be based on leases held by any other tenant in the property or building and is renewable per the participant's and owner's choice. People experiencing	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participants receive education about their lease or occupancy	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined rules and responsibilities.	Participant In	Optimal notes here			
Always	Always	Always	0	0	Monitors are used to prevent evictions	Participant In	Optimal notes here			
Always	Always	Always	0	0	Projects or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among peers.	Participant In	Optimal notes here			
Always	Always	Always	0	0	Providing stable housing is a priority	Participant In	Optimal notes here			
Always	Always	Always	0	0	Projects or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among peers.	Participant In	Optimal notes here			
Always	Always	Always	0	0	Rent payment policies respond to tenants' needs (as applicable)	Participant In	Optimal notes here			
Always	Always	Always	0	0	Which means an assessment of the rental agreement, adjustments may be needed on a case-by-case basis. An assessment, participants are given special payment arrangements for rent arrears and/or ar	Participant In	Optimal notes here			
Always	Always	Always	0	0	Quick access to RH assistance	Participant In	Optimal notes here			
Always	Always	Always	0	0	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice.	Participant In	Optimal notes here			
Always	Always	Always	0	0	RH services support people in maintaining their housing	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of generalized barriers.	Participant In	Optimal notes here			
Always	Always	Always	0	0	Providers continuously assess a participant's need for services	Participant In	Optimal notes here			
Always	Always	Always	0	0	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.	Participant In	Optimal notes here			
Always	Always	Always	0	0	Transitional housing is focused on safe and quick transition	Participant In	Optimal notes here			
Always	Always	Always	0	0	Participants and staff understand that the primary goal of transitional housing is to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service	Participant In	Optimal notes here			
Always	Always	Always	0	0	TH projects provide appropriate services to meet the participants health and safety needs (e.g., persons in early recovery, domestic violence survivors, those who need special accommodations) when	Participant In	Optimal notes here			
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	Participant In	Optimal notes here			
Phase select answer	Phase select answer	Phase select answer	0	0	Optimal notes here	Participant In	Optimal notes here			
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	Participant In	Optimal notes here			
Phase select answer	Phase select answer	Phase select answer	0	0	Optimal notes here	Participant In	Optimal notes here			
Always	Always	Always	0	0	Lead by the service, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety.	Participant In	Optimal notes here			
Always	Always	Always	0	0	Service-driven advocacy is available	Participant In	Optimal notes here			
Always	Always	Always	0	0	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Project must flexible and service	Participant In	Optimal notes here			
Always	Always	Always	0	0	Housing stability is a priority	Participant In	Optimal notes here			
Phase select answer	Phase select answer	Phase select answer	0	0	Providers support survivors and their children to obtain or obtain safe, stable housing. Survivors choose the type and location of housing. Housing is located in an area that is considered safe.	Participant In	Optimal notes here			
Phase select answer	Phase select answer	Phase select answer	0	0	No additional standards	Participant In	Optimal notes here			
Phase select answer	Phase select answer	Phase select answer	0	0	Optimal notes here	Participant In	Optimal notes here			

Order of columns:
 Item completed (C-3)
 Item documented (J-1)
 Item not completed (N-2)



This page does not comprise part of the assessment. It is for information only.

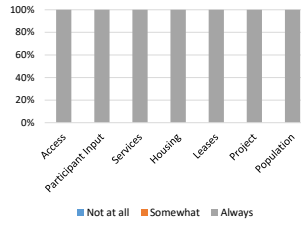
Numbers	Access			Participant Input			Services			Housing			Leases			Project-specific			Population		
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always
Please select answer	0			0			0			0			0			0			0		
Say it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	3
Document it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	3
Do it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	3
Checks	-			-			-			-			-			-			-		

Percentages	Access			Participant Input			Services			Housing			Leases			Project-specific			Population		
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always
Please select answer	0%			0%			0%			0%			0%			0%			0%		
Say it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%
Document it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%
Do it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%
Number of standards	7			2			7			4			7			5			3		

'Say It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	100%	100%
Check	-						

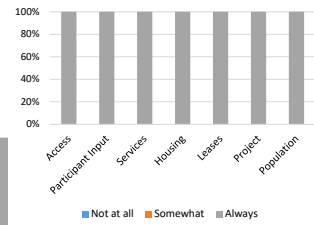
"Say It" Standards, by Category and Response



'Document It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	100%	100%
Check	-						

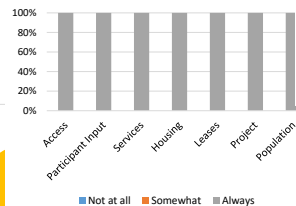
"Do It" Standards, by Category and Response



'Do It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	100%	100%
Check	-						

"Document It" Standards, by Category and Response



Supportive Housing Standards Rating	Pointer
Start	Value 210
Initial	Pointer 3
Middle	End 210
End	
Max	

Score: 210

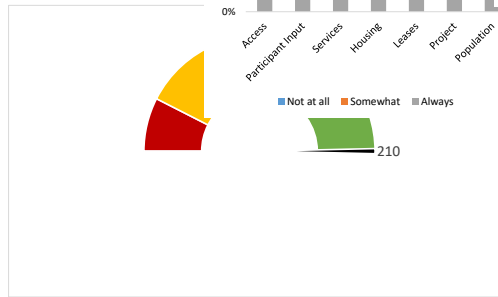
Standard Numbers	With special pop	Without special pop
Coordinated entry	17	14
Street outreach	17	14
Emergency shelter	28	25
Transitional housing	35	32
Rapid rehousing	35	32
Permanent supportive housing	35	32

Max answer score (for 'always') 6 3 categories (say, document, do) x 2 max points for 'always'

Answer Numbers	With special pop	Without special pop
Coordinated entry	102	84
Street outreach	102	84
Emergency shelter	168	150
Transitional housing	210	192
Rapid rehousing	210	192
Permanent supportive housing	210	192

Project type	Joint Transitional Housing & Rapid Rehousing	3
Special population	Domestic Violence Survivors	1

Evaluation max score 210





Assumptions for the standards

This page does not comprise part of the assessment. It is for information only.

Project standards

Standards	Coordinated Entry	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Rehousing	Permanent Supportive Housing	Joint Transitional Housing & Rapid Rehousing
Title	Coordinated Entry does not screen people out for perceived barriers	Projects screen for health and safety needs	Focus of emergency shelter is on safe and responsive temporary shelter	Quick access to TH assistance	Quick access to RRH assistance	Quick access to PSH assistance	Quick access to RRH assistance
Project 1	Coordinated Entry does not screen people out for assistance due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, minimal linkages to other services, the type or extent of disability-related services or supports that are needed, or criminal justice history.	Outreach projects screen people contacted through outreach as soon as possible for critical health and safety needs, providing immediate response to people with the most severe needs.	Participants and staff understand that the primary goals of the emergency shelter are to provide temporary accommodation that is safe, respectful, and responsive to individual needs and that participants are offered permanent housing as quickly as possible, regardless of perceived barriers.	A transitional housing project ensures quick linkage to a unit and services based on participant choice.	A Rapid Re-housing project ensures quick linkage to rapid rehousing assistance, based on participant choice.	A permanent supportive housing project ensures quick linkage to a unit and wrap-around services, based on participant needs, preferences, and resource availability.	A Rapid Re-housing project ensures quick linkage to rapid rehousing assistance, based on participant choice.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	Process to assess project-level policies and alert CAC	Street outreach projects are focused on providing access to housing and services	Housing comes first	Transitional housing is focused on safe and quick transition to permanent housing	RRH services support people in maintaining their housing	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	RRH services support people in maintaining their housing
Project 2	Written policies and procedures exist to determine which projects have project-level policies that screen out "high barriers" households, and the steps that the coordinated entry provider will take to alert the CAC of these projects, thereby enabling the CAC to take steps to assist these projects in adopting Housing First principles.	Participants and staff understand that the primary goals of street outreach are to provide access to temporary housing and services and/or re-housing participants as quickly as possible, regardless of perceived barriers. Street outreach projects reflect the low barriers orientation of the Coordinated Entry process.	If a temporary shelter placement is made, assessment and planning for permanent housing placement begins as quickly as possible. People who are unsheltered are not required to first enter an emergency shelter in order to access permanent housing placement assistance and enter permanent housing.	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.	Participants and staff understand that a primary goal of rapid rehousing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with most severe service needs and help participants stay housed, regardless of other perceived barriers.	Participants and staff understand that a primary goal of permanent housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	RRH as a bridge to permanent supportive housing	Street outreach is linked to Coordinated Entry		TH projects provide appropriate services	Providers continuously assess a participant's need for assistance	Property Management duties are separate and distinct from services/case management	Providers continuously assess a participant's need for assistance
Project 3	Rapid Re-Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See HED's Rapid Re-Housing Brief here: https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)	Written policy and procedures detail a process by which street outreach staff ensure that persons assessed on the streets are offered the same standardized process as persons assessed through site-based access points. Outreach teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing. Based on the CAC's decision about how street outreach is incorporated into the assessment process, street outreach projects must comply with the CAC's decision.	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) when the participant chooses transitional housing. Services are not required in order to participate in housing.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.	In order to provide clear roles of staff for participants in terms of lease and rules conformance as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communication and meetings regarding Participants to address tenancy issues in order to preserve tenancy.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street outreach continuously engages those experiencing homelessness and on the street		Housing comes first			Transitional housing is focused on safe and quick transition to permanent housing
Project 4	No additional standards	Through continuous engagement strategies, a street outreach project provides quick linkage to housing and services when a person is ready to engage.	No additional standards	No individuals or families, including those who are unsheltered, are required to enter a transitional housing project in order to access permanent housing placement assistance and enter permanent housing.	No additional standards	No additional standards	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street Outreach engagements inform the community's efforts to improve their crisis response system					TH projects provide appropriate services
Project 5	No additional standards	Communities use street outreach engagements with those on the street and in encampments to understand and remove barriers to those accessing the crisis response system.	No additional standards	No additional standards	No additional standards	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title							
Project 6	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards

Project standards

Standards	Youth and Young Adults	People in Recovery	Domestic Violence Survivors	None of the above
Title	Services are offered	Recovery housing is offered as one choice among other housing opportunities	Participant safety is a priority at all points of engagement and in all planning processes	
Population 1	Services are focused on ensuring that youth transition to independence.	Connection to recovery housing reflects individual choice for their path toward recovery. Abstinence-only options are incorporated into a Housing First model wherever possible, thus providing this type of recovery option to those who choose it. Recovery supports are offered, particularly connections to community-based treatment options.	Led by the survivor, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety. Recovery supports are offered, particularly connections to community-based treatment options.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Projects include positive youth development principles	Services include relapse support	Survivor-driven advocacy is available	
Population 2	Youth projects should include positive youth development orientation. Positive youth development builds on strengths and resiliency. By focusing on strengths and assets, rather than what might be "wrong," youth are empowered and are equipped to make positive decisions.	Housing and services include relapse support that does not automatically exist or discharge participants from the project for temporary relapse. Relapse support might include referrals to outpatient treatment or direct provision of outpatient services or the ability to hold a unit for a certain period of time (30-90 days) while the participant undergoes residential treatment.	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Projects use flexible and survivor-focused approaches to overcome barriers survivors may face in accessing services through traditional models.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Staff use harm reduction practices and approaches	Services support sustained recovery	Housing stability is a priority	
Population 3	Youth models employ a harm reduction and recovery orientation, including those developed for youth and young adults with substance use and additional. Projects may make abstinence-based models available for youth and young adults; however, the choice should be with the participant, not with the project.	Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connections to community-based treatment options.	Providers support survivors and their children to retain or obtain safe, stable housing and location of housing. Housing is located in an area that is considered safe from the abusive relationship.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Project design accounts for the age of youth and young adults to be served			
Population 4	Developmentally-appropriate project design ensures that project entry and on-going participation is not predicated on behaviors or experiences that youth and young adults may not currently have or if they were older would not result in consequences. For example, projects should accept and allow continued participation for youth who do not have income or immediate prospects of income because their age has not allowed them the opportunity to gain employment.	No additional standards	No additional standards	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	



Housing First Standards Assessment Tool

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and

Provider Info tab: The Provider Information tab should be completed *prior* to beginning the assessment. Specifically, the **Project Name, Project Type, Target Sub-Population served, and Date of Assessment** fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: *Access, Evaluation, Services, Housing, Leases, and Project-Specific*. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed,

Project Type	Applicable Standards
Coordinated Entry	Access & Evaluation; Project-specific
Street Outreach	Access & Evaluation; Project-specific
Emergency Shelter	Access & Evaluation; Service & Housing; Project-specific
Transitional Housing	Access & Evaluation; Service & Housing; Leases; Project-specific
Rapid Rehousing	Access & Evaluation; Service & Housing; Leases; Project-specific
Permanent Supportive Housing	Access & Evaluation; Service & Housing; Leases; Project-specific

Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as “Always”, “Sometimes,” or “Not at all”.

Tab	Description	Purpose
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Instructions	Tool overview and aim	Offers instruction to users on the assessment tool
Provider Info	Input provider, project and general assessment information	Determines project-specific standards for consideration
Standards - Access & Evaluation	Input compliance with standards concerning participant access to the project and input, project evaluation and performance management	Assesses whether access and evaluation are compliant with Housing First principles
Standards - Leases	Input compliance with standards concerning the lease and occupancy agreements, where applicable	Assesses whether leases and occupancy agreements are compliant with Housing First principles
Standards - Services & Housing	Input compliance with standards concerning the service and housing models and structure, where applicable	Assesses whether services and housing are compliant with Housing First principles
Standards – Project-Specific	Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable	Assesses whether specific project standards are compliant with Housing First principles
Report Summary	Displays assessment scores and conclusions, and highlights non-compliant standards	Printable summary of the assessment



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	Emergence Health Network
Acronym (If Applicable)	EHN
Year Incorporated	
EIN	74-1596159
Street Address	201 E. Main Street Suite 600, El Paso, TX
Zip Code	79901

Project Information	
Project Name	Supportive Housing Combo
Project Budget	\$ 308,954.00
Grant Number	TX0128L6T032316
Name of Project Director	Veronica Noriega
Project Director Email Address	vnoriega@ehnel Paso.org
Project Director Phone Number	9152288965
Which best describes the project *	Permanent Supportive Housing
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	None of the above

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Kristen Daugherty
CEO Email Address	kdaugherty@ehnel Paso.org
CEO Phone Number	9158873410
Name of Staff Member Guiding Assessment	Vernoica Noriega
Staff Email Address	Same as above
Staff Phone Number	Same as above

Assessment Information	
Name of Assessor	Alejandro Vasquez
Organizational Affiliation of Assessor	El Paso Coalition for the Homeless
Assessor Email Address	avasquez.epch@elp.twcbc.com
Assessor Phone Number	9158432170
Date of Assessment	Nov 02 2016



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source. <i>Optional notes here</i>	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1. <i>Optional notes here</i>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/ <i>Optional notes here</i>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable. <i>Optional notes here</i>	Always	Always	Always

Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project. <i>Optional notes here</i>	Always	Always	Always
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented. <i>Optional notes here</i>	Always	Always	Always
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies. <i>Optional notes here</i>	Always	Always	Always
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction. <i>Optional notes here</i>	Always	Always	Always
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services. <i>Optional notes here</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

	Standard	Lease and Occupancy Definition / Evidence	Say It	Document It	Do It
Leases 1	Housing is considered permanent (not applicable for Transitional Housing)	Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party. <i>Optional notes here</i>	Always	Always	Always
Leases 2	Participant choice is fundamental	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit. <i>Optional notes here</i>	Always	Always	Always
Leases 3	Leases are the same for participants as for other tenants	Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants’ and owner’s choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market. <i>Optional notes here</i>	Always	Always	Always
Leases 4	Participants receive education about their lease or occupancy agreement terms	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities. <i>Optional notes here</i>	Always	Always	Always

Leases 5	Measures are used to prevent eviction	<p>Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 6	Providing stable housing is a priority	<p>Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 7	Rent payment policies respond to tenants' needs (as applicable)	<p>While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.</p> <p><i>Optional notes here</i></p>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

	Standard	Services Definition / Evidence	Say it	Document it	Do it
Services 1	Projects promote participant choice in services	Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services. <i>Optional notes here</i>	Always	Always	Always
Services 2	Person Centered Planning is a guiding principle of the service planning process	Person-centered Planning is a guiding principle of the service planning process <i>Optional notes here</i>	Always	Always	Always
Services 3	Service support is as permanent as the housing	Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing. <i>Optional notes here</i>	Always	Always	Always
Services 4	Services are continued despite change in housing status or placement	Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays. <i>Optional notes here</i>	Always	Always	Always

Optional notes here

Housing 3	The rules and regulations of the project are centered on participants' rights	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets.	Always	Always	Always
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Optional notes here

Housing 4	Participants have the option to transfer to another project	Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.	Always	Always	Always
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Optional notes here



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	Quick access to RRH assistance	A permanent supportive housing project ensures quick linkage to a unit and wrap around services, based on participant needs, preferences, and resource availability. <i>Optional notes here</i>	Always	Always	Always
Project 2	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with the most severe service needs and help participants stay housed, regardless of other perceived barriers. <i>Optional notes here</i>	Always	Always	Always
Project 3	Property Management duties are separate and distinct from services/case management	In order to provide clear roles of staff for participants in terms of lease and rules enforcement as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communications and meetings regarding Participants to address tenancy issues in order to preserve tenancy. <i>Optional notes here</i>	Always	Always	Always
		No additional standards <i>Optional notes here</i>	Always	Always	Always
		No additional standards	Always	Always	Always

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

Section is not applicable. Please see following section.

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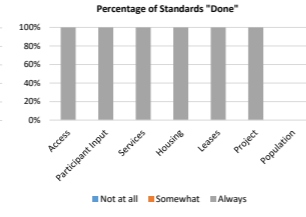
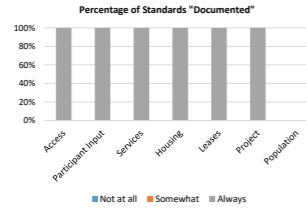
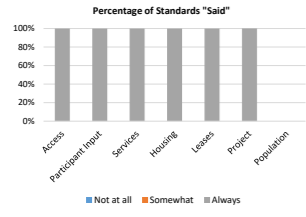
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Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Your score: **192**
Max potential score: 180

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



Non-Compliant Standards ("Not at all" to Whether Standard is Said)

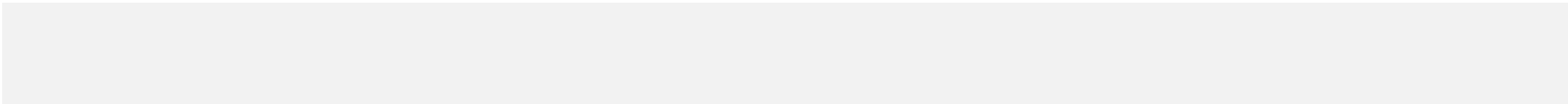
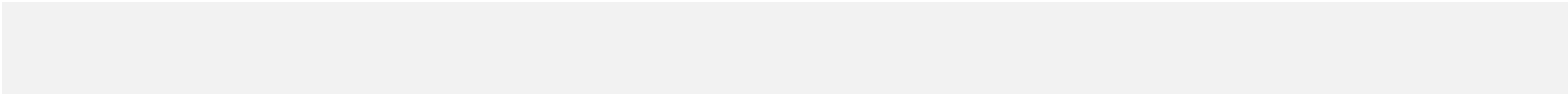
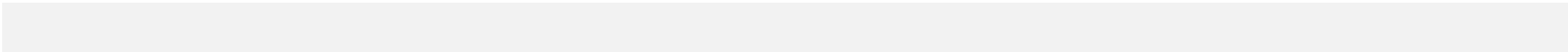
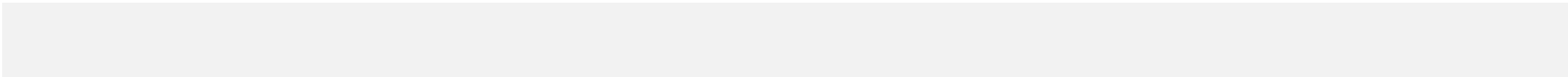
Category No. Name Standard

Non-Documented Standards ("Not at All" to Whether Standard is Documented)

Category No. Name Standard

Non-Evidenced Standards ("Not at All" to Whether Standard is Done")

Category No. Name Standard





Assumptions for the standards

This page does not comprise part of the assessment. It is for information only.

Project standards

Standards	Coordinated Entry	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Rehousing	Permanent Supportive Housing	Joint Transitional Housing & Rapid Rehousing
Title	Coordinated Entry does not screen people out for perceived barriers	Projects screen for health and safety needs	Focus of emergency shelter is on safe and responsive temporary shelter	Quick access to TH assistance	Quick access to RRH assistance	Quick access to PSH assistance	Quick access to RRH assistance
Project 1	Coordinated Entry does not screen people out for assistance due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, minimal linkages to other services, the type or extent of disability-related services or supports that are needed, or criminal justice history.	Outreach projects screen people contacted through outreach as soon as possible for critical health and safety needs, providing immediate response to people with the most severe needs.	Participants and staff understand that the primary goals of the emergency shelter are to provide temporary accommodation that is safe, respectful, and responsive to individual needs and that participants are offered permanent housing as quickly as possible, regardless of perceived barriers.	A transitional housing project ensures quick linkage to a unit and services based on participant choice.	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice.	A permanent supportive housing project ensures quick linkage to a unit and wrap-around services, based on participant needs, preferences, and resource availability.	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	Process to assess project-level policies and alert CAC	Street outreach projects are focused on providing access to housing and services	Housing comes first	Transitional housing is focused on safe and quick transition to permanent housing	RRH services support people in maintaining their housing	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	RRH services support people in maintaining their housing
Project 2	Written policies and procedures exist to determine which projects have project-level policies that screen out "high barriers" households, and the steps that the coordinated entry provider will take to alert the CAC of these projects, thereby enabling the CAC to take steps to assist these projects in adopting Housing First principles.	Participants and staff understand that the primary goals of street outreach are to provide access to temporary housing and services and/or re-housing participants to permanent housing as quickly as possible, regardless of perceived barriers. Street outreach projects reflect the low barriers orientation of the Coordinated Entry process.	If a temporary shelter placement is made, assessment and planning for permanent housing placement begins as quickly as possible. People who are unsheltered are not required to first enter an emergency shelter in order to access permanent housing placement assistance and enter permanent housing.	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.	Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with most severe service needs and help participants stay housed, regardless of other perceived barriers.	Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	RRH as a bridge to permanent supportive housing	Street outreach is linked to Coordinated Entry		TH projects provide appropriate services	Providers continuously assess a participant's need for assistance	Property Management duties are separate and distinct from services/case management	Providers continuously assess a participant's need for assistance
Project 3	Rapid Re-Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See HED's Rapid Re-Housing Brief here: https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)	Written policy and procedures detail a process by which street outreach staff ensure that persons assessed on the streets are offered the same standardized process as persons assessed through site-based access points. Outreach teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing. Based on the CAC's decision about how street outreach is incorporated into the assessment process, street outreach projects must comply with the CAC's decision.	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) when the participant chooses transitional housing. Services are not required in order to participate in housing.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.	In order to provide clear roles of staff for participants in terms of lease and rules conformance as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communication and meetings regarding Participants to address tenancy issues in order to preserve tenancy.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street outreach continuously engages those experiencing homelessness and on the street		Housing comes first			Transitional housing is focused on safe and quick transition to permanent housing
Project 4	No additional standards	Through continuous engagement strategies, a street outreach project provides quick linkage to housing and services when a person is ready to engage.	No additional standards	No individuals or families, including those who are unsheltered, are required to enter a transitional housing project in order to access permanent housing placement assistance and enter permanent housing.	No additional standards	No additional standards	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street Outreach engagements inform the community's efforts to improve their crisis response system		TH projects provide appropriate services			
Project 5	No additional standards	Communities use street outreach engagements with those on the street and in encampments to understand and remove barriers to those accessing the crisis response system.	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.	No additional standards	No additional standards	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title							
Project 6	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards

Project standards

Standards	Youth and Young Adults	People in Recovery	Domestic Violence Survivors	None of the above
Title	Services are offered	Recovery housing is offered as one choice among other housing opportunities	Participant safety is a priority at all points of engagement and in all planning processes	
Population 1	Services are focused on ensuring that youth transition to independence.	Connection to recovery housing reflects individual choice for their path toward recovery. Abstinence-only options are incorporated into a Housing First model wherever possible, thus providing this type of recovery option to those who choose it. Recovery supports are offered, particularly connections to community-based treatment options.	Led by the survivor, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety. Recovery supports are offered, particularly connections to community-based treatment options.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Projects include positive youth development principles	Services include relapse support	Survivor-driven advocacy is available	
Population 2	Youth projects should include positive youth development orientation. Positive youth development builds on strengths and resiliency. By focusing on strengths and assets, rather than what might be "wrong," youth are empowered and are equipped to make positive decisions.	Housing and services include relapse support that does not automatically exist or discharge participants from the project for temporary relapse. Relapse support might include referrals to outpatient treatment or direct provision of outpatient services or the ability to hold a unit for a certain period of time (30-90 days) while the participant undergoes residential treatment.	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Projects use flexible and survivor-focused approaches to overcome barriers survivors may face in accessing services through traditional models.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Staff use harm reduction practices and approaches	Services support sustained recovery	Housing stability is a priority	
Population 3	Youth models employ a harm reduction and recovery orientation, including those developed for youth and young adults with substance use and additional. Projects may make abstinence-based models available for youth and young adults; however, the choice should be with the participant, not with the project.	Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connections to community-based treatment options.	Providers support survivors and their children to retain or obtain safe, stable housing and location of housing. Housing is located in an area that is considered safe from the abusive relationship.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Project design accounts for the age of youth and young adults to be served			
Population 4	Developmentally-appropriate project design ensures that project entry and on-going participation is not predicated on behaviors or experiences that youth and young adults may not currently have or if they were older would not result in consequences. For example, projects should accept and allow continued participation for youth who do not have income or immediate prospects of income because their age has not allowed them the opportunity to gain employment.	No additional standards	No additional standards	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	



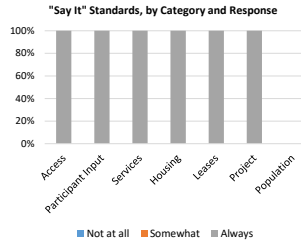
This page does not comprise part of the assessment. It is for information only.

Numbers	Access			Participant Input			Services			Housing			Leases			Project-specific			Population			
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	
Please select answer	0			0			0			0			0			-6			12			
Say it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	0	0
Document it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	0	0
Do it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	0	0
Checks	-			-			-			-			-			-			-			

Percentages	Access			Participant Input			Services			Housing			Leases			Project-specific			Population			
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	
Please select answer	0%			0%			0%			0%			0%			-200%			300%			
Say it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	0%	0%
Document it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	0%	0%
Do it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	0%	0%
Number of standards	7			2			7			4			7			3			4			

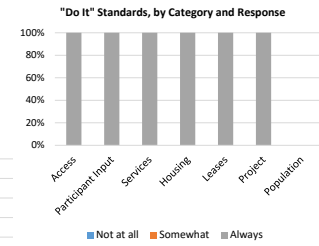
'Say It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	0%
Check	-						



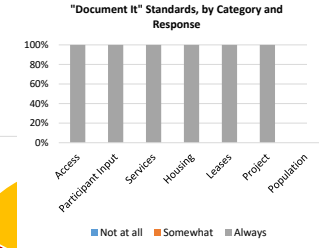
'Document It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	0%
Check	-						



'Do It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	0%
Check	-						



Supportive Housing Standards Rating	Pointer
Start	Value 192
Initial	Pointer 3
Middle	End 180
End	
Max	

Score: 192

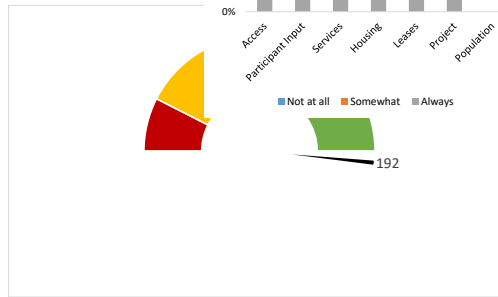
Standard Numbers	With special pop	Without special pop
Coordinated entry	16	12
Street outreach	16	12
Emergency shelter	27	23
Transitional housing	34	30
Rapid rehousing	34	30
Permanent supportive housing	34	30

Max answer score (for 'always') 6 3 categories (say, document, do) x 2 max points for 'always'

Answer Numbers	With special pop	Without special pop
Coordinated entry	96	72
Street outreach	96	72
Emergency shelter	162	138
Transitional housing	204	180
Rapid rehousing	204	180
Permanent supportive housing	204	180

Project type	Permanent Supportive Housing	3
Special population	None of the above	0

Evaluation max score 180





Housing First Standards Assessment Tool

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and

Provider Info tab: The Provider Information tab should be completed *prior* to beginning the assessment. Specifically, the **Project Name, Project Type, Target Sub-Population served, and Date of Assessment** fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: *Access, Evaluation, Services, Housing, Leases, and Project-Specific*. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed,

Project Type	Applicable Standards
Coordinated Entry	Access & Evaluation; Project-specific
Street Outreach	Access & Evaluation; Project-specific
Emergency Shelter	Access & Evaluation; Service & Housing; Project-specific
Transitional Housing	Access & Evaluation; Service & Housing; Leases; Project-specific
Rapid Rehousing	Access & Evaluation; Service & Housing; Leases; Project-specific
Permanent Supportive Housing	Access & Evaluation; Service & Housing; Leases; Project-specific

Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as “Always”, “Sometimes,” or “Not at all”.

Tab	Description	Purpose
-----	-------------	---------

Instructions	Tool overview and aim	Offers instruction to users on the assessment tool
Provider Info	Input provider, project and general assessment information	Determines project-specific standards for consideration
Standards - Access & Evaluation	Input compliance with standards concerning participant access to the project and input, project evaluation and performance management	Assesses whether access and evaluation are compliant with Housing First principles
Standards - Leases	Input compliance with standards concerning the lease and occupancy agreements, where applicable	Assesses whether leases and occupancy agreements are compliant with Housing First principles
Standards - Services & Housing	Input compliance with standards concerning the service and housing models and structure, where applicable	Assesses whether services and housing are compliant with Housing First principles
Standards – Project-Specific	Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable	Assesses whether specific project standards are compliant with Housing First principles
Report Summary	Displays assessment scores and conclusions, and highlights non-compliant standards	Printable summary of the assessment



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	Emergence Health Network
Acronym (If Applicable)	EHN
Year Incorporated	
EIN	74-1596159
Street Address	201 E. Main Street Suite 600, El Paso, TX
Zip Code	79901

Project Information	
Project Name	EHN RRH
Project Budget	\$ 321,881.00
Grant Number	TX0453L6T032307
Name of Project Director	Veronica Noriega
Project Director Email Address	vnoriega@ehnel Paso.org
Project Director Phone Number	9152288965
Which best describes the project *	Rapid Rehousing
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	None of the above

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Kristen Daugherty
CEO Email Address	kdaugherty@ehnel Paso.org
CEO Phone Number	9158873410
Name of Staff Member Guiding Assessment	Vernoica Noriega
Staff Email Address	Same as above
Staff Phone Number	Same as above

Assessment Information	
Name of Assessor	Alejandro Vasquez
Organizational Affiliation of Assessor	El Paso Coalition for the Homeless
Assessor Email Address	avasquez.epch@elp.twcbc.com
Assessor Phone Number	9158432170
Date of Assessment	Nov 02 2016



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source. <i>Optional notes here</i>	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1. <i>Optional notes here</i>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/ <i>Optional notes here</i>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable. <i>Optional notes here</i>	Always	Always	Always

Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project. <i>Optional notes here</i>	Always	Always	Always
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented. <i>Optional notes here</i>	Always	Always	Always
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies. <i>Optional notes here</i>	Always	Always	Always
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction. <i>Optional notes here</i>	Always	Always	Always
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services. <i>Optional notes here</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

	Standard	Lease and Occupancy Definition / Evidence	Say It	Document It	Do It
Leases 1	Housing is considered permanent (not applicable for Transitional Housing)	Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party. <i>Optional notes here</i>	Always	Always	Always
Leases 2	Participant choice is fundamental	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit. <i>Optional notes here</i>	Always	Always	Always
Leases 3	Leases are the same for participants as for other tenants	Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants’ and owner’s choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market. <i>Optional notes here</i>	Always	Always	Always
Leases 4	Participants receive education about their lease or occupancy agreement terms	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities. <i>Optional notes here</i>	Always	Always	Always

Leases 5	Measures are used to prevent eviction	<p>Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 6	Providing stable housing is a priority	<p>Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 7	Rent payment policies respond to tenants' needs (as applicable)	<p>While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.</p> <p><i>Optional notes here</i></p>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

	Standard	Services Definition / Evidence	Say it	Document it	Do it
Services 1	Projects promote participant choice in services	Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services. <i>Optional notes here</i>	Always	Always	Always
Services 2	Person Centered Planning is a guiding principle of the service planning process	Person-centered Planning is a guiding principle of the service planning process <i>Optional notes here</i>	Always	Always	Always
Services 3	Service support is as permanent as the housing	Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing. <i>Optional notes here</i>	Always	Always	Always
Services 4	Services are continued despite change in housing status or placement	Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays. <i>Optional notes here</i>	Always	Always	Always

Services 5	Participant engagement is a core component of service delivery	Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time. <i>Optional notes here</i>	Always	Always	Always
Services 6	Services are culturally appropriate with translation services available, as needed	Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate, culturally-specific services. Translation services are provided when needed to ensure full comprehension of the project. Projects that serve families with children should have family-friendly rules that allow for different schedules based on work and school hours and have services that allow parents to participate in activities without having to constantly supervise their children themselves (i.e. can use the bathroom or take a shower without their children being in the bathroom with them). <i>Optional notes here</i>	Always	Always	Always
Services 7	Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)	Services support a participant’s ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and addiction are a part of some participants' lives. Participants are engaged in non-judgmental communication regarding their behavior and are offered education regarding how to avoid risky behaviors and engage in safer practices. <i>Optional notes here</i>	Always	Always	Always
	Standard	Housing Definition / Evidence	Say It	Document It	Do It
Housing 1	Housing is not dependent on participation in services	Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or demonstration of progress made on a service plan. Services must be offered by staff, but are voluntary for participants. <i>Optional notes here</i>	Always	Always	Always
Housing 2	Substance use is not a reason for termination	Participants are only terminated from the project for violations in the lease or occupancy agreements, as applicable. Occupancy agreements or an addendum to the lease do not include conditions around substance use or participation in services. If the project is a recovery housing model focused on people who are in early recovery from drugs or alcohol (as outlined in HUD’s Recovery Housing Brief), different standards related to use and subsequent offer of treatment may apply. See HUD’s Recovery Housing brief here: https://www.hudexchange.info/resource/4852/recovery-housing-policy-brief/	Always	Always	Always

Optional notes here

Housing 3	The rules and regulations of the project are centered on participants' rights	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets.	Always	Always	Always
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Optional notes here

Housing 4	Participants have the option to transfer to another project	Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.	Always	Always	Always
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Optional notes here



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	Quick access to RRH assistance	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice. <i>Optional notes here</i>	Always	Always	Always
Project 2	RRH services support people in maintaining their housing	Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers. <i>Optional notes here</i>	Always	Always	Always
Project 3	Providers continuously assess a participant's need for assistance	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments. <i>Optional notes here</i>	Always	Always	Always
		No additional standards <i>Optional notes here</i>	Always	Always	Always
		No additional standards	Always	Always	Always

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

Section is not applicable. Please see following section.

Please select
answer

Please select
answer

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answer

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answer

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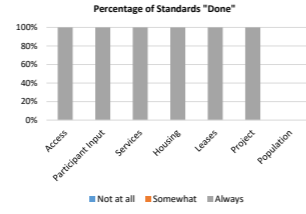
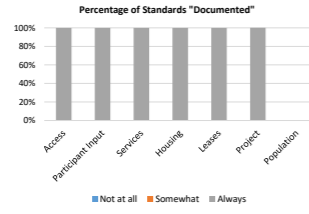
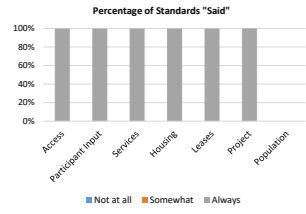
Please select
answer



Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Your score: **192**
Max potential score: 180

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



Non-Compliant Standards ("Not at all" to Whether Standard is Said)

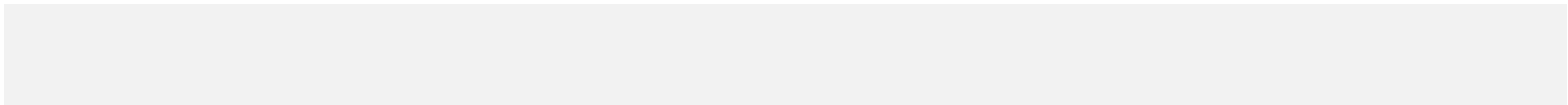
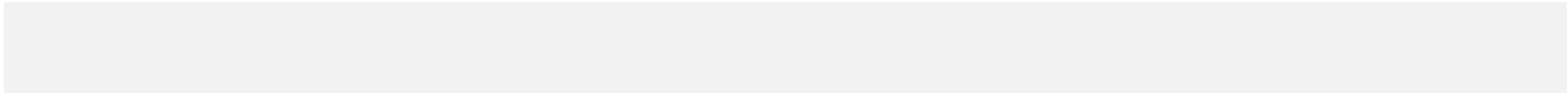
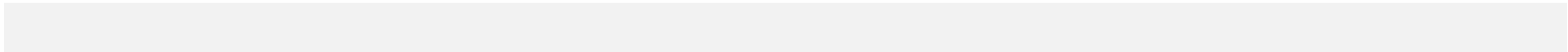
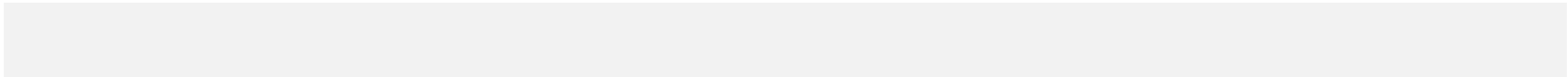
Category No. Name Standard

Non-Documented Standards ("Not at All" to Whether Standard is Documented)

Category No. Name Standard

Non-Evidenced Standards ("Not at All" to Whether Standard is Done")

Category No. Name Standard





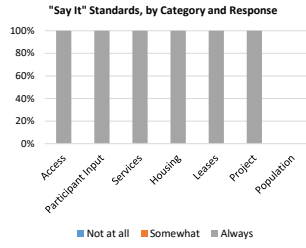
This page does not comprise part of the assessment. It is for information only.

Numbers	Access			Participant Input			Services			Housing			Leases			Project-specific			Population			
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	
Please select answer	0			0			0			0			0			-6			12			
Say it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	0	0
Document it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	0	0
Do it	0	0	7	0	0	2	0	0	7	0	0	4	0	0	7	0	0	5	0	0	0	0
Checks	-			-			-			-			-			-			-			

Percentages	Access			Participant Input			Services			Housing			Leases			Project-specific			Population			
	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	Not at all	Somewhat	Always	
Please select answer	0%			0%			0%			0%			0%			-200%			300%			
Say it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	0%	0%
Document it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	0%	0%
Do it	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	100%	0%	0%	167%	0%	0%	0%	0%
Number of standards	7			2			7			4			7			3			4			

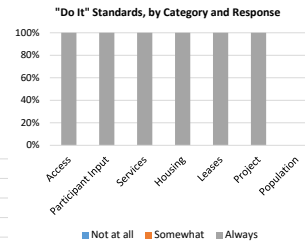
'Say It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	0%
Check	-						



'Document It'

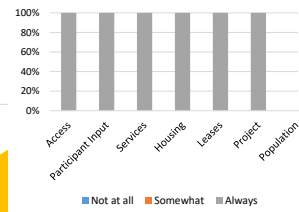
	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	0%
Check	-						



'Do It'

	Access	Participant Input	Services	Housing	Leases	Project	Population
Not at all	0%	0%	0%	0%	0%	0%	0%
Somewhat	0%	0%	0%	0%	0%	0%	0%
Always	100%	100%	100%	100%	100%	167%	0%
Check	-						

"Document It" Standards, by Category and Response



Supportive Housing Standards Rating	Pointer
Start	Value 192
Initial	Pointer 3
Middle	End 180
End	
Max	

Score: 192

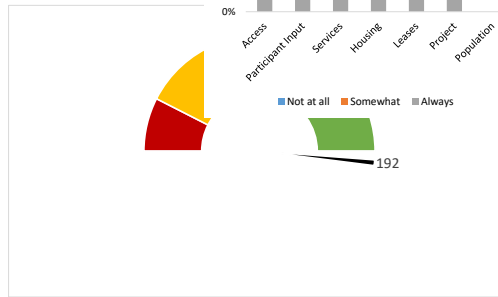
Standard Numbers	With special pop	Without special pop
Coordinated entry	16	12
Street outreach	16	12
Emergency shelter	27	23
Transitional housing	34	30
Rapid rehousing	34	30
Permanent supportive housing	34	30

Max answer score (for 'always') 6 3 categories (say, document, do) x 2 max points for 'always'

Answer Numbers	With special pop	Without special pop
Coordinated entry	96	72
Street outreach	96	72
Emergency shelter	162	138
Transitional housing	204	180
Rapid rehousing	204	180
Permanent supportive housing	204	180

Project type	Rapid Rehousing	3
Special population	None of the above	0

Evaluation max score 180





Assumptions for the standards

This page does not comprise part of the assessment. It is for information only.

Project standards

Standards	Coordinated Entry	Street Outreach	Emergency Shelter	Transitional Housing	Rapid Rehousing	Permanent Supportive Housing	Joint Transitional Housing & Rapid Rehousing
Title	Coordinated Entry does not screen people out for perceived barriers	Projects screen for health and safety needs	Focus of emergency shelter is on safe and responsive temporary shelter	Quick access to TH assistance	Quick access to RRH assistance	Quick access to PSH assistance	Quick access to RRH assistance
Project 1	Coordinated Entry does not screen people out for assistance due to perceived barriers related to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, minimal linkages to other services, the type or extent of disability-related services or supports that are needed, or criminal justice history.	Outreach projects screen people contacted through outreach as soon as possible for critical health and safety needs, providing immediate response to people with the most severe needs.	Participants and staff understand that the primary goals of the emergency shelter are to provide temporary accommodation that is safe, respectful, and responsive to individual needs and that participants are offered permanent housing as quickly as possible, regardless of perceived barriers.	A transitional housing project ensures quick linkage to a unit and services based on participant choice.	A Rapid Re-housing project ensures quick linkage to rapid rehousing assistance, based on participant choice.	A permanent supportive housing project ensures quick linkage to a unit and wrap-around services, based on participant needs, preferences, and resource availability.	A Rapid Re-housing project ensures quick linkage to rapid rehousing assistance, based on participant choice.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	Process to assess project-level policies and alert CAC	Street outreach projects are focused on providing access to housing and services	Housing comes first	Transitional housing is focused on safe and quick transition to permanent housing	RRH services support people in maintaining their housing	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	RRH services support people in maintaining their housing
Project 2	Written policies and procedures exist to determine which projects have project-level policies that screen out "high barriers" households, and the steps that the coordinated entry provider will take to alert the CAC of these projects, thereby enabling the CAC to take steps to assist these projects in adopting Housing First principles.	Participants and staff understand that the primary goals of street outreach are to provide access to temporary housing and services and/or re-housing participants as quickly as possible, regardless of perceived barriers. Street outreach projects reflect the low barriers orientation of the Coordinated Entry process.	If a temporary shelter placement is made, assessment and planning for permanent housing placement begins as quickly as possible. People who are unsheltered are not required to first enter an emergency shelter in order to access permanent housing placement assistance and enter permanent housing.	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.	Participants and staff understand that a primary goal of rapid rehousing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with the most severe service needs and help participants stay housed, regardless of other perceived barriers.	Participants and staff understand that a primary goal of permanent housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title	RRH as a bridge to permanent supportive housing	Street outreach is linked to Coordinated Entry		TH projects provide appropriate services	Providers continuously assess a participant's need for assistance	Property Management duties are separate and distinct from services/case management	Providers continuously assess a participant's need for assistance
Project 3	Rapid Re-Housing is made available to serve as a bridge to other permanent housing options so that persons with high service needs or vulnerabilities can be housed more quickly. (See HED's Rapid Re-Housing Brief here: https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)	Written policy and procedures detail a process by which street outreach staff ensure that persons assessed on the streets are offered the same standardized process as persons assessed through site-based access points. Outreach teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing. Based on the CAC's decision about how street outreach is incorporated into the assessment process, street outreach projects must comply with the CAC's decision.	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) when the participant chooses transitional housing. Services are not required in order to participate in housing.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.	In order to provide clear roles of staff for participants in terms of lease and rules conformance as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communication and meetings regarding Participants to address tenancy issues in order to preserve tenancy.	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street outreach continuously engages those experiencing homelessness and on the street		Housing comes first			Transitional housing is focused on safe and quick transition to permanent housing
Project 4	No additional standards	Through continuous engagement strategies, a street outreach project provides quick linkage to housing and services when a person is ready to engage.	No additional standards	No individuals or families, including those who are unsheltered, are required to enter a transitional housing project in order to access permanent housing placement assistance and enter permanent housing.	No additional standards	No additional standards	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the service needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title		Street Outreach engagements inform the community's efforts to improve their crisis response system					TH projects provide appropriate services
Project 5	No additional standards	Communities use street outreach engagements with those on the street and in encampments to understand and remove barriers to those accessing the crisis response system.	No additional standards	No additional standards	No additional standards	No additional standards	TH projects provide appropriate services to meet the participants' health and safety needs (e.g., persons in early recovery, domestic violence survivors; those who need special accommodations when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.
	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required	Type notes here, if required
Title							
Project 6	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards	No additional standards

Project standards

Standards	Youth and Young Adults	People in Recovery	Domestic Violence Survivors	None of the above
Title	Services are offered	Recovery housing is offered as one choice among other housing opportunities	Participant safety is a priority at all points of engagement and in all planning processes	
Population 1	Services are focused on ensuring that youth transition to independence.	Connection to recovery housing reflects individual choice for their path toward recovery. Abstinence-only options are incorporated into a Housing First model wherever possible, thus providing the type of recovery options to those who choose it. Recovery supports are offered, particularly connections to community-based treatment options.	Led by the survivor, a safety plan is developed that includes an assessment of danger, particular points of vulnerability, and best approaches to increasing safety. Recovery supports are offered, particularly connections to community-based treatment options.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Projects include positive youth development principles	Services include relapse support	Survivor-driven advocacy is available	
Population 2	Youth projects should include positive youth development orientation. Positive youth development builds on strengths and resiliency. By focusing on strengths and assets, rather than what might be "wrong," youth are empowered and are equipped to make positive decisions.	Housing and services include relapse support that does not automatically exist or discharge participants from the project for temporary relapse. Relapse support might include referrals to outpatient treatment or direct provision of outpatient services or the ability to hold a unit for a certain period of time (30-90 days) while the participant undergoes residential treatment.	The unique needs and strengths of each individual survivor and their children are taken into account with regard to the types of services that are available and offered. Projects use flexible and survivor-focused approaches to overcome barriers survivors may face in accessing services through traditional models.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Staff use harm reduction practices and approaches	Services support sustained recovery	Housing stability is a priority	
Population 3	Youth models employ a harm reduction and recovery orientation, including those developed for youth and young adults with substance use and additional. Projects may make abstinence-based models available for youth and young adults; however, the choice should be with the participant, not with the project.	Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connections to community-based treatment options.	Providers support survivors and their children to retain or obtain safe, stable housing and location of housing. Housing is located in an area that is considered safe from the abusive relationship.	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	
Title	Project design accounts for the age of youth and young adults to be served			
Population 4	Developmentally-appropriate project design ensures that project entry and on-going participation is not predicated on behaviors or experiences that youth and young adults may not currently have or if they were older would not result in consequences. For example, projects should accept and allow continued participation for youth who do not have income or immediate prospects of income because their age has not allowed them the opportunity to gain employment.	No additional standards	No additional standards	
	Type notes here, if required	Type notes here, if required	Type notes here, if required	

Renewal Project Scoring Tools

1. Coordinated Entry
2. HMIS
3. Joint Combo TH-RRH
4. RRH
5. PSH

2024 TX 603 CoC Renewal Project Score Sheet

Gantee:		Project Type:	CE
Sponsor:		Data	Application

Project Type Priorities

Goal	The end homelessness using a Housing First approach.		
Project Type	Coordinated Entry	Max Points	Points Awarded

The points above are automatically awarded according to the program type.

20 possible base points can be awarded	Project Information	Max Points	Findings	Point Awarded
	Describe the project's admission and termination criteria (provide a detailed account to terminate services).	5		
	Describe how your project applies Housing First when engaging clients.	2.5		
	How does your funded program uses Progressive Engagement?	2.5		
	What services are provided directly by your agency?	2.5		
	As of August 1, 2024 all agencies must have completed the SOAR online training. Please attach the certificate of completion for at least one case manager who is directly involved with your program type. <i>If there are no SOAR certified CMs for project type there will be a 2.5-point deduction.</i>	2.5		
	Include how many SOAR-assisted applications have been filed, regardless of status. For this application, there should be at least one application completed by August 1, 20024. If no applications have been completed there is a 2.5 point deduction.	2.5		
	According to the number of SOAR-assisted applications, attach the OAT report that provides the status of each submitted application. At least one application should be reported, worth 2.5 points. <i>For every additional application and status entered, your application will receive 2 additional points. For every application that is not entered in OAT, you will be deducted 2.5 points. If no applications have been recorded you will be deducted 2.5 points.</i>	2.5		
	One application is required, after the one required application, how many additional applications were reported in OAT?	10		

Community Planning and Collaboration

10 possible base points can be	Describe two new partnerships that have been developed in the last 365 days. Hou have these new partnerships affected your agency, clients, and outcomes?	3.33		
	Describe the current/existing partnerships, what percentage of your clients are receiving services from these partners?	3.33		
	Include all Memorandums of Understanding for the new and existing partnerships you have described above (each partnership must have an MOU attached).	3.33		

HMIS

ossible base points can be awarded	<i>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</i>			
	Please list all of the funding (CoC or other) that your agency receives (funder, program type, how many individuals served, and if entered into HMS	5		
	Using the funding list created, are you fully compliant to the CoC Governing Board Policy above?	5		
	If any of your programs are not being entered into HMIS, please explain why	5		
	Has your agency/staff consistently attended the HMIS Steering Committee Meetings?	10		

25 p	Eyes on the Fries has been developed to assist agencies with any question they may have. How many times has your agency/staff attended? Provide staff name and dates of attendance. This can earn you 2 additional points	2		

Effective Use of Federal Funds

30 possible base points can be	<i>Continuums of Care (CoCs) have a responsibility to analyze what resources they need to address homelessness in their communities and to ensure existing resources are being maximized. In an effort to assist CoCs to better understand financial information about projects in their geography, the SNAPS Office sends the current, CoC Spending Report to CoCs with expenditure information from eLOCCS. The report contains basic information about the grant (e.g., the applicant and grant number) and expenditures as reported in eLOCCS (e.g., contract amount and current balance).</i>						
	Program draws down at least 4 drawdowns in a 12 month period (Minimum)	Month				10	
		Amount					
	Less than 5% of program fund returns on an annual basis (Funds returned divided by the funds awarded from HUD closeout certification).					20	

Additional Questions

40 possible base points can be awarded	Racial Inequities – In the elimination of racial disparities, is achieved when race can no longer predict opportunities, distribution of resources, or outcomes, - particularly for Black and Brown persons, which include Black, Latino, Indigenous, Native American, Asian, Pacific Islander, and other persons of color. What efforts is your agency/program implementing to address racial inequities. If not, what are the agency’s future plans to work towards an equitable system?					10		
	Improving Assistance to LGBTQ+ Individuals - Discrimination on the basis of gender identity or sexual orientation manifests differently for different individuals and often overlaps with other forms of prohibited discrimination. Please describe efforts that your program ensures (1) privacy, (2) respect, (3) safety, and (4) access regardless of gender identity or sexual orientation. Include any policies and procedures beyond the discrimination policy that has been implemented.						5	
	In addition to improving assistance to LGBTQIA+ experience, provide the details on the agency, date, and training that the agency has received in the last 365 (Include any certificates of completion).						5	
	If you have not received any LGBTQIA+ experience training in the last 365 days, provide a plan on how your agency will provide regular training in the future (if your agency has provided training in the past year, you will receive 3 additional points).						3	
	Housing Stabilization Plans: Provide the process of how an HSP is created, how often it is updated, and how many of your clients have reached stability. Attach your recidivism report and destination upon exit.						10	
	January 1, 2024 a Memorandum on HMIS Documentation request for upload into HMIS. If you scored above an 85% you will receive 5 additional points, if you scored lower than an 85% you will be deducted 5 points.						5	
	Attach CoC funded policies and procedures						10	

Coordinated Entry Attachments

20 possible base points can be awarded	Performance Standard	Evaluation Method			
	<2% of exiting RRH households return to homelessness	# of leavers to PH and of stayers ÷ total # served	20		

Summary Performance

	Max Points	Max Extra Points	Total Points Awarded
Total Possible Points for CE	145	20	

2024 TX 603 CoC Renewal Project Score Sheet

Gantee:		Project Type:	HMIS
Sponsor:		Data	Application

Project Type Priorities

Goal	The end homelessness using a Housing First approach.		
Project Type	Homeless Management Information System (HMIS)	Max Points	Points Awarded
		20	

The points above are automatically awarded according to the program type.

Project Information	Max Points	Findings	Point Awarded
----------------------------	-------------------	-----------------	----------------------

Community Planning and Collaboration

10 possible base points can be	Describe two new partnerships that have been developed in the last 365 days. How have these new partnerships affected your agency, clients, and outcomes?	3.33		
	Describe the current/existing partnerships, what percentage of your clients are receiving services from these partners?	3.33		
	Include all Memorandums of Understanding for the new and existing partnerships you have described above (each partnership must have an MOU attached).	3.33		

HMIS

37.5 possible base points can be awarded	<i>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</i>			
	Please list all of the funding (other than CoC) that your CoC has reported and are updating?	2.5		
	Security Measures: Share what robust security is currently in place, provide a schedule for regularly updating systems?	5		
	Security Measures: Explain any firewalls and antivirus programs used to help block malicious attacks, while encryption safeguards sensitive data.	5		
	Security Measures: Keep Operating systems, browsers, and applications current with the latest patches and updates that closes vulnerabilities the hackers exploit. Provide the most current patches and updates made the OS, application, and browsers. Are these updates made across the COC or only for the lead agency? If not CoC-wide, explain why not?	5		
	Security Measures: How often do you conduct security audits and penetration testing to identify weaknesses before they can be exploited?	5		
	On the hardware side, secure devices like TPM-enabled computers and biometric-authentication devices provide an additional layer of protection. Describe the layers of protection in place to secure devices.	5		
	Physical security measures, such as locks and surveillance, prevent unauthorized access to devices, and data storage systems are currently in place.	5		
	Accessibility and Training: What are the HMIS Lead hours of operations?	2.5		
	Accessibility and Training: How are issues addressed outside of hours of operations?	2.5		
Accessibility and Training: Other than the HMIS Steering Committee, how else do you make yourself accessible to the CoC?	2.5			

Effective Use of Federal Funds

30 possible base points can be	<i>Continuum of Care (CoCs) have a responsibility to analyze what resources they need to address homelessness in their communities and to ensure existing resources are being maximized. In an effort to assist CoCs to better understand financial information about projects in their geography, the SNAPS Office sends the current, CoC Spending Report to CoCs with expenditure information from eLOCCS. The report contains basic information about the grant (e.g., the applicant and grant number) and expenditures as reported in eLOCCS (e.g., contract amount and current balance).</i>			
	Program draws down at least 4 drawdowns in a 12 month period (Minimum)	10		
	Less than 5% of program fund returns on an annual basis (Funds returned divided by the funds awarded from HUD closeout certification).	20		

Additional Questions

Racial Inequities – In the elimination of racial disparities, is achieved when race can no longer predict opportunities, distribution of resources, or outcomes, - particularly for Black and Brown persons, which include Black, Latino,			
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30 possible base points can be awarded	Indigenous, Native American, Asian, Pacific Islander, and other persons of color. What efforts is your agency/program implementing to address racial inequities. If not, what are the agency's future plans to work towards an equitable system?	10		
	Improving Assistance to LGBTQ+ Individuals - Discrimination on the basis of gender identity or sexual orientation manifests differently for different individuals and often overlaps with other forms of prohibited discrimination. Please describe efforts that your program ensures (1) privacy, (2) respect, (3) safety, and (4) access regardless of gender identity or sexual orientation. Include any policies and procedures beyond the discrimination policy that has been implemented.	5		
	In addition to improving assistance to LGBTQIA+ experience, provide the details on the agency, date, and training that the agency has received in the last 365 (Include any certificates of completion).	5		
	Attach CoC funded policies and procedures	10		

Homeless Management Information System (HMIS) Attachments

20 possible base points can be awarded	Performance Standard	Evaluation Method			
	APR	Metrics	20		

Summary Performance

Total Possible Points for HMIS	Max Points	Max Extra Points	Total Points Awarded
	147	2.5	

2024 TX 603 CoC Renewal Project Score Sheet

Gantee:		Project Type:	TH-RRH
Sponsor:		Data	Application

Project Type Priorities

Goal	The end homelessness using a Housing First approach.		
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Project Type	Joint Combo TH-RRH	Max Points	Points Awarded
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The points above are automatically awarded according to the program type.

35 possible base points can be awarded	Project Information	Max Points	Findings	Point Awarded
	Describe the project's admission and termination criteria (provide a detailed account to terminate services).	5		
	Please describe in no more than one paragraph: The services that will be made available to program participants: <ul style="list-style-type: none"> •The frequency of services provided •Where the services are provided •How you will track and report on service delivery •How services will assist clients to achieve housing stability 	10		
	In the last operating year, did your project meet the community performance standards? If not, please explain why not, and explain the measures your project is taking to meet the prescribed goals shown in Appendix B.	10		
	FOR RAPID RE-HOUSING PROJECTS: <ul style="list-style-type: none"> •How long has it taken from the time of referral/intake to lease-up of each participant? If 2+ months, what steps will be taken to improve? •Upon receipt of referral, what assistance does the project provide to help clients attain housing? •If your program more than 25% of CE Referrals, please explain why? 	10		

Community Planning and Collaboration

10 possible base points can be	Describe two new partnerships that have been developed in the last 365 days. Hou have these new partnerships affected your agency, clients, and outcomes?	3.33		
	Describe the current/existing partnerships, what percentage of your clients are receiving services from these partners?	3.33		
	Include all Memorandums of Understanding for the new and existing partnerships you have described above (each partnership must have an MOU attached).	3.33		

HMIS

10 possible base points can be awarded	<i>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</i>			
	Please list all of the funding (CoC or other) that your agency receives (funder, program type, how many individuals served, and if entered into HMS	2		
	Using the funding list created, are you fully compliant to the CoC Governing Board Policy above?	4		
	If any of your programs are not being entered into HMIS, please explain why	2		
	Has your agency/staff consistently attended the HMIS Steering Committee Meetings? Please explain if no.	2		
Eyes on the Fries has been developed to assist agencies with any question they may have. How many times has your agency/staff attended? Provide staff name and dates of attendance. This can earn you 2 additional points	2			

Effective Use of Federal Funds

50 possible base points can be awarded	Program draws down at least 4 drawdowns in a 12 month period (Minimum)	<table border="1"> <tr> <td>Month</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Amount</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Month						Amount						10		
	Month																
	Amount																
Less than 5% of program fund returns on an annual basis (Funds returned divided by the funds awarded from HUD closeout certification).		20															
APR submitted in a timely fashion, within 3 months of operating end date (APR Submission date in relationship to program operating year end date)		20															

Project Budget					
15 possible base points can be awarded	Match and Leveraging Table		3		
	Budget Summary		3		
	Rental Assistance Table		3		
	Supportive Services Table		3		
	Operating Costs Table		3		
Administrative Capacity					
30 possible base points can be awarded	Describe any reasons for late submittals of your Annual Performance Report (APR – more than 90 days after your operating year).		15		
	Please describe the agency's financial capacity to operate the project for the proposed grant term. Please address: •HUD audit/monitoring results (if monitored in 2022 or 2023 provide copy of HUD findings letter and describe how findings were addressed) •Any improvement or loss of agency capacity since last application		15		
Additional Questions					
25 possible base points can be awarded	Racial Inequities – In the elimination of racial disparities, is achieved when race can no longer predict opportunities, distribution of resources, or outcomes, - particularly for Black and Brown persons, which include Black, Latino, Indigenous, Native American, Asian, Pacific Islander, and other persons of color. What efforts is your agency/program implementing to address racial inequities. If not, what are the agency's future plans to work towards an equitable system?		5		
	Improving Assistance to LGBTQ+ Individuals - Discrimination on the basis of gender identity or sexual orientation manifests differently for different individuals and often overlaps with other forms of prohibited discrimination. Please describe efforts that your program ensures (1) privacy, (2) respect, (3) safety, and (4) access regardless of gender identity or sexual orientation. Include any policies and procedures beyond the discrimination policy that has been implemented.		5		
	In addition to improving assistance to LGBTQIA+ experience, provide the details on the agency, date, and training that the agency has received in the last 365 (Include any certificates of completion).		5		
	If you have not received any LGBTQIA+ experience training in the last 365 days, provide a plan on how your agency will provide regular training in the future (if your agency has provided training in the past year, you will receive 3 additional points).		3		
	Housing Stabilization Plans: Provide the process of how an HSP is created, how often it is updated, and how many of your clients have reached stability.		5		
	January 1, 2024 a Memorandum on HMIS Documentation request for upload into HMIS. If you scored above an 85% you will receive 5 additional points, if you scored lower than an 85% you will be deducted 5 points.		5		
	Attach CoC funded policies and procedures		5		
RRH Performance Review					
80 possible base points can be awarded	Performance Standard	Evaluation Method	Points		
	<2% of exiting RRH households return to homelessness	# of leavers to PH and of stayers ÷ total # served	10		
	30% RRH households have earned income	# with earned income ÷ total # served	10		
	30% RRH households increase other income	# with other income ÷ total # served	10		
	60% of RRH households	# who maintain/increase income ÷ total # served	10		
	Program utilization rates at 98% or higher	# of persons served ÷ proposed number of persons from most recent application & HMIS/other bed utilization rate	10		
	100% of - Length of Days from Start Date to Move-In Date <30 days	# of persons ÷ # of total persons	10		
	Program uses funds for eligible population – homeless & disabled by HUD definition	# of participants whose residence prior to program entry qualifies as homeless divided total number of participants	10		
		# of households with disabling condition divided by total number of households	10		

Summary Performance

	Max Points	Max Extra Points	Total Points Awarded
Total Possible Points for TH-RRH	255	10	0

2024 TX 603 CoC Renewal Project Score Sheet

Gantee:		Project Type:	RRH
Sponsor:		Data	Application

Project Type Priorities

Goal	The end homelessness using a Housing First approach.		
Project Type	Rapid ReHousing	Max Points	Points Awarded

20 possible base points can be awarded	The points above are automatically awarded according to the program type.			
	Project Information	Max Points	Findings	Point Awarded
	Describe the project's admission and termination criteria (provide a detailed account to terminate services).	5		
	Describe how your project applies Housing First when engaging clients.	2.5		
	How does your funded program uses Progressive Engagement?	2.5		
	What services that are provided directly by your agency?	2.5		
	As of August 1, 2024 all agencies must have completed the SOAR online training. Please attach the certificate of completion for at least one case manager who is directly involved with your program type. <i>If there are no SOAR certified CMs for project type there will be a 2.5-point deduction.</i>	2.5		
	Include how many SOAR-assisted applications have been filed, regardless of status. For this application, there should be at least one application completed by August 1, 2024. If no applications have been completed there is a 2.5 point deduction.	2.5		
	According to the number of SOAR-assisted applications, attach the OAT report that provides the status of each submitted application. At least one application should be reported, worth 2.5 points. <i>For every additional application and status entered, your application will receive 2 additional points. For every application that is not entered in OAT, you will be deducted 2.5 points. If no applications have been recorded you will be deducted 2.5 points.</i>	2.5		
One application is required, after the one required application, how many additional applications were reported in OAT?	10			

Community Planning and Collaboration

10 possible base points can be	Describe two new partnerships that have been developed in the last 365 days. Hou have these new partnerships affected your agency, clients, and outcomes?	3.33		
	Describe the current/existing partnerships, what percentage of your clients are receiving services from these partners?	3.33		
	Include all Memorandums of Understanding for the new and existing partnerships you have described above (each partnership must have an MOU attached).	3.33		

HMIS

25 possible base points can be awarded	<i>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</i>			
	Please list all of the funding (CoC or other) that your agency receives (funder, program type, how many individuals served, and if entered into HMS	5		
	Using the funding list created, are you fully compliant to the CoC Governing Board Policy above?	5		
	If any of your programs are not being entered into HMIS, please explain why	5		
	Has your agency/staff consistently attended the HMIS Steering Committee Meetings?	10		
Eyes on the Fries has been developed to assist agencies with any question they may have. How many times has your agency/staff attended? Provide staff name and dates of attendance. This can earn you 2 additional points	2			

Effective Use of Federal Funds

30 possible base points can be awarded	<p><i>Continuums of Care (CoCs) have a responsibility to analyze what resources they need to address homelessness in their communities and to ensure existing resources are being maximized. In an effort to assist CoCs to better understand financial information about projects in their geography, the SNAPS Office sends the current, CoC Spending Report to CoCs with expenditure information from eLOCCS. The report contains basic information about the grant (e.g., the applicant and grant number) and expenditures as reported in eLOCCS (e.g., contract amount and current balance).</i></p>							
	Program draws down at least 4 drawdowns in a 12 month period (Minimum)	Month				10		
		Amount						
	Less than 5% of program fund returns on an annual basis (Funds returned divided by the funds awarded from HUD closeout certification).					20		

Additional Questions

40 possible base points can be awarded	Racial Inequities – In the elimination of racial disparities, is achieved when race can no longer predict opportunities, distribution of resources, or outcomes, - particularly for Black and Brown persons, which include Black, Latino, Indigenous, Native American, Asian, Pacific Islander, and other persons of color. What efforts is your agency/program implementing to address racial inequities. If not, what are the agency's future plans to work towards an equitable system?	10		
	Improving Assistance to LGBTQ+ Individuals - Discrimination on the basis of gender identity or sexual orientation manifests differently for different individuals and often overlaps with other forms of prohibited discrimination. Please describe efforts that your program ensures (1) privacy, (2) respect, (3) safety, and (4) access regardless of gender identity or sexual orientation. Include any policies and procedures beyond the discrimination policy that has been implemented.	5		
	In addition to improving assistance to LGBTQIA+ experience, provide the details on the agency, date, and training that the agency has received in the last 365 (Include any certificates of completion).	5		
	If you have not received any LGBTQIA+ experience training in the last 365 days, provide a plan on how your agency will provide regular training in the future (if your agency has provided training in the past year, you will receive 3 additional points).	3		
	Housing Stabilization Plans: Provide the process of how an HSP is created, how often it is updated, and how many of your clients have reached stability.	10		
	January 1, 2024 a Memorandum on HMIS Documentation request for upload into HMIS. If you scored above an 85% you will receive 5 additional points, if you scored lower than an 85% you will be deducted 5 points.	5		
	Attach CoC funded policies and procedures	10		

RRH Performance Review

80 possible base points can be awarded	Performance Standard	Evaluation Method		
	<2% of exiting RRH households return to homelessness	# of leavers to PH and of stayers ÷ total # served	10	
	30% RRH households have earned income	# with earned income ÷ total # served	10	
	30% RRH households increase other income	# with other income ÷ total # served	10	
	60% of RRH households	# who maintain/increase income ÷ total # served	10	
	Program utilization rates at 98% or higher	# of persons served ÷ proposed number of persons from most recent application & HMIS/other bed utilization rate	10	
	100% of - Length of Days from Start Date to Move-In Date <30 days	# of persons ÷ # of total persons	10	
	Program uses funds for eligible population – homeless & disabled by HUD definition	# of participants whose residence prior to program entry qualifies as homeless divided total number of participants	10	
		# of households with disabling condition divided by total number of households	10	

Summary Performance

Total Possible Points for RRH	Max Points	Max Extra Points	Total Points Awarded
	205	20	

2024 TX 603 CoC Renewal Project Score Sheet

Gantee:		Project Type:	PSH
Sponsor:		Data	Application

Project Type Priorities

The end homelessness using a Housing First approach.

Goal		Max Points	Points Awarded
Project Type	Permanent Supportive Housing		

The points above are automatically awarded according to the program type.

20 possible base points can be awarded	Project Information	Max Points	Findings	Point Awarded
	Describe the project's admission and termination criteria (provide a detailed account to terminate services).	5		
	Describe how your project applies Housing First when engaging clients.	2.5		
	How does your funded program uses Progressive Engagement?	2.5		
	What services that are provided directly by your agency?	2.5		
	As of August 1, 2024 all agencies must have completed the SOAR online training. Please attach the certificate of completion for at least one case manager who is directly involved with your program type. <i>If there are no SOAR certified CMs for project type there will be a 2.5-point deduction.</i>	2.5		
	Include how many SOAR-assisted applications have been filed, regardless of status. For this application, there should be at least one application completed by August 1, 20024. If no applications have been completed there is a 2.5 point deduction.	2.5		
	According to the number of SOAR-assisted applications, attach the OAT report that provides the status of each submitted application. At least one application should be reported, worth 2.5 points. <i>For every additional application and status entered, your application will receive 2 additional points. For every application that is not entered in OAT, you will be deducted 2.5 points. If no applications have been recorded you will be deducted 2.5 points.</i>	2.5		
	One application is required, after the one required application, how many additional applications were reported in OAT?	10		

Community Planning and Collaboration

10 possible base points can be	Describe two new partnerships that have been developed in the last 365 days. Hou have these new partnerships affected your agency, clients, and outcomes?	3.33		
	Describe the current/existing partnerships, what percentage of your clients are receiving services from these partners?	3.33		
	Include all Memorandums of Understanding for the new and existing partnerships you have described above (each partnership must have an MOU attached).	3.33		

HMIS

20 possible base points can be awarded	<i>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</i>			
	Please list all of the funding (other than CoC) that your agency receives (funder, program type, how many individuals served).	2.5		
	Using the funding list created, are you fully compliant to the CoC Governing Board Policy above (meaning all services regardless of funding source is being entered into HMIS)? <i>If not all services are being entered into HMIS there will be a 5-point deduction.</i>	5		
	If any of your programs are not being entered into HMIS, please explain why.	2.5		
	Explain the following about your staff participation: Has your agency/staff consistently attended the HMIS Steering Committee Meetings?	10		
	Eyes on the Fries has been developed to assist agencies with any questions they may have. How many times has your	2		

agency/staff attended? Provide staff name and dates of attendance. This can earn you 2 extra points

Effective Use of Federal Funds

30 possible base points can be

Continuums of Care (CoCs) have a responsibility to analyze what resources they need to address homelessness in their communities and to ensure existing resources are being maximized. In an effort to assist CoCs to better understand financial information about projects in their geography, the SNAPS Office sends the current, CoC Spending Report to CoCs with expenditure information from eLOCCS. The report contains basic information about the grant (e.g., the applicant and grant number) and expenditures as reported in eLOCCS (e.g., contract amount and current balance).

Program draws down at least 4 drawdowns in a 12 month period (Minimum)	Month					10		
	Amount							
Less than 5% of program fund returns on an annual basis (Funds returned divided by the funds awarded from HUD closeout certification).						20		

Additional Questions

40 possible base points can be awarded

Racial Inequities – In the elimination of racial disparities, is achieved when race can no longer predict opportunities, distribution of resources, or outcomes, - particularly for Black and Brown persons, which include Black, Latino, Indigenous, Native American, Asian, Pacific Islander, and other persons of color. What efforts is your agency/program implementing to address racial inequities. If not, what are the agency’s future plans to work towards an equitable system?	10		
Improving Assistance to LGBTQ+ Individuals - Discrimination on the basis of gender identity or sexual orientation manifests differently for different individuals and often overlaps with other forms of prohibited discrimination. Please describe efforts that your program ensures (1) privacy, (2) respect, (3) safety, and (4) access regardless of gender identity or sexual orientation. Include any policies and procedures beyond the discrimination policy that has been implemented.	5		
In addition to improving assistance to LGBTQIA+ experience, provide the details on the agency, date, and training that the agency has received in the last 365 (Include any certificates of completion).	5		
If you have not received any LGBTQIA+ experience training in the last 365 days, provide a plan on how your agency will provide regular training in the future (if your agency has provided training in the past year, you will receive 3 additional points).	3		
Housing Stabilization Plans: Provide the process of how an HSP is created, how often it is updated, and how many of your clients have reached stability. Attach your recidivism report and destination upon exit.	10		
January 1, 2024 a Memorandum on HMIS Documentation request for upload into HMIS. If you scored above an 85% you will receive 5 additional points, if you scored lower than an 85% you will be deducted 5 points.	5		
Attach CoC funded policies and procedures	10		

Performance Review

90 possible base points can be awarded

Performance Standard	Evaluation Method		
85% of households in PH remain housed (≥6 mos. PSH) or exit to PH	# Stayers (>180days) + # Leavers to PH / Total # Served	10	
<2% of exiting PSH households return to homelessness	# that return to homelessness ÷ # exiting	10	
10% PSH households have earned income	Universe: Adult Leavers with Income Information at Start and Exit	10	
50% PSH households increase other income	Universe: Adult Leavers with Income Information at Start and Exit	10	
60% of PSH households increase total overall income	Universe: Adult Leavers with Income Information at Start and Exit	10	
Program utilization rates at 98% or higher	# of persons served ÷ # of units awarded (HHs) from your most recent application & HMIS/other bed utilization rate	10	
100% of - Length of Days from Start Date to Move-In Date <30 days	# of persons that moved in 30 days or less ÷ # of total persons moved into housing	10	
Program uses funds for eligible population – homeless & disabled by HUD definition	# of participants whose residence prior to program entry qualifies as homeless divided total number of participants who entered during the year	10	
	# of households with disabling conditions divided by total number of households	10	

Summary Performance

Total Possible Points for PSH	Max Points	Max Extra Points	Total Points Awarded
	210	20	

New Project Scoring Tools

1. RRH

2. PSH

3. Joint Combo TH-RRH

2024 TX 603 CoC New Project Score Sheet

Gantee:		Project Type:	TH-RRH
Reviewer:		Data:	Application

Project Type Priorities

Goal	End homelessness using a Housing First approach.		
Project Type	Joint Combo TH-RRH	Max Points	Points Awarded

The points above are automatically awarded according to the program type.

160 possible points can be awarded	Project Description	Max Points	Findings	Point Awarded
	Describe the project scope, to include: •Target population including the number of households/clients served; •Plan to identify housing and/or supportive services; •Anticipated project outcomes; with other organizations; •Coordination •How CoC funding will be used	30		
	•Describe how your agency will implement the Housing First model or experience. •Describe how you will lower barriers to entry and during program enrollment. •How will your project quickly move participants into permanent housing?	25		
	Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). <i>If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.</i>	20		
	Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.	20		
	Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.	10		
	Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.	10		
	For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?	10		
	Identify whether your project will include the following: <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months Staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10		
	Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.	15		
RAPID RE-HOUSING & JOINT COMPONENT (TH-RRH) PROJECTS ONLY Describe how you will determine rental assistance amounts, duration, and manage rent redetermination for clients enrolled in the project. What tools or objective assessments will you use in the determination process?	10			

Organizational Capacity

50 possible base points can be awarded	Project Description	Max Points	Findings	Point Awarded
	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: •Agency's experience and capacity to develop and implement the project. •Examples that illustrate experience identifying housing and supportive services for the target population	15		
	Describe the organization's operations to include leadership and management. Include the following: •Ability to supervise the project and staff •Examples of ensuring program effectiveness and fidelity to funding agreements	10		
	Describe your organization's commitment to racial equity. Include the following: • Racial and ethnic makeup of your organization's leadership staff and board, including statistics. • Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions • Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants • How does your organization analyze data and information about race and ethnicity? • Examples of how your organization addresses racial inequities for participants in your programs	15		
Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures.	10			

	<ul style="list-style-type: none"> Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. Describe any auditing findings or concerns during the last 36 months as well as the resolution of each. 	10		
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First Operational Year Project Work Plan

10 possible points can be awarded	<table border="1"> <tr> <td>Days</td> <td>60</td> <td>120</td> <td>180</td> </tr> <tr> <td>Goals</td> <td></td> <td></td> <td></td> </tr> </table> <p>Describe the activities that the organization will undertake prior to the grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.</p>	Days	60	120	180	Goals				5		
	Days	60	120	180								
Goals												
Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.	5											

Project Staffing Plan

10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.	10		
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Community Partnerships and Leveraging

30 possible base points can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.	15		
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers. How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in your community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).	10		
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.	5		

HMIS

40 possible points can be awarded	<p>Please explain the following about your organization's HMIS participation:</p> <ul style="list-style-type: none"> If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) <ul style="list-style-type: none"> Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) <ul style="list-style-type: none"> Describe your agency-wide compliance with HMIS. (5 Points) Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) <ul style="list-style-type: none"> If 'no,' please explain why. (-10 Points) 	30		
	<p>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</p> <p>Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points)</p> <ul style="list-style-type: none"> If not, please explain why? (0 Points) 	10		

HMIS

20 possible points can be	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No	20		
	Supportive Services Budget			
	Housing Assistance Budget			
	Operating Costs Budget			
	HMIS Budget			
	Budget Summary			
	Match-Clearly demonstrates 25% of HUD request			

Summary Performance

Total Possible Points for TH-RRH	Max Points	Max Extra Points	Total Points Awarded
	320	0	

2024 TX 603 CoC New Project Score Sheet

Gantee:		Project Type:	PSH
Reviewer:		Data:	Application

Project Type Priorities

Goal	End homelessness using a Housing First approach.		
Project Type	Permanent Supportive Housing	Max Points	Points Awarded
		20	

The points above are automatically awarded according to the program type.

160 possible points can be awarded	Project Description	Max Points	Findings	Point Awarded
	Describe the project scope, to include: •Target population including the number of households/clients served; •Plan to identify housing and/or supportive services; •Anticipated project outcomes; with other organizations; will be used •Coordination •How CoC funding	30		
	•Describe how your agency will implement the Housing First model or experience. • Describe how you will lower barriers to entry and during program enrollment. •How will your project quickly move participants into permanent housing?	25		
	Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). <i>If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.</i>	20		
	Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.	20		
	Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.	10		
	Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.	10		
	For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?	10		
	Identify whether your project will include the following: <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months Staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10		
Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.	15			

Organizational Capacity

50 possible base points can be awarded	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: •Agency's experience and capacity to develop and implement the project. •Examples that illustrate experience identifying housing and supportive services for the target population <td align="center">15</td> <td></td> <td></td>	15		
	Describe the organization's operations to include leadership and management. Include the following: •Ability to supervise the project and staff •Examples of ensuring program effectiveness and fidelity to funding agreements	10		
	Describe your organization's commitment to racial equity. Include the following: • Racial and ethnic makeup of your organization's leadership staff and board, including statistics. • Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions • Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants • How does your organization analyze data and information about race and ethnicity? • Examples of how your organization addresses racial inequities for participants in your programs	15		
	Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures. • Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. • Describe any auditing findings or concerns during the last 36 months as well as the resolution of each.	10		

First Operational Year Project Work Plan

Describe the activities that the organization will undertake prior to the	Days	60	120	180

10 possible points can be awarded	grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.	Goals	5	
	Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.		5	

Project Staffing Plan

10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.		10	
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Community Partnerships and Leveraging

30 possible base points can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.		15	
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers. How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in our community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).		10	
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.		5	

HMIS

40 possible points can be awarded	<p>Please explain the following about your organization's HMIS participation:</p> <ul style="list-style-type: none"> If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) <ul style="list-style-type: none"> Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) <ul style="list-style-type: none"> Describe your agency-wide compliance with HMIS. (5 Points) Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) <ul style="list-style-type: none"> If 'no,' please explain why. (-10 Points) 		30	
	<p>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</p> <p>Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points)</p> <ul style="list-style-type: none"> If not, please explain why? (0 Points) 		10	

HMIS

20 possible points can be	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No	20	
	Supportive Services Budget		
	Housing Assistance Budget		
	Operating Costs Budget		
	HMIS Budget		
	Budget Summary		
	Match-Clearly demonstrates 25% of HUD request		

Summary Performance

	Max Points	Max Extra Points	Total Points Awarded
Total Possible Points for RRH	330	0	

2024 TX 603 CoC New Project Score Sheet

Gantee:		Project Type:	RRH
Reviewer:		Data:	Application

Project Type Priorities

Goal	End homelessness using a Housing First approach.		
Project Type	Rapid ReHousing	Max Points	Points Awarded
		10	

The points above are automatically awarded according to the program type.

160 possible points can be awarded	Project Description	Max Points	Findings	Point Awarded
	Describe the project scope, to include: <ul style="list-style-type: none"> •Target population including the number of households/clients served; •Plan to identify housing and/or supportive services; •Anticipated project outcomes; with other organizations; will be used <ul style="list-style-type: none"> •Coordination •How CoC funding 	30		
	<ul style="list-style-type: none"> •Describe how your agency will implement the Housing First model or experience. • Describe how you will lower barriers to entry and during program enrollment. •How will your project quickly move participants into permanent housing? 	25		
	Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). <i>If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.</i>	20		
	Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.	20		
	Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.	10		
	Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.	10		
	For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?	10		
	Identify whether your project will include the following: <ul style="list-style-type: none"> <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months Staff person providing technical assistance completed SOAR training in the past 24 months <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A 	10		
Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.	15			

Organizational Capacity

50 possible base points can be awarded	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: <ul style="list-style-type: none"> •Agency's experience and capacity to develop and implement the project. •Examples that illustrate experience identifying housing and supportive services for the target population 	15		
	Describe the organization's operations to include leadership and management. Include the following: <ul style="list-style-type: none"> •Ability to supervise the project and staff •Examples of ensuring program effectiveness and fidelity to funding agreements 	10		
	Describe your organization's commitment to racial equity. Include the following: <ul style="list-style-type: none"> • Racial and ethnic makeup of your organization's leadership staff and board, including statistics. • Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions <ul style="list-style-type: none"> • Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants • How does your organization analyze data and information about race and ethnicity? • Examples of how your organization addresses racial inequities for participants in your programs 	15		
	Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures. <ul style="list-style-type: none"> • Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. • Describe any auditing findings or concerns during the last 36 months as well as the resolution of each. 	10		

First Operational Year Project Work Plan

Days	60	120	180
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10 possible points can be awarded	Describe the activities that the organization will undertake prior to the grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.	Goals				5		
	Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.					5		

Project Staffing Plan

10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.					10		
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Community Partnerships and Leveraging

30 possible base points can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.					15		
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers. How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in our community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).					10		
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.					5		

HMIS

40 possible points can be awarded	<p>Please explain the following about your organization's HMIS participation:</p> <ul style="list-style-type: none"> If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) <ul style="list-style-type: none"> Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) Describe your agency-wide compliance with HMIS. (5 Points) Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) <ul style="list-style-type: none"> If 'no,' please explain why. (-10 Points) 					30		
	<p>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</p> <p>Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points)</p> <ul style="list-style-type: none"> If not, please explain why? (0 Points) 					10		

HMIS

20 possible points can be awarded	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No					20		
	Supportive Services Budget							
	Housing Assistance Budget							
	Operating Costs Budget							
	HMIS Budget							
	Budget Summary							
	Match-Clearly demonstrates 25% of HUD request							

Summary Performance

	Max Points	Max Extra Points	Total Points Awarded
Total Possible Points for RRH	320	0	

2024 TX 603 CoC New Project Independent Review Score Sheet

Gantee:		Project Vida				Project Type: Data		RRH Application	
Project Type Priorities									
Goal		End homelessness using a Housing First approach.			Reviewer's Name:		Reviewer's Name:		Reviewer's Name:
Project Type		Rapid ReHousing		Max Points	Reviewer #1		Reviewer #2		Reviewer #3
				10					
The points above are automatically awarded according to the program type.									
Project Description									
150 possible points can be awarded	Describe the project scope, to include: •Target population including the number of households/clients served; •Plan to identify housing and/or supportive services; •Anticipated project outcomes; •Coordination with other organizations; •How CoC funding will be used		30	Did not address every bullet	0	30	0	0	
	•Describe how your agency will implement the Housing First model or experience. • Describe how you will lower barriers to entry and during program enrollment. •How will your project quickly move participants into permanent housing?		25	It did not elaborate on the specifications of barriers, which need to be explained in more detail.	25	15	18	20	
	Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). <i>If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.</i>		20	Not detailed in describing extensive experience	12	20	18	16	
	Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.		20	•Enter reviewer comments	20	20	19	20	
	Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.		10	•Enter reviewer comments	8	10	10	9	
	Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.		10	•Enter reviewer comments	10	10	10	9	
	For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?		10	•Enter reviewer comments	10	10	10	10	
	Identify whether your project will include the following: <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		10	•Enter reviewer comments	10	10	10	10	
	Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.		15	•Enter reviewer comments	14	15	15	15	
Organizational Capacity									
50 possible base points can be awarded	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: •Agency's experience and capacity to develop and implement the project. •Examples that illustrate experience identifying housing and supportive services for the target population		15	•Enter reviewer comments	15	15	15	15	
	Describe the organization's operations to include leadership and management. Include the following: •Ability to supervise the project and staff •Examples of ensuring program effectiveness and fidelity to funding agreements		10	•Enter reviewer comments	10	10	10	10	
	Describe your organization's commitment to racial equity. Include the following: • Racial and ethnic makeup of your organization's leadership staff and board, including statistics. • Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions. • Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants • How does your organization analyze data and information about race and ethnicity? • Examples of how your organization addresses racial inequities for participants in your programs		15	•Enter reviewer comments	15	15	15	15	
	Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures. • Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. • Describe any auditing findings or concerns during the last 36 months as well as the resolution of each.		10	•Enter reviewer comments	10	10	9	8	
First Operation Year Project Work Plan									
10 possible points can be awarded	Describe the activities that the organization will undertake prior to the grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.		5	•Enter reviewer comments	5	5	5	5	
	Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.		5	Description not met	0	5	5	5	
Project Staffing Plan									
10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.		10	•Enter reviewer comments	8	10	8	8	
Community Partnerships and Leveraging									
30 possible base points can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.		15	•Enter reviewer comments	15	15	15	15	
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers. How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in our community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).		10	•Enter reviewer comments	10	10	9	8	
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.		5	•Enter reviewer comments	3	5	5	3	

40 possible points can be awarded	<p>Please explain the following about your organization's HMIS participation:</p> <ul style="list-style-type: none"> • If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) • Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) • Describe your agency-wide compliance with HMIS. (5 Points) • Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) • If 'no,' please explain why. (-10 Points) 	30	*Enter reviewer comments	30	30	30	30	
	<p>It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place.</p> <p>Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points)</p> <p>*If not, please explain why? (0 Points)</p>	10	*Enter reviewer comments	10	10	10	10	

Budget

20 possible points can be	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No	20	*Enter reviewer comments	20	20	20	18	
	Supportive Services Budget							
	Housing Assistance Budget							
	Operating Costs Budget							
	HMIS Budget							
	Budget Summary							
Match-Clearly demonstrates 25% of HUD request								

Summary Performance

	Max Points	Total Points Awarded	Total Points Awarded	Total Points Awarded	Total Points Awarded
Total Possible Points for RRH	320	260	300	266	259

Average Score
271.25

2024 TX 603 CoC New Project Independent Review Score Sheet

Gantee:	Boarderland Rainbow Center	Project Type:	RRH
		Data:	Application

Project Type Priorities

Goal	End homelessness using a Housing First approach.	Max Points	Reviewer's Name: Reviewer #1	Reviewer's Name: Reviewer #2	Reviewer's Name: Reviewer #3	Reviewer's Name: Reviewer #4	Reviewer's Name:
Project Type	Rapid ReHousing	10					

The points above are automatically awarded according to the program type.

150 possible points can be awarded	Project Description	Max Points	Findings	Point Awarded	Point Awarded	Point Awarded	Point Awarded	Point Awarded
	Describe the project scope, to include: •Target population including the number of households/clients served; •Plan to identify housing and/or supportive services; •Anticipated project outcomes; •Coordination with other organizations; •How CoC funding will be used	30	LGBTQIA+ demographic. Serve 5 individual. Target Population: selected were also seniors, veterans, and families, but description appeared to only focus perhaps more on youth only. Youth only was selected	30	30	30	20	30
•Describe how your agency will implement the Housing First model or experience. • Describe how you will lower barriers to entry and during program enrollment. •How will your project quickly move participants into permanent housing?	25	This agency alleged to be the only provider of its kind within or over a 200 miles radius.	25	25	25	25	25	
Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.	20	*Enter reviewer comments	20	20	20	20	18	
Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.	20	Limited.	20	20	15	17		
Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.	10	Community partnerships with local businesses, etc.	10	8	10	10	8	
Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.	10	Marked.	10	10	10	10	8	
For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?	10	*Food* was listed that applicant would provide food weekly. Would this food last for a week?	10	10	10	5	10	
Identify whether your project will include the following: <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months Staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10	Mentioned only annual follow-up. Typically, transportation and/or referrals to medical apps, get food, and employment is needed.	10	6	7	5	3	
Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.	15	*Client Advisory Board*	15	12	15	15	15	

Organizational Capacity

50 possible base points can be awarded	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: •Agency's experience and capacity to develop and implement the project. •Examples that illustrate experience identifying housing and supportive services for the target population	15	Limited - Lacked focus on housing.	15	15	10	10	
	Describe the organization's operations to include leadership and management. Include the following: •Ability to supervise the project and staff. •Examples of ensuring program effectiveness and fidelity to funding agreements	10	Marked.	10	10	10	10	10
Describe your organization's commitment to racial equity. Include the following: • Racial and ethnic makeup of your organization's leadership staff and board, including statistics. • Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions • Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants • How does your organization analyze data and information about race and efficacy? • Examples of how your organization addresses racial inequities for participants in your programs	15	Existing team vs board seems to lack racial equity, but otherwise applicant's statement and mission is almost marked.	15	15	15	10	10	
Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures. • Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. • Describe any auditing findings or concerns during the last 36 months as well as the resolution of each.	10	Adhere to 2 CFR part 200... Use Therapist a HIPPA compliant client record platform. *No audit findings.* - Marked	10	10	10	10	10	

First Operational Year Project Work Plan

10 possible points can be awarded	Describe the activities that the organization will undertake prior to the grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.	Days				5	*Enter reviewer comments	5	5	5	5
		60	120	180	Goals						
Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.					5	*Enter reviewer comments	5	5	5	5	

Project Staffing Plan

10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.	10	Recommend: Hope Program Supervisor/Casemanager for vacancy and Amber Perez be listed as HOPE Program Director	10	10	10	10
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Community Partnerships and Leveraging

30 possible base points can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.	15	*Enter reviewer comments	10	15	0	0	
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers. How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in our community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).	10	*Enter reviewer comments	10	10	0	0	
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.	5	*Enter reviewer comments	5	5	4	0	0

HMIS

40 possible points can be awarded	Please explain the following about your organization's HMIS participation: • If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) • Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) • Describe your agency-wide compliance with HMIS. (5 Points) • Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) • If 'no,' please explain why. (-10 Points)	30	*Enter reviewer comments	10	15	5	10
	It is the CoC's Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place. Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points) • If not, please explain why? (0 Points)	10	*Enter reviewer comments	10	10	10	10

Budget

20 possible points can be	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No Supportive Services Budget Housing Assistance Budget Operating Costs Budget HMIS Budget Budget Summary Match-Clearly demonstrates 25% of HUD request	20	*Enter reviewer comments	20	20	16	15
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Summary Performance

Total Possible Points for RRI	Max Points	320		Total Points Awarded	276	Total Points Awarded	291	Total Points Awarded	216	Total Points Awarded	229
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Average Score
 253.00

Gantee:		El Paso Villa Maria			Project Type:		Joint Combo	
Independent Reviewer:					Data:		Application	
Project Type Priorities								
Goal	End homelessness using a Housing First approach.			Reviewer's Name:	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:
Project Type	Combo TH-RRH			Reviewer #1	Reviewer #2	Reviewer #3	Reviewer #4	Reviewer #5
		Max Points	10					
The points above are automatically awarded according to the program type.								
Project Description	Max Points	Findings	Point Awarded	Point Awarded	Point Awarded	Point Awarded	Point Awarded	Point Awarded
160 possible points can be awarded	Describe the project scope, to include: •Target population including the number of households/clients served. •Plan to identify housing and/or supportive services. •Anticipated project outcomes. •Coordination with other organizations. •How CoC funding will be used	30	Did not list # of clients served	22	30	30	30	
	•Describe how your agency will implement the Housing First model or experience. •Describe how you will lower barriers to entry and during program enrollment. •How will your project quickly move participants into permanent housing?	25	•Enter reviewer comments	21	25	25	20	
	Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.	20	•Enter reviewer comments	20	20	18	16	
	Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.	20	•Enter reviewer comments	20	20	18	17	
	Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.	10	•Enter reviewer comments	8	10	10	10	
	Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.	10	•Enter reviewer comments	8	10	7	8	
	For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?	10	•Enter reviewer comments	10	10	7	7	
	Identify whether your project will include the following: <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months Staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10	•Enter reviewer comments	10	10	8	7	
	Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.	15	•Enter reviewer comments	15	15	15	13	
	RAPID RE-HOUSING & JOINT COMPONENT (TH-RRH) PROJECTS ONLY Describe how you will determine rental assistance amounts, duration, and manage rent redetermination for clients enrolled in the project. What tools or objective assessments will you use in the determination process?	10	•Enter reviewer comments	10	10	8	9	
Organizational Capacity								
50 possible base points can be awarded	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: •Agency's experience and capacity to develop and implement the project. •Examples that illustrate experience identifying housing and supportive services for the target population	15	•Enter reviewer comments	15	15	15	12	
	Describe the organization's operations to include leadership and management. Include the following: •Ability to supervise the project and staff •Examples of ensuring program effectiveness and fidelity to funding agreements	10	•Enter reviewer comments	7	10	10	8	
	Describe your organization's commitment to racial equity. Include the following: •Racial and ethnic makeup of your organization's leadership staff and board, including statistics. •Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions. •Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants •How does your organization analyze data and information about race and ethnicity? •Examples of how your organization addresses racial inequities for participants in your programs	15	•Enter reviewer comments	15	10	15	12	
	Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures. •Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. •Describe any auditing findings or concerns during the last 36 months as well as the resolution of each.	10	•Enter reviewer comments	6	0	10	6	
First Operational Year Project Work Plan								
10 possible points can be awarded	Describe the activities that the organization will undertake prior to the grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.	5	•Enter reviewer comments	5	5	5	5	
	Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.	5	•Enter reviewer comments	5	5	5	4	
Project Staffing Plan								
10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.	10	% of time not included	8	10	7	7	
Community Partnerships and Leveraging								
30 possible base points can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.	15	•Enter reviewer comments	15	15	7	5	
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers. How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in our community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).	10	•Enter reviewer comments	10	10	8	7	
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.	5	•Enter reviewer comments	3	5	4	4	

HMIS

40 possible points can be awarded	Please explain the following about your organization's HMIS participation: • If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) • Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) • Describe your agency-wide compliance with HMIS. (5 Points) • Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) • If "no," please explain why. (-10 Points)	30	*Enter reviewer comments	30	20	20	20
	It is the CoC's Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place. Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points) • If not, please explain why? (0 Points)	10	*Enter reviewer comments	10	10	10	10

Budget

20 possible points can be	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No	20	*Enter reviewer comments	20	20	20	15
	Supportive Services Budget						
	Housing Assistance Budget						
	Operating Costs Budget						
	HMIS Budget						
	Budget Summary						
Match-Clearly demonstrates 25% of HUD request							

Summary Performance

Total Possible Points for TH-RRH	Max Points		Total Points Awarded	Total Points Awarded	Total Points Awarded	Total Points Awarded
	330		293	295	282	252

Average Score
280.50

2024 TX 603 CoC New Project Independent Review Score Sheet

Grantee: Center of Hope	Project Type: Data	Joint Combo Application
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Project Type Priorities

Goal	End homelessness using a Housing First approach.	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:
Project Type	Combo TH-RRH	Reviewer #1	Reviewer #2	Reviewer #3	Reviewer #4	Reviewer's Name:

The points above are automatically awarded according to the program type.

160 possible points can be awarded	Project Description	Max Points	Findings	Point Awarded	Point Awarded	Point Awarded	Point Awarded	Point Awarded	
	Describe the project scope, to include: *Target population including the number of households/clients served; *Plan to identify housing and/or supportive services; *Anticipated project outcomes; *Coordination with other organizations; *How CoC funding will be used	30	*Enter reviewer comments	30	30	30	30	30	
	*Describe how your agency will implement the Housing First model or experience. *Describe how you will lower barriers to entry and during program enrollment. *How will your project quickly move participants into permanent housing?	25	*Enter reviewer comments	20	25	25	23		
	Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.	20	*Enter reviewer comments	19	20	20	20		
	Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.	20	*Enter reviewer comments	20	20	20	16		
	Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.	10	*Enter reviewer comments	10	10	10	9		
	Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.	10	*Enter reviewer comments	10	10	10	10		
	For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?	10	*Enter reviewer comments	10	10	10	10		
	Identify whether your project will include the following: <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months Staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10	*Enter reviewer comments	10	10	10	10		
	Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.	15	*Enter reviewer comments	14	10	15	13		
RAPID RE-HOUSING & JOINT COMPONENT (TH-RRH) PROJECTS ONLY Describe how you will determine rental assistance amounts, duration, and manage rent redetermination for clients enrolled in the project. What tools or objective assessments will you use in the determination process?	10	*Enter reviewer comments	7	10	10	8			

Organizational Capacity

50 possible base points can be awarded	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: *Agency's experience and capacity to develop and implement the project. *Examples that illustrate experience identifying housing and supportive services for the target population	15	*Enter reviewer comments	15	15	15	15	
	Describe the organization's operations to include leadership and management. Include the following: *Ability to supervise the project and staff *Examples of ensuring program effectiveness and fidelity to funding agreements	10	*Enter reviewer comments	7	10	10	10	
	Describe your organization's commitment to racial equity. Include the following: *Racial and ethnic makeup of your organization's leadership staff and board, including statistics. *Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions *Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants *How does your organization analyze data and information about race and ethnicity? *Examples of how your organization addresses racial inequities for participants in your programs	15	*Enter reviewer comments	4	15	14	13	
	Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures. *Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. *Describe any auditing findings or concerns during the last 36 months as well as the resolution of each.	10	*Enter reviewer comments	3	10	8	9	

First Operational Year Project Work Plan

10 possible points can be awarded	Describe the activities that the organization will undertake prior to the grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.	Days	60	120	180	5	*Enter reviewer comments	5	5	5	5
	Goals										
	Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.					5	*Enter reviewer comments	5	5	5	5

Project Staffing Plan

10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.	10	*Enter reviewer comments	10	10	10	
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Community Partnerships and Leveraging

30 possible base points can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.	15	*Enter reviewer comments	13	15	12	10
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers. How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in our community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).	10	*Enter reviewer comments	10	10	9	8
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.	5	*Enter reviewer comments	5	5	5	4

HMIS

40 possible points can be awarded	Please explain the following about your organization's HMIS participation: • If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) • Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) • Describe your agency-wide compliance with HMIS. (5 Points) • Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) • If 'no,' please explain why. (-10 Points)	30	The Center does not currently have a formal homeless program and therefore does not contribute homeless data to HMIS – funding from this project would allow for the Center to run a homeless program and contribute data to HMIS if awarded. The Center does not currently participate with HMIS as we have not previously had a homeless program	30	10	20	20	
	It is the CoCs Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulations and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place. Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points) If not, please explain why? (0 Points)	10	*Enter reviewer comments	10	10	3	0	

Budget

20 possible points can be	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No	20	*Enter reviewer comments	20	20	20	18	
	Supportive Services Budget							
	Housing Assistance Budget							
	Operating Costs Budget							
	HMIS Budget							
	Budget Summary							
Match-Clearly demonstrates 25% of HUD request								

Summary Performance

Total Possible Points for TH-RRH	Max Points	330	Total Points Awarded	287	Total Points Awarded	295	Total Points Awarded	286	Total Points Awarded	276

Average Score
286.00

2024 TX 603 CoC New Project Independent Review Score Sheet

Grantee: Independent Reviewer:	La Posada Home, Inc.	Project Type: Data	Joint Combo Application
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Project Type Priorities

Goal	End homelessness using a Housing First approach.	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:	Reviewer's Name:
Project Type	Combo TH-RRH	Reviewer #1	Reviewer #2	Reviewer #3	Reviewer #4	Reviewer #5

The points above are automatically awarded according to the program type.

160 possible points can be awarded	Project Description	Max Points	Findings	Point Awarded	Point Awarded	Point Awarded	Point Awarded	Point Awarded
	Describe the project scope, to include: •Target population including the number of households/clients served; •Plan to identify housing and/or supportive services; •Anticipated project outcomes; •Coordination with other organizations; •How CoC funding will be used	30	Did not address every bullet	0	30	30	26	
	•Describe how your agency will implement the Housing First model or experience. • Describe how you will lower barriers to entry and during program enrollment. •How will your project quickly move participants into permanent housing?	25	*Enter reviewer comments	25	25	25	20	
	Describe your experience working with individuals or families who have behavioral health needs, domestic violence, trauma, or other vulnerability factors (as applicable for proposed project population). <i>If applying for domestic violence bonus funding, please include a description of your agency's experience serving survivors of domestic violence, dating violence, sexual assault, or stalking, and your ability to house survivors and meet safety outcomes.</i>	20	*Enter reviewer comments	19	20	20	20	
	Creating opportunities for lived experience, advocacy, and decision making creates more effective housing programs and elevates the standard of care provided. Describe how you will engage participants with lived experience in organizational and program planning, policy and decision making for this project.	20	*Enter reviewer comments	20	20	15	16	
	Note any evidence-based, best, or promising practices, or otherwise innovative practices your organization uses to ensure the best quality and targeted services are available to participants in a cost-effective way. Discuss why the service delivery model you describe will help individuals/families maintain or regain housing stability.	10	*Enter reviewer comments	10	10	10	8	
	Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment program for which program participants may be eligible. Include how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.	10	*Enter reviewer comments	7	10	10	8	
	For all the supportive services available to program participants, indicate who will provide them and how often they will be provided?	10	*Enter reviewer comments	10	10	10	10	
	Identify whether your project will include the following: <input type="checkbox"/> Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs <input type="checkbox"/> Annual follow-ups with program participants to ensure mainstream benefits are received and renewed <input type="checkbox"/> Access to SSI/SSDI technical assistance provided by this project or a partner agency staff person providing technical assistance completed SOAR training in the past 24 months Staff person providing technical assistance completed SOAR training in the past 24 months <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10	*Enter reviewer comments	10	10	10	10	
	Describe how you will work with landlords and community stakeholders to identify appropriate housing units. Describe what strategies you will utilize to persuade landlords to rent to clients who may have poor rental history and/or a criminal background. Describe how you will engage clients in decision-making around their housing preferences.	15	*Enter reviewer comments	15	15	15	13	
RAPID RE-HOUSING & JOINT COMPONENT (TH-RRH) PROJECTS ONLY Describe how you will determine rental assistance amounts, duration, and manage rent redetermination for clients enrolled in the project. What tools or objective assessments will you use in the determination process?	10	*Enter reviewer comments	7	10	10	9		

Organizational Capacity

50 possible base points can be awarded	Describe the organization's mission, as well as a brief overview of the primary programs and services offered by your organization. Provide evidence of the following: •Agency's experience and capacity to develop and implement the project. •Examples that illustrate experience identifying housing and supportive services for the target population	15	Extremely marked. Many services offered for at least 30+ years and rental assistance for 10+ year. Agency has financial stability prior to reimbursement payments.	14	15	15	15	
	Describe the organization's operations to include leadership and management. Include the following: •Ability to supervise the project and staff •Examples of ensuring program effectiveness and fidelity to funding agreements	10	Applicant's response on page 7 is very descriptive and HMIS reports weekly. Extremely marked for 10 points.	10	10	10	10	
	Describe your organization's commitment to racial equity. Include the following: • Racial and ethnic makeup of your organization's leadership staff and board, including statistics. • Detail the initiatives and efforts your organization has implemented to increase the representation of people of color in leadership positions • Describe efforts to increase cultural and racial competency among your staff/volunteers/program participants • How does your organization analyze data and information about race and ethnicity? • Examples of how your organization addresses racial inequities for participants in your programs	15	Marked!	13	15	10	13	
	Describe your agency's internal systems, including your fiscal management system, case/client record management system and recordkeeping procedures. • Describe your fiscal control and accounting procedures and if your organization accounts for federal funds in accordance with the requirements of 2 CFR part 200. • Describe any auditing findings or concerns during the last 36 months as well as the resolution of each.	10	Page 9 Extremely marked: La Posada undergoes an annual audit with no incidence of fraud, bad financial practices, or waste in 35 years. La Posada has never had any unclear monitoring from federal, state, or local funders. There have been no concerns in the last 3 years	10	10	10	7	

First Operational Year Project Work Plan

10 possible points can be awarded	Describe the activities that the organization will undertake prior to the grant start date to ensure the project is ready to house and/or serve the first participant at the start of the grant award. Provide a detailed description of the project's work plan and goals at 60 days, 120 days, and 180 days after the grant start date.	Days	60	120	180	5	*Enter reviewer comments	5	5	5	5
	Goals										
Enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, enter N/A.	5					5	*Enter reviewer comments	4	5	5	5

Project Staffing Plan

10 possible base points can be awarded	Provide an overview of the staffing plan for the project using the tables.	10	*Enter reviewer comments	10	10	5	8

Community Partnerships and Leveraging

can be awarded	Please describe your agency's commitment to and participation in the El Paso Coalition for the Homeless, including current level of participation in committees and initiatives.	15	*Enter reviewer comments	15	15	15	15
	Describe how your agency is collaborating with other homeless service providers and mainstream service providers.						

30 possible base points	How do these collaborative efforts help minimize or avoid the duplication of service and effort? How do you include leveraged services and resources available in our community in your service plan? Include all MOUs with service providers (if you do not have an MOU in place, state why).	10	*Enter reviewer comments	10	10	10	6
	Describe your organization's experience in leveraging Federal, State, local and private sector funds. Describe the extent to which you leverage in-kind donations and volunteers for the project. If your organization has no experience, please indicate that your organization has no experience.	5	*Enter reviewer comments	5	5	5	4

HMIS

40 possible points can be awarded	Please explain the following about your organization's HMIS participation: • If you are a homeless service provider, please explain the agency's level of HMIS participation for any/all homeless programs/services. (5 Points) • Does your agency adhere to the revised local HMIS Policy and Procedures? (5 Points) • Describe your agency-wide compliance with HMIS. (5 Points) • Has your agency staff participated regularly in the HMIS Steering Committee meetings? (5 Points) • If 'no,' please explain why. (-10 Points)	30	*Enter reviewer comments	30	30	30	30
	It is the CoC's Governing Board Policy that complete HMIS information is a requirement for full compliance with HUD funding, and whereas it benefits the entire Continuum of Care to be in full compliance. The CoC Board makes its recommendations for funding contingent on the commitment of all funded agencies to fully participate in HMIS with the HMIS Lead Entity, excluding those who are prohibited by federal regulation and must use a comparable database. Further, should agencies with initially recommended programs not be responsive, other programs will be recommended in their place. Is your Agency fully compliant as per the above CoC Governing Board Policy above? (10 points) -If not, please explain why? (0 Points)	10	*Enter reviewer comments	10	10	10	10

Budget

20 possible points can be	Are you proposing to include indirect costs in your budget? <input type="checkbox"/> Yes <input type="checkbox"/> No	20	*Enter reviewer comments	20	20	20	16
	Supportive Services Budget						
	Housing Assistance Budget						
	Operating Costs Budget						
	HMIS Budget						
	Budget Summary						
Match-Clearly demonstrates 25% of HUD request							

Summary Performance

Total Possible Points for TH-RRH	Max Points	Total Points Awarded	Total Points Awarded	Total Points Awarded	Total Points Awarded
	330	279	320	305	284

Average Score
297.00

Notification to Renewal Projects - Reduction

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 3:40 PM
To: 'Susana Reza'; 'Angelica Terrazas'
Cc: Gary Gray; 'Hope Jackson (hope@theinstituteofhope.org)';
avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC final slate
Attachments: FY 2024 Appeal Process.pdf; EPHS 2024 CoC Competition Acceptance and
Reduction.pdf; FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance for Renewal Projects
2. Letter of Rejection for New Project Proposal
3. Appeal Process
4. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**



October 14, 2024

Susana Reza, Director
El Paso Human Services, Inc.
P.O. Box 11451
El Paso, TX 79995-1451

Dear Mrs. Reza:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted one renewal application.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH Youth – Original Amount of \$168,008 – Score of 215.43 of 245 possible points (86.17%)
 - a. PSH Youth will be reduced by \$17,801.89 = \$150,206.11

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", with a stylized flourish at the end.

Camille Castillo
Director

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 2:31 PM
To: 'Veronica Noriega'; 'Chrystal Davis'
Cc: 'Hope Jackson'; Gary Gray; avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC Slate
Attachments: FY 2024 CoC Slate Final.pdf; FY 2024 Appeal Process.pdf; EHN 2024 CoC Competition Project Acceptance and Reduction.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Veronica Noriega, Program Manager
Emergence Health Network
201 E. Main St. Suite 600
El Paso, TX 79901

Dear Ms. Veronica Noriega:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted three renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH Combo – Original Amount of \$377,328 – Score of 175 of 250 possible points (70%)
 - a. Final Award Amount Reduced by \$68,373.59 = \$308,954.41
2. PSH2 – Original Amount of \$316,934 – Score 151 of 250 possible points (60.40%)
 - a. Final Award Amount Reduced by \$68,373.59 = \$248,560.41
3. RRH – Original Amount of \$321,881 - Score 171 of 245 possible (69.79%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a light blue horizontal line.

Camille Castillo
Director

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 2:52 PM
To: 'Celia Garcia'; Michelle Moss
Cc: Gary Gray; 'Hope Jackson'; Adan Dominguez; avasquez.epch@elp.twcbc.com
Subject: FY 2024 Final CoC Slate
Attachments: Amistad FY 2024 CoC Renewal Acceptance and Reduction.pdf; FY 2024 Appeal Process.pdf; FY 2024 CoC Slate Final.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Cecilia Garcia, Chief Operations Officer, Social Services
Amistad
3210 Dyer St.
El Paso, TX 79930

Dear Ms. Cecilia Garcia:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted one renewal application for Permanent Supportive Housing for Chronically Homeless with Disabilities and Permanent Supportive Housing for Chronically Homeless with Disability Expansion Project.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH-CH- Original Amount of 340,815 - Score 184.1 points of 250 possible (73.64%)
 - a. Final award amount \$272,441.41, reduced by \$68,373.59

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

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Camille Castillo
Director

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 2:20 PM
To: 'Bill Schlesinger'; 'Eric Hutson'; 'Maribel Miranda'
Cc: 'Hope Jackson'; Gary Gray; Adan Dominguez; avasquez.epch@elp.twcbc.com
Subject: FY 2024 CoC Board Final Slate
Attachments: PV 2024 CoC Competition New Project Rejection.pdf; PV 2024 CoC Competition Renewal Projects Acceptance.pdf; FY 2024 CoC Slate Final.pdf; FY 2024 Appeal Process.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance for Renewal Projects
2. Letter of Rejection for New Project Proposal
3. Appeal Process
4. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Bill Schlesinger, Director
Project Vida
3607 Rivera Ave.
El Paso, TX 79905

Dear Mr. Schlesinger:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal and one new application.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH Renewal Project – Original Amount of \$150,070 – Score of 195.48 of 250 possible points (78.19%)
 - a. PSH will be reduced by \$17,801.89 = \$132,268.11
2. RRH Renewal Project – Original Amount of \$118,702 – Score of 165 of 245 possible points (67.34%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a light blue horizontal line.

Camille Castillo
Director

Notification to New Projects - Rejected

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 2:20 PM
To: 'Bill Schlesinger'; 'Eric Hutson'; 'Maribel Miranda'
Cc: 'Hope Jackson'; Gary Gray; Adan Dominguez; avasquez.epch@elp.twcbc.com
Subject: FY 2024 CoC Board Final Slate
Attachments: PV 2024 CoC Competition New Project Rejection.pdf; PV 2024 CoC Competition Renewal Projects Acceptance.pdf; FY 2024 CoC Slate Final.pdf; FY 2024 Appeal Process.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

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2. Letter of Rejection for New Project Proposal
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4. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**



October 14, 2024

Bill Schlesinger, Director
Project Vida
3607 Rivera Ave.
El Paso, TX 79905

Dear Mr. Schlesinger:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted one new application.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. RRH New Project – Requested amount of \$159,647 – 271.25 of 320 possible points (84.75%)
 - a. Project was not included in this years FY 2024 slate

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a light blue horizontal line.

Camille Castillo
Director

Notification to Renewal Projects

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 2:52 PM
To: 'Celia Garcia'; Michelle Moss
Cc: Gary Gray; 'Hope Jackson'; Adan Dominguez; avasquez.epch@elp.twcbc.com
Subject: FY 2024 Final CoC Slate
Attachments: Amistad FY 2024 CoC Renewal Acceptance and Reduction.pdf; FY 2024 Appeal Process.pdf; FY 2024 CoC Slate Final.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

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Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Cecilia Garcia, Chief Operations Officer, Social Services
Amistad
3210 Dyer St.
El Paso, TX 79930

Dear Ms. Cecilia Garcia:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted one renewal application for Permanent Supportive Housing for Chronically Homeless with Disabilities and Permanent Supportive Housing for Chronically Homeless with Disability Expansion Project.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH-CH- Original Amount of 340,815 - Score 184.1 points of 250 possible (73.64%)
 - a. Final award amount \$272,441.41, reduced by \$68,373.59

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

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Camille Castillo
Director



Appeals Process for CoC Allocations Decisions

The CoC has established requirements for the form and manner of submissions for appeals from organizations seeking CoC funding through the representative agency. Failure to follow the procedures or meet the deadlines established in this process may result in denial of the appeal.

1. Organizations

Who may appeal: Eligible applicant organizations that submitted a Letter of Intent to the CoC and met proposal submission requirements by the established deadline that were rejected or reduced by the El Paso CoC Board.

The applicant (*Appealing Party*) must provide evidence that demonstrates an error on the part of the CoC Board in rejecting or reducing the grant. Documentation submitted by the applicant must include:

- a. evidence from the application supporting the applicant's claim that the project application met eligibility and quality thresholds set forth NOFA;
- b. documentation that the application was improperly scored or ranked, or;
- c. evidence that the applicant believes the CoC Board failed to follow its selection priorities set forth in the NOFA which resulted in the project not being funded (e.g., selecting a lower-ranked similar project).

Not later than the fifth day after the Appealing Party has been notified of the CoC Board's decision, the Appealing Party must file a written appeal. The written appeal must include specific information relating to the disposition of the application. The Appealing Party must specifically identify the grounds for the Appeal based on the disposition of the application. Upon receipt of an Appeal, staff shall prepare an Appeal file for the El Paso CoC Board Chair. The Chair of the CoC Board shall respond in writing to the Appeal not later than the tenth day after the receipt of the Appeal.

If the Appealing Party is not satisfied with the CoC Board Chair's response to the Appeal, they may appeal directly to the entire CoC Board within five days after the date of the CoC Board Chair's response. Appeal will be placed on the Board agenda. The CoC Board will review the Appeal and may consider any information properly considered by the CoC Board Chair in making its prior decision(s).

Appeals not submitted in accordance with this section will not be considered by the Board, unless the Board, in the exercise of its discretion, determines there is good cause to consider the appeal. The decisions of the Board are final.

Appeals must be addressed to the CoC Board Chair, Hope Jackson and emailed to Camille Castillo at ccastillo.epch@elp.twcbc.com.

Total ARD \$3,451,931

Tier 1 - \$3,106,738 (90%)

Agency	Project Component	Amount Requested	Units	Population	Score	%
Mandated Systems						
1 CASFV - 110	CE	\$ 85,450.00	NA	DV	110 of 110	100%
2 El Paso Coalition for the Homeless - 110	CE	\$ 140,000.00	NA	All	110 of 110	100%
3 El Paso Coalition for the Homeless - 110	HMIS	\$ 156,207.00	NA	All	110 of 110	100%
1st Time Renewals						
4 YWCA - 237	Joint Combo - DV BONUS	\$ 431,004.00	10	DV	237 of 245	96.73%
5 CASFV - 196	Joint Combo - DV BONUS	\$ 281,706.00	10	DV	198.90 of 245	81.18%
PSH						
6 El Paso Human Services - 216	PSH Youth	\$ 150,206.11	7	Youth	215.43 of 250	86.17%
7 Project Vida - 195	PSH Families	\$ 132,268.11	6	Families	195.48 of 250	78.19%
8 Amistad - 184	PSH	\$ 272,441.41	20	CH	184.1 of 250	73.64%
9 EHN - 184	PSH Combo	\$ 308,954.41	28	CH	175 of 250	70.00%
10 EHN - 151	PSH2	\$ 248,560.41	23	CH	151 of 250	60.40%
New Projects - CoC Bonus						
11 Villa Maria - 280.5	Joint Combo	\$ 342,198.22	6	Homeless	280.5 of 330	87.65%
12 La Posada Home	RRH	\$ 141,845.11	6	DV	297 of 330	90.00%
13 Borderland Rainbow Center - 253	RRH	\$ 134,483.11	5	Homeless	253 of 320	79.06%
14 Center of Hope	Joint Combo	\$ 281,414.11	10	Human Traffick	286 of 330	86.66%
Tier 1 Total		\$ 3,106,738.00				

Tier 2 - Balance \$345,193

Agency	Project Component	Amount Requested	Units	Population	Score	%
RRH Projects						
15 YWCA - 220	RRH	\$ 159,647.00	10	Families	220 of 245	89.79%
16 EPCC - 177	RRH Youth	\$ 219,448.00	14	Youth	166 of 245	67.75%
17 EHN - 174	RRH	\$ 321,881.00	14	CH/Homeless	171 of 245	69.79%
18 Project Vida - 165	RRH	\$ 118,702.00	6	CH/Homeless	165 of 245	67.34%
19 Salvation Army - 136	RRH	\$ 184,691.00	10	CH	138.14 of 245	56.38%
Tier 2 Total		\$ 1,004,369.00				

Total \$ 4,111,107.00

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 3:50 PM
To: 'Sandra N. Garcia'; Yazmin Perez; pfernandez@casfv.org
Cc: 'Hope Jackson (hope@theinstituteofhope.org)'; Gary Gray; avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC Final Slate
Attachments: CASFV FY 2024 CoC Renewal Project acceptance.pdf; FY 2024 Appeal Process.pdf; FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905

October 14, 2024



Sandra Garcia, Executive Director
Center Against Sexual and Family Violence
580 Giles
El Paso, TX 79915

Dear Ms. Garcia:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. Coordinated Entry - Original Amount of \$85,450 - Score 110 of 110 possible (100%)
2. Joint Combo Project - Original Amount of \$281,706 – because this is a first time renewal, this project automatically gets recommended in Tier 1

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a light blue horizontal line.

Camille Castillo
Director



Appeals Process for CoC Allocations Decisions

The CoC has established requirements for the form and manner of submissions for appeals from organizations seeking CoC funding through the representative agency. Failure to follow the procedures or meet the deadlines established in this process may result in denial of the appeal.

1. Organizations

Who may appeal: Eligible applicant organizations that submitted a Letter of Intent to the CoC and met proposal submission requirements by the established deadline that were rejected or reduced by the El Paso CoC Board.

The applicant (*Appealing Party*) must provide evidence that demonstrates an error on the part of the CoC Board in rejecting or reducing the grant. Documentation submitted by the applicant must include:

- a. evidence from the application supporting the applicant's claim that the project application met eligibility and quality thresholds set forth NOFA;
- b. documentation that the application was improperly scored or ranked, or;
- c. evidence that the applicant believes the CoC Board failed to follow its selection priorities set forth in the NOFA which resulted in the project not being funded (e.g., selecting a lower-ranked similar project).

Not later than the fifth day after the Appealing Party has been notified of the CoC Board's decision, the Appealing Party must file a written appeal. The written appeal must include specific information relating to the disposition of the application. The Appealing Party must specifically identify the grounds for the Appeal based on the disposition of the application. Upon receipt of an Appeal, staff shall prepare an Appeal file for the El Paso CoC Board Chair. The Chair of the CoC Board shall respond in writing to the Appeal not later than the tenth day after the receipt of the Appeal.

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Appeals not submitted in accordance with this section will not be considered by the Board, unless the Board, in the exercise of its discretion, determines there is good cause to consider the appeal. The decisions of the Board are final.

Appeals must be addressed to the CoC Board Chair, Hope Jackson and emailed to Camille Castillo at ccastillo.epch@elp.twcbc.com.

Total ARD \$3,451,931

Tier 1 - \$3,106,738 (90%)

Agency	Project Component	Amount Requested	Units	Population	Score	%
Mandated Systems						
1 CASFV - 110	CE	\$ 85,450.00	NA	DV	110 of 110	100%
2 El Paso Coalition for the Homeless - 110	CE	\$ 140,000.00	NA	All	110 of 110	100%
3 El Paso Coalition for the Homeless - 110	HMIS	\$ 156,207.00	NA	All	110 of 110	100%
1st Time Renewals						
4 YWCA - 237	Joint Combo - DV BONUS	\$ 431,004.00	10	DV	237 of 245	96.73%
5 CASFV - 196	Joint Combo - DV BONUS	\$ 281,706.00	10	DV	198.90 of 245	81.18%
PSH						
6 El Paso Human Services - 216	PSH Youth	\$ 150,206.11	7	Youth	215.43 of 250	86.17%
7 Project Vida - 195	PSH Families	\$ 132,268.11	6	Families	195.48 of 250	78.19%
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9 EHN - 184	PSH Combo	\$ 308,954.41	28	CH	175 of 250	70.00%
10 EHN - 151	PSH2	\$ 248,560.41	23	CH	151 of 250	60.40%
New Projects - CoC Bonus						
11 Villa Maria - 280.5	Joint Combo	\$ 342,198.22	6	Homeless	280.5 of 330	87.65%
12 La Posada Home	RRH	\$ 141,845.11	6	DV	297 of 330	90.00%
13 Borderland Rainbow Center - 253	RRH	\$ 134,483.11	5	Homeless	253 of 320	79.06%
14 Center of Hope	Joint Combo	\$ 281,414.11	10	Human Traffick	286 of 330	86.66%
Tier 1 Total		\$ 3,106,738.00				

Tier 2 - Balance \$345,193

Agency	Project Component	Amount Requested	Units	Population	Score	%
RRH Projects						
15 YWCA - 220	RRH	\$ 159,647.00	10	Families	220 of 245	89.79%
16 EPCC - 177	RRH Youth	\$ 219,448.00	14	Youth	166 of 245	67.75%
17 EHN - 174	RRH	\$ 321,881.00	14	CH/Homeless	171 of 245	69.79%
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19 Salvation Army - 136	RRH	\$ 184,691.00	10	CH	138.14 of 245	56.38%
Tier 2 Total		\$ 1,004,369.00				

Total \$ 4,111,107.00

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 2:31 PM
To: 'Veronica Noriega'; 'Chrystal Davis'
Cc: 'Hope Jackson'; Gary Gray; avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC Slate
Attachments: FY 2024 CoC Slate Final.pdf; FY 2024 Appeal Process.pdf; EHN 2024 CoC Competition Project Acceptance and Reduction.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

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3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Veronica Noriega, Program Manager
Emergence Health Network
201 E. Main St. Suite 600
El Paso, TX 79901

Dear Ms. Veronica Noriega:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted three renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH Combo – Original Amount of \$377,328 – Score of 175 of 250 possible points (70%)
 - a. Final Award Amount Reduced by \$68,373.59 = \$308,954.41
2. PSH2 – Original Amount of \$316,934 – Score 151 of 250 possible points (60.40%)
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I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

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Camille Castillo
Director



Appeals Process for CoC Allocations Decisions

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Appeals must be addressed to the CoC Board Chair, Hope Jackson and emailed to Camille Castillo at ccastillo.epch@elp.twcbc.com.

Total ARD \$3,451,931

Tier 1 - \$3,106,738 (90%)

Agency	Project Component	Amount Requested	Units	Population	Score	%
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1 CASFV - 110	CE	\$ 85,450.00	NA	DV	110 of 110	100%
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Tier 1 Total		\$ 3,106,738.00				

Tier 2 - Balance \$345,193

Agency	Project Component	Amount Requested	Units	Population	Score	%
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15 YWCA - 220	RRH	\$ 159,647.00	10	Families	220 of 245	89.79%
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Tier 2 Total		\$ 1,004,369.00				

Total \$ 4,111,107.00

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 3:52 PM
To: 'Beatriz Marin-Olivarez'; 'Beth Senger'
Cc: Gary Gray; 'Hope Jackson'; avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 Final Slate
Attachments: EPCC FY 2024 CoC Renewal Competition Acceptance.pdf; FY 2024 CoC Slate Final.pdf; FY 2024 Appeal Process.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Beatriz Marin-Olivarez, Youth Outreach & Housing Division Director
El Paso Center for Children
2200 N. Stevens St.
El Paso, TX 79936

Dear Ms. Beatriz Marin-Olivarez:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted one renewal application.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. RRH Youth – Original Amount of \$219,448 – Score of 166 of 245 possible points (67.75%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", with a horizontal line underneath.

Camille Castillo
Director



Appeals Process for CoC Allocations Decisions

The CoC has established requirements for the form and manner of submissions for appeals from organizations seeking CoC funding through the representative agency. Failure to follow the procedures or meet the deadlines established in this process may result in denial of the appeal.

1. Organizations

Who may appeal: Eligible applicant organizations that submitted a Letter of Intent to the CoC and met proposal submission requirements by the established deadline that were rejected or reduced by the El Paso CoC Board.

The applicant (*Appealing Party*) must provide evidence that demonstrates an error on the part of the CoC Board in rejecting or reducing the grant. Documentation submitted by the applicant must include:

- a. evidence from the application supporting the applicant's claim that the project application met eligibility and quality thresholds set forth NOFA;
- b. documentation that the application was improperly scored or ranked, or;
- c. evidence that the applicant believes the CoC Board failed to follow its selection priorities set forth in the NOFA which resulted in the project not being funded (e.g., selecting a lower-ranked similar project).

Not later than the fifth day after the Appealing Party has been notified of the CoC Board's decision, the Appealing Party must file a written appeal. The written appeal must include specific information relating to the disposition of the application. The Appealing Party must specifically identify the grounds for the Appeal based on the disposition of the application. Upon receipt of an Appeal, staff shall prepare an Appeal file for the El Paso CoC Board Chair. The Chair of the CoC Board shall respond in writing to the Appeal not later than the tenth day after the receipt of the Appeal.

If the Appealing Party is not satisfied with the CoC Board Chair's response to the Appeal, they may appeal directly to the entire CoC Board within five days after the date of the CoC Board Chair's response. Appeal will be placed on the Board agenda. The CoC Board will review the Appeal and may consider any information properly considered by the CoC Board Chair in making its prior decision(s).

Appeals not submitted in accordance with this section will not be considered by the Board, unless the Board, in the exercise of its discretion, determines there is good cause to consider the appeal. The decisions of the Board are final.

Appeals must be addressed to the CoC Board Chair, Hope Jackson and emailed to Camille Castillo at ccastillo.epch@elp.twcbc.com.

Total ARD \$3,451,931

Tier 1 - \$3,106,738 (90%)

Agency	Project Component	Amount Requested	Units	Population	Score	%
Mandated Systems						
1 CASFV - 110	CE	\$ 85,450.00	NA	DV	110 of 110	100%
2 El Paso Coalition for the Homeless - 110	CE	\$ 140,000.00	NA	All	110 of 110	100%
3 El Paso Coalition for the Homeless - 110	HMIS	\$ 156,207.00	NA	All	110 of 110	100%
1st Time Renewals						
4 YWCA - 237	Joint Combo - DV BONUS	\$ 431,004.00	10	DV	237 of 245	96.73%
5 CASFV - 196	Joint Combo - DV BONUS	\$ 281,706.00	10	DV	198.90 of 245	81.18%
PSH						
6 El Paso Human Services - 216	PSH Youth	\$ 150,206.11	7	Youth	215.43 of 250	86.17%
7 Project Vida - 195	PSH Families	\$ 132,268.11	6	Families	195.48 of 250	78.19%
8 Amistad - 184	PSH	\$ 272,441.41	20	CH	184.1 of 250	73.64%
9 EHN - 184	PSH Combo	\$ 308,954.41	28	CH	175 of 250	70.00%
10 EHN - 151	PSH2	\$ 248,560.41	23	CH	151 of 250	60.40%
New Projects - CoC Bonus						
11 Villa Maria - 280.5	Joint Combo	\$ 342,198.22	6	Homeless	280.5 of 330	87.65%
12 La Posada Home	RRH	\$ 141,845.11	6	DV	297 of 330	90.00%
13 Borderland Rainbow Center - 253	RRH	\$ 134,483.11	5	Homeless	253 of 320	79.06%
14 Center of Hope	Joint Combo	\$ 281,414.11	10	Human Traffick	286 of 330	86.66%
Tier 1 Total		\$ 3,106,738.00				

Tier 2 - Balance \$345,193

Agency	Project Component	Amount Requested	Units	Population	Score	%
RRH Projects						
15 YWCA - 220	RRH	\$ 159,647.00	10	Families	220 of 245	89.79%
16 EPCC - 177	RRH Youth	\$ 219,448.00	14	Youth	166 of 245	67.75%
17 EHN - 174	RRH	\$ 321,881.00	14	CH/Homeless	171 of 245	69.79%
18 Project Vida - 165	RRH	\$ 118,702.00	6	CH/Homeless	165 of 245	67.34%
19 Salvation Army - 136	RRH	\$ 184,691.00	10	CH	138.14 of 245	56.38%
Tier 2 Total		\$ 1,004,369.00				

Total \$ 4,111,107.00

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 3:40 PM
To: 'Susana Reza'; 'Angelica Terrazas'
Cc: Gary Gray; 'Hope Jackson (hope@theinstituteofhope.org)';
avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC final slate
Attachments: FY 2024 Appeal Process.pdf; EPHS 2024 CoC Competition Acceptance and
Reduction.pdf; FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance for Renewal Projects
2. Letter of Rejection for New Project Proposal
3. Appeal Process
4. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905



October 14, 2024

Susana Reza, Director
El Paso Human Services, Inc.
P.O. Box 11451
El Paso, TX 79995-1451

Dear Mrs. Reza:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted one renewal application.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH Youth – Original Amount of \$168,008 – Score of 215.43 of 245 possible points (86.17%)
 - a. PSH Youth will be reduced by \$17,801.89 = \$150,206.11

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", with a stylized flourish at the end.

Camille Castillo
Director



Appeals Process for CoC Allocations Decisions

The CoC has established requirements for the form and manner of submissions for appeals from organizations seeking CoC funding through the representative agency. Failure to follow the procedures or meet the deadlines established in this process may result in denial of the appeal.

1. Organizations

Who may appeal: Eligible applicant organizations that submitted a Letter of Intent to the CoC and met proposal submission requirements by the established deadline that were rejected or reduced by the El Paso CoC Board.

The applicant (*Appealing Party*) must provide evidence that demonstrates an error on the part of the CoC Board in rejecting or reducing the grant. Documentation submitted by the applicant must include:

- a. evidence from the application supporting the applicant's claim that the project application met eligibility and quality thresholds set forth NOFA;
- b. documentation that the application was improperly scored or ranked, or;
- c. evidence that the applicant believes the CoC Board failed to follow its selection priorities set forth in the NOFA which resulted in the project not being funded (e.g., selecting a lower-ranked similar project).

Not later than the fifth day after the Appealing Party has been notified of the CoC Board's decision, the Appealing Party must file a written appeal. The written appeal must include specific information relating to the disposition of the application. The Appealing Party must specifically identify the grounds for the Appeal based on the disposition of the application. Upon receipt of an Appeal, staff shall prepare an Appeal file for the El Paso CoC Board Chair. The Chair of the CoC Board shall respond in writing to the Appeal not later than the tenth day after the receipt of the Appeal.

If the Appealing Party is not satisfied with the CoC Board Chair's response to the Appeal, they may appeal directly to the entire CoC Board within five days after the date of the CoC Board Chair's response. Appeal will be placed on the Board agenda. The CoC Board will review the Appeal and may consider any information properly considered by the CoC Board Chair in making its prior decision(s).

Appeals not submitted in accordance with this section will not be considered by the Board, unless the Board, in the exercise of its discretion, determines there is good cause to consider the appeal. The decisions of the Board are final.

Appeals must be addressed to the CoC Board Chair, Hope Jackson and emailed to Camille Castillo at ccastillo.epch@elp.twcbc.com.

Total ARD \$3,451,931

Tier 1 - \$3,106,738 (90%)

Agency	Project Component	Amount Requested	Units	Population	Score	%
Mandated Systems						
1 CASFV - 110	CE	\$ 85,450.00	NA	DV	110 of 110	100%
2 El Paso Coalition for the Homeless - 110	CE	\$ 140,000.00	NA	All	110 of 110	100%
3 El Paso Coalition for the Homeless - 110	HMIS	\$ 156,207.00	NA	All	110 of 110	100%
1st Time Renewals						
4 YWCA - 237	Joint Combo - DV BONUS	\$ 431,004.00	10	DV	237 of 245	96.73%
5 CASFV - 196	Joint Combo - DV BONUS	\$ 281,706.00	10	DV	198.90 of 245	81.18%
PSH						
6 El Paso Human Services - 216	PSH Youth	\$ 150,206.11	7	Youth	215.43 of 250	86.17%
7 Project Vida - 195	PSH Families	\$ 132,268.11	6	Families	195.48 of 250	78.19%
8 Amistad - 184	PSH	\$ 272,441.41	20	CH	184.1 of 250	73.64%
9 EHN - 184	PSH Combo	\$ 308,954.41	28	CH	175 of 250	70.00%
10 EHN - 151	PSH2	\$ 248,560.41	23	CH	151 of 250	60.40%
New Projects - CoC Bonus						
11 Villa Maria - 280.5	Joint Combo	\$ 342,198.22	6	Homeless	280.5 of 330	87.65%
12 La Posada Home	RRH	\$ 141,845.11	6	DV	297 of 330	90.00%
13 Borderland Rainbow Center - 253	RRH	\$ 134,483.11	5	Homeless	253 of 320	79.06%
14 Center of Hope	Joint Combo	\$ 281,414.11	10	Human Traffick	286 of 330	86.66%
Tier 1 Total		\$ 3,106,738.00				

Tier 2 - Balance \$345,193

Agency	Project Component	Amount Requested	Units	Population	Score	%
RRH Projects						
15 YWCA - 220	RRH	\$ 159,647.00	10	Families	220 of 245	89.79%
16 EPCC - 177	RRH Youth	\$ 219,448.00	14	Youth	166 of 245	67.75%
17 EHN - 174	RRH	\$ 321,881.00	14	CH/Homeless	171 of 245	69.79%
18 Project Vida - 165	RRH	\$ 118,702.00	6	CH/Homeless	165 of 245	67.34%
19 Salvation Army - 136	RRH	\$ 184,691.00	10	CH	138.14 of 245	56.38%
Tier 2 Total		\$ 1,004,369.00				

Total \$ 4,111,107.00

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 2:20 PM
To: 'Bill Schlesinger'; 'Eric Hutson'; 'Maribel Miranda'
Cc: 'Hope Jackson'; Gary Gray; Adan Dominguez; avasquez.epch@elp.twcbc.com
Subject: FY 2024 CoC Board Final Slate
Attachments: PV 2024 CoC Competition New Project Rejection.pdf; PV 2024 CoC Competition Renewal Projects Acceptance.pdf; FY 2024 CoC Slate Final.pdf; FY 2024 Appeal Process.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance for Renewal Projects
2. Letter of Rejection for New Project Proposal
3. Appeal Process
4. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Bill Schlesinger, Director
Project Vida
3607 Rivera Ave.
El Paso, TX 79905

Dear Mr. Schlesinger:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal and one new application.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. PSH Renewal Project – Original Amount of \$150,070 – Score of 195.48 of 250 possible points (78.19%)
 - a. PSH will be reduced by \$17,801.89 = \$132,268.11
2. RRH Renewal Project – Original Amount of \$118,702 – Score of 165 of 245 possible points (67.34%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a light blue horizontal line.

Camille Castillo
Director



Appeals Process for CoC Allocations Decisions

The CoC has established requirements for the form and manner of submissions for appeals from organizations seeking CoC funding through the representative agency. Failure to follow the procedures or meet the deadlines established in this process may result in denial of the appeal.

1. Organizations

Who may appeal: Eligible applicant organizations that submitted a Letter of Intent to the CoC and met proposal submission requirements by the established deadline that were rejected or reduced by the El Paso CoC Board.

The applicant (*Appealing Party*) must provide evidence that demonstrates an error on the part of the CoC Board in rejecting or reducing the grant. Documentation submitted by the applicant must include:

- a. evidence from the application supporting the applicant's claim that the project application met eligibility and quality thresholds set forth NOFA;
- b. documentation that the application was improperly scored or ranked, or;
- c. evidence that the applicant believes the CoC Board failed to follow its selection priorities set forth in the NOFA which resulted in the project not being funded (e.g., selecting a lower-ranked similar project).

Not later than the fifth day after the Appealing Party has been notified of the CoC Board's decision, the Appealing Party must file a written appeal. The written appeal must include specific information relating to the disposition of the application. The Appealing Party must specifically identify the grounds for the Appeal based on the disposition of the application. Upon receipt of an Appeal, staff shall prepare an Appeal file for the El Paso CoC Board Chair. The Chair of the CoC Board shall respond in writing to the Appeal not later than the tenth day after the receipt of the Appeal.

If the Appealing Party is not satisfied with the CoC Board Chair's response to the Appeal, they may appeal directly to the entire CoC Board within five days after the date of the CoC Board Chair's response. Appeal will be placed on the Board agenda. The CoC Board will review the Appeal and may consider any information properly considered by the CoC Board Chair in making its prior decision(s).

Appeals not submitted in accordance with this section will not be considered by the Board, unless the Board, in the exercise of its discretion, determines there is good cause to consider the appeal. The decisions of the Board are final.

Appeals must be addressed to the CoC Board Chair, Hope Jackson and emailed to Camille Castillo at ccastillo.epch@elp.twcbc.com.

Total ARD \$3,451,931

Tier 1 - \$3,106,738 (90%)

Agency	Project Component	Amount Requested	Units	Population	Score	%
Mandated Systems						
1 CASFV - 110	CE	\$ 85,450.00	NA	DV	110 of 110	100%
2 El Paso Coalition for the Homeless - 110	CE	\$ 140,000.00	NA	All	110 of 110	100%
3 El Paso Coalition for the Homeless - 110	HMIS	\$ 156,207.00	NA	All	110 of 110	100%
1st Time Renewals						
4 YWCA - 237	Joint Combo - DV BONUS	\$ 431,004.00	10	DV	237 of 245	96.73%
5 CASFV - 196	Joint Combo - DV BONUS	\$ 281,706.00	10	DV	198.90 of 245	81.18%
PSH						
6 El Paso Human Services - 216	PSH Youth	\$ 150,206.11	7	Youth	215.43 of 250	86.17%
7 Project Vida - 195	PSH Families	\$ 132,268.11	6	Families	195.48 of 250	78.19%
8 Amistad - 184	PSH	\$ 272,441.41	20	CH	184.1 of 250	73.64%
9 EHN - 184	PSH Combo	\$ 308,954.41	28	CH	175 of 250	70.00%
10 EHN - 151	PSH2	\$ 248,560.41	23	CH	151 of 250	60.40%
New Projects - CoC Bonus						
11 Villa Maria - 280.5	Joint Combo	\$ 342,198.22	6	Homeless	280.5 of 330	87.65%
12 La Posada Home	RRH	\$ 141,845.11	6	DV	297 of 330	90.00%
13 Borderland Rainbow Center - 253	RRH	\$ 134,483.11	5	Homeless	253 of 320	79.06%
14 Center of Hope	Joint Combo	\$ 281,414.11	10	Human Traffick	286 of 330	86.66%
Tier 1 Total		\$ 3,106,738.00				

Tier 2 - Balance \$345,193

Agency	Project Component	Amount Requested	Units	Population	Score	%
RRH Projects						
15 YWCA - 220	RRH	\$ 159,647.00	10	Families	220 of 245	89.79%
16 EPCC - 177	RRH Youth	\$ 219,448.00	14	Youth	166 of 245	67.75%
17 EHN - 174	RRH	\$ 321,881.00	14	CH/Homeless	171 of 245	69.79%
18 Project Vida - 165	RRH	\$ 118,702.00	6	CH/Homeless	165 of 245	67.34%
19 Salvation Army - 136	RRH	\$ 184,691.00	10	CH	138.14 of 245	56.38%
Tier 2 Total		\$ 1,004,369.00				

Total \$ 4,111,107.00

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 4:07 PM
To: 'Floiran Estrada'; 'Judith Marquez'; 'Rosa De La Rosa'
Cc: Gary Gray; 'Hope Jackson (hope@theinstituteofhope.org)';
avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC Final Slate
Attachments: TSA FY 2024 CoC Renewal Competition Acceptance.pdf; FY 2024 Appeal Process.pdf; FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Floiran Estrada, Area Commander
The Salvation Army, a Georgia Corporation
4300 E. Paisano Dr.
El Paso, TX 79905

Dear Mr. Estrada:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. RRH – Original Amount of \$184,691 – Score of 138.14 of 245 possible points (56.38%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a horizontal line.

Camille Castillo
Director

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 4:07 PM
To: 'Ulibarri, Sierra'; 'Castruita, Rocio'
Cc: Gary Gray; 'Hope Jackson (hope@theinstituteofhope.org)';
avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC Final Slate
Attachments: YWCA FY 2024 CoC Renewal Competition Acceptance.pdf; FY 2024 Appeal Process.pdf;
FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905

October 14, 2024



Sierra Ulibarri, Supportive Housing & Workforce Development Administrator
YWCA El Paso del Norte Region
1600 Brown Street
El Paso, TX 79902

Dear Sierra:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. Joint Combo – Original Amount of \$431,004 – All first time renewals are an automatic and are placed in Tier 1
2. RRH – Original Amount of \$159,647 – Score of 220 of 245 possible points (89.79%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", with a stylized flourish at the end.

Camille Castillo
Director

Notification to New Projects

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 4:54 PM
To: 'Amber Perez'
Cc: 'Hope Jackson (hope@theinstituteofhope.org)'; Gary Gray; Adan Dominguez; avasquez.epch@elp.twcbc.com
Subject: FY 2024 Final CoC Slate
Attachments: BRC FY 2024 CoC New Project Acceptance.pdf; FY 2024 Appeal Process.pdf; FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**

October 14, 2024



Amber Perez, Executive Director
Borderland Rainbow Center
2714 Wyoming
El Paso, TX 79903

Dear Amber:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. RRH – Original Amount of \$121,786 – Funded \$134,483.11 - Score of 253 of 320 possible points (79.06%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a blue horizontal line.

Camille Castillo
Director

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 4:54 PM
To: 'Coni Lara'
Cc: 'Hope Jackson (hope@theinstituteofhope.org)'; Gary Gray; avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC final slate
Attachments: Villa Maria FY 2024 CoC New Project Acceptance.pdf; FY 2024 CoC Slate Final.pdf; FY 2024 Appeal Process.pdf

Importance: High

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**



October 14, 2024

Maria A. Lara, Executive Director
El Paso Villa Maria
920 S. Oregon Street
El Paso, TX 79901

Dear Ms. Lara:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. Joint Combo Project – Original Amount of \$463,068 – Funded \$342,198.22 - Score of 280 of 330 possible points (87.65%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", with a stylized flourish at the end.

Camille Castillo
Director

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 5:15 PM
To: laposada915@gmail.com
Cc: 'Hope Jackson'; Gary Gray; avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC Final Slate
Attachments: LPH FY 2024 CoC New Project Acceptance.pdf; FY 2024 Appeal Process.pdf; FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**



October 14, 2024

Monica Barrera, CEO
La Posada Home, Inc.
1020 N. Campbell
El Paso, TX 79902

Dear Ms. Barrera:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. Joint Combo Project – Original Amount of \$292,215 – CoC Board Funded your agency a RRH Project in the amount of \$141,845.11
 - a. Your original Joint Combo Project Scored of 297 of 330 possible points (90.00%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a horizontal line.

Camille Castillo
Director

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Monday, October 14, 2024 5:15 PM
To: Nicole Schiff
Cc: 'Hope Jackson'; Gary Gray; avasquez.epch@elp.twcbc.com; Adan Dominguez
Subject: FY 2024 CoC final Slate
Attachments: PDNCOH FY 2024 CoC New Project Acceptance.pdf; FY 2024 Appeal Process.pdf; FY 2024 CoC Slate Final.pdf

Good Afternoon,

Regarding the referenced subject line, attached are the following documents

1. Letter of Acceptance and Reduction for Renewal Projects
2. Appeal Process
3. FY 2024 CoC Final Slate

Let me know if you have any questions.



Camille Castillo

**El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905**



October 14, 2024

Nicole Schiff, MPH, Executive Director
Paso del Norte Center of Hope
PO Box 31397
El Paso, TX 79931

Dear Ms. Schiff:

This letter is to inform you that the CoC Board finalized the slate for the FY2024 CoC Competition. Your agency submitted two renewal applications.

After much deliberation, the CoC Board is recommending to HUD to award the following (please be advised your score has been included below):

1. Joint Combo Project – Original Amount of \$293,040 – Funded \$342,198.22 – Amount Funded \$281,414.11- Score of 286 of 330 possible points (86.66%)

Thank you for all that you do in our community's efforts to end homelessness.

I will be guiding you on your next steps in this process.

Thank you for your application and support of the El Paso Continuum of Care.

Respectfully,

A handwritten signature in blue ink, appearing to be "Camille Castillo", written over a blue horizontal line.

Camille Castillo
Director

El Paso Coalition for the Homeless TX-603

Local Competition Results

	Project Name	Score	Applied for/Funded	Status	Project Component	Rank	Amount Requested from HUD	Reallocated Funds
1	EPCH Planning	Not Scored	NA	Accepted		NA		Funding Complete
2	CASV CE	110 of 110	CE/CE	Accepted	SSO - CE	1	\$ 85,410.00	Funding Complete
3	EPCH CE	110 of 110	CE/CE	Accepted	SSO - CE	2	\$ 140,000.00	Funding Complete
4	EPCH HMIS	110 of 110	HMIS/HMIS	Accepted	SSO - HMIS	3	\$ 156,207.00	Funding Complete
5	YWCA Joint Combo TH & RRH	237 of 245	Joint Combo/Joint Combo	Accepted	Joint Combo	4	\$ 434,004.00	Funding Complete
6	CASV Joint Combo TH & RRH	198.9 of 245	Joint Combo/Joint Combo	Accepted	Joint Combo	5	\$ 281,706.00	Funding Complete
7	EPHS PSH Youth	215.43 of 250	PSH/PSH	Accepted	PSH	6	\$ 150,206.11	Project Reduced by \$17,801.89
8	Project Vida PSH	195.48 of 250	PSH/PSH	Accepted	PSH	7	\$ 132,268.11	Project Reduced by \$17,801.89
9	Amistad PSH	184.1 of 250	PSH/PSH	Accepted	PSH	8	\$ 272,441.41	Project Reduced by \$68,373.59
10	EHN PSH Combo	175 of 250	PSH/PSH	Accepted	PSH	9	\$ 308,954.41	Project Reduced by \$68,373.59
11	EHN PSH 2	151 of 250	PSH/PSH	Accepted	PSH	10	\$ 248,560.41	Project Reduced by \$68,373.59
12	<i>El Paso Villa Maria Joint Combo</i>	<i>280.5 of 330</i>	<i>Joint Combo/Joint Combo</i>	<i>Accepted</i>	<i>Joint Combo - CoC Bonus</i>	<i>11</i>	<i>\$ 342,198.22</i>	<i>New Project</i>
13	<i>La Posada Home RRH</i>	<i>297 of 330</i>	<i>Joint Combo/RRH</i>	<i>Accepted</i>	<i>PH-RRH - DV Bonus</i>	<i>12</i>	<i>\$ 141,845.11</i>	<i>New Project</i>
14	<i>Borderland Rainbow Center</i>	<i>253 of 320</i>	<i>RRH/RRH</i>	<i>Accepted</i>	<i>PH-RRH - CoC Bonus</i>	<i>13</i>	<i>\$ 134,483.11</i>	<i>New Project</i>
15	<i>Paso del Norte Center of Hope</i>	<i>285 of 330</i>	<i>Joint Combo/Joint Combo</i>	<i>Accepted</i>	<i>Joint Combo - DV Bonus</i>	<i>14</i>	<i>\$ 281,414.11</i>	<i>New Project</i>
16	YWCA RRH	220 of 245	RRH/RRH	Accepted	PH-RRH	15	\$ 159,647.00	Funding Complete
17	EPCC RRH	166 of 245	RRH/RRH	Accepted	PH-RRH	16	\$ 219,448.00	Funding Complete
18	EHN RRH	171 of 245	RRH/RRH	Accepted	PH-RRH	17	\$ 321,881.00	Funding Complete
19	Project Vida RRH	165 of 245	RRH/RRH	Accepted	PH-RRH	18	\$ 118,702.00	Funding Complete
20	Salvation Army RRH	138.14 of 245	RRH/RRH	Accepted	PH-RRH	19	\$ 184,691.00	Funding Complete
21	Project Vida Rapid-Rehousing	271.25 of 320	RRH	Rejected	PH-RRH	NA	\$ 151,951.00	Rejected

FY 2024 NOFO Application Information

The U.S. Department of Housing and Urban Development (HUD) makes resources available to communities through a national competition for its Continuum of Care (CoC) Homeless Assistance Programs. The El Paso Coalition for the Homeless (TX-603) announces the internal competition for HUD Continuum of Care Funding.

2024/2025 Continuum of Care Local Program Competition

[FY 2024-2025 Continuum of Care Notice of Funding Opportunity](#)

[FY 2024 CoC NOFO Local Competition Request for Applications](#)

New Projects

[FY 2024 New CoC Project Application](#)

[2024 New CoC RRH PSH TH-RRH Scoring Sheet](#)

Renewal Projects

[FY 2024 CoC Renewal Project Application Final](#)

[2024 CE Renewal Revised Scoring Sheet](#)

[2024 HMIS Renewal Revised Scoring Sheet](#)

[2024 PSH Renewal Revised Scoring Sheet](#)

[2024 RRH Renewal Revised Scoring Sheet](#)

[2024 Joint TH RRH Renewal Revised Scoring Sheet](#)

[Independent Review Team Minutes](#)

[FY 2024 DRAFT Consolidated Application](#)

[FY 2024 CoC Approved Applications](#)

[FY 2024 New CoC Project Application](#)

[2024 New CoC RRH PSH TH-RRH Scoring Sheet](#)

Renewal Projects

[FY 2024 CoC Renewal Project Application Final](#)

[2024 CE Renewal Revised Scoring Sheet](#)

[2024 HMIS Renewal Revised Scoring Sheet](#)

[2024 PSH Renewal Revised Scoring Sheet](#)

[2024 RRH Renewal Revised Scoring Sheet](#)

[2024 Joint TH RRH Renewal Revised Scoring Sheet](#)

[Independent Review Team Minutes](#)

[FY 2024 DRAFT Consolidated Application](#)

[FY 2024 CoC Approved Applications](#)

[Final FY CoC Priority Listing](#)

[CoC Renewal Project Score Cards](#)

[CoC New Project Score Cards](#)

[Final Decision FY 2024 CoC Slate Order](#)

[FY 2024 TX-603 GIW](#)

FY 2023 NOFO Application Information

Camille Castillo

From: Camille Castillo <ccastillo.epch@elp.twcbc.com>
Sent: Tuesday, October 22, 2024 5:01 PM
Subject: FY CoC Consolidated Application Review
Attachments: CoC Consolidated Plan.pdf

Good Afternoon Everyone!

Attached is the FY 2024 CoC Consolidated Application. Please take some time to review and provide me your feed back. All input is welcomed!!

Let us know if you have any questions.



Camille Castillo

El Paso Coalition for the Homeless
6044 Gateway East, Suite 410
El Paso TX 79905

CARE COORDINATION AGREEMENT

Between Emergence Health Network

And

Project Vida Health Center

This Care Coordination Agreement (the “Agreement”) serves to confirm the mutual understandings of Emergence Health Network (EHN), a Certified Clinical Behavioral Health Clinic (“CCBHC”), and Project Vida Health Center, a Federally Qualified Health Center, and referred to as “Partner Agency” in this agreement, to coordinate outpatient health care for those individuals who receive community-based mental health and substance use disorder services from Emergence Health Network, in accordance with the terms set forth below. The purpose of this Agreement is to set forth the parties’ understanding regarding their collaborative treatment planning and care coordination activities.

I. Provision of Services

1. Emergence health Network is committed to providing integrated and coordinated care across a spectrum of services in a manner that is both person-centered and family-centered, consistent with Section 2402(a) of the Patient Protection and Affordable Care Act (“ACA”), and with the requirements of the CCBHC demonstration, as implemented by the United States Department of Health and Human Services (“HHS”).
2. Partner agrees to make and/or accept referrals to/from EHN in order to assist individuals in accessing needed services and resources. If accepting referral, Partner agrees to notify EHN if at any time it becomes unable to accept new referrals. EHN agrees to notify Partner of the same.

II. Care Coordination Processes

1. The parties will collaborate to conduct treatment planning and care coordination activities in a manner that is person and family centered. Each party will provide and update information regarding available health care services, eligibility requirements and registration processes to the other to facilitate planning and informed consent for consumers.
2. EHN agrees to provide intake, initial screening, and appropriate treatment to consumers presenting at EHN for the provision of community-based mental health and substance use disorder services, and to establish and maintain records of such individuals’ healthcare.
3. If such screening and/or treatment indicate the need for Services, as determined in the sole discretion of EHN, consistent with requirements of privacy, confidentiality, and consumer preference and need, EHN will assist consumers and/or their families to obtain an appointment with Partner Agency. EHN will confirm with Partner Agency that the appointment was kept, consistent with the Referral and Communication Protocol described below in Section II.5.
4. EHN will ensure that consumers’ preferences and those of their families, as applicable, for shared information will be adequately documented in the applicable clinical records, consistent with the philosophy of person and family-centered care. EHN will make reasonable efforts to obtain necessary consent for release of information from consumers.

5. Emergence Health Network and Partner Agency agree to jointly develop a Care Coordination Protocol. Such protocol shall describe:

(i) how EHN tracks its consumers when admitted to and discharged from, Partner Agency; (ii) how EHN and Partner Agency will coordinate the transfer of medical records for Services received at Partner Agency (e.g., prescriptions) by consumers of EHN; (iii) the process for coordinating EHN's active follow-up after discharge; (iv) how timely and orderly referrals will be made; (v) how the Parties will track referred consumers and the Services they receive, including prescriptions, admission, and discharge, as applicable; (vi) consumer preferences and needs for care, including psychiatric or substance use crises, and to the extent possible and in accordance with consumer's expressed preferences with consumer's family or caregiver and other supports identified by consumer; (vii) any other expectations necessary to effectively manage care transitions; and (viii) as applicable, the sharing of medical notes and records regarding diagnosis, treatment, prescriptions, and specific recommendations for appropriate follow-up care.

6. Emergence Health Network will make and document reasonable attempts to contact all EHN consumers who are discharged from Partner Agency within twenty-four (24) hours of discharge. For all EHN consumers who present to the Partner Agency as a potential suicide risk, EHN will provide targeted case management services, emphasizing smooth transitions to and from emergency department care or psychiatric hospitalization. EHN will coordinate consent and follow-up services with the consumer within twenty-four (24) hours of discharge, which shall continue until the individual is linked to services or assessed to be no longer at risk.

7. Emergence Health Network and Partner Agency agree that, to the extent that consumers receive care from either Party pursuant to this Agreement, such individuals are considered consumers of the Party furnishing the services. Accordingly, each Party agrees to be solely responsible for billing and collecting all payments for such services from appropriate third-party payors, funding sources, and, as applicable, consumers, observing the Party's customary billing, collection, and discount/charity care policies.

III. Insurance and Liability

1. Emergence Health Network and Partner Agency represent and warrant that each Party and its clinicians providing Services hereunder are covered by a professional liability insurance policy (malpractice, errors, and omissions) that provides sufficient coverage against professional liabilities that may arise from acts or omissions in connection with or related to the Services that the Party furnishes under this Agreement. Both acknowledge that being deemed as covered under Federal Torts Claims Act is sufficient to meet this requirement.

2. Emergence Health Network and Partner Agency understand and agree that the provider of record of services is solely liable for all such services, and that the Party which is not the provider of record of the services will not be liable, whether by way of contribution or otherwise, for any damages incurred by consumers or arising from any acts or omissions in connection with or related to the provision of such Services.

IV. Assurance of Patient and Clinician Choice

1. Emergence Health Network and Partner Agency acknowledge and agree that all health and health-related professionals employed by or under contract with either EHN or Partner Agency retain sole and complete discretion, subject to any valid restriction(s) imposed by participation in a managed care

plan and consistent with Section II above, to refer consumers to any and all providers who best meet the medical needs of such consumers.

2. Emergence Health Network and Partner Agency acknowledge that all consumers have the freedom to choose (and/or request referral to) any provider of services, and EHN and Partner Agency will advise consumers of such right, subject to any valid restriction(s) imposed by participation in a managed care plan.

3. Emergence Health Network and Partner Agency acknowledge and agree that they have freely negotiated the terms of this Agreement and that neither Party has offered or received any inducement or other consideration in exchange for entering into this Agreement. Nothing in this Agreement requires, is intended to require, or provides payment or benefit of any kind (directly or indirectly) for the referral of individuals or business to either Party by the other Party, subject to Section II above.

4. Emergence Health Network and Partner Agency remain separate and independent entities. No provision of this Agreement is intended to create, nor shall any provision be deemed or construed to create, a relationship between the parties other than that of independent contractors. EHN and Partner Agency retain the authority to contract or affiliate with, or otherwise obtain services from, other parties, on either a limited or a general basis.

V. Term and Termination

1. The term of this Agreement shall commence on September 1, 2023, and continue until August 31, 2024 unless terminated at an earlier date in accordance with Section V. This Agreement will automatically renew for additional one (1) year terms unless written notice of intent not to renew is provided by one Party to the other Party no less than thirty (30) days prior to the expiration of the then-current Agreement.

2. This Agreement may be terminated, in whole or in part, at any time upon the mutual agreement of Emergence Health Network and Partner Agency.

3. Either Emergence Health Network or Partner Agency may terminate this Agreement without cause upon ninety (90) days prior written notice to the other Party.

4. This Agreement may be terminated for cause upon written notice by either EHN or Partner Agency. "Cause" shall include, but is not limited to: (a) Either party does not receive the funding to continue designated services under this Agreement; (b) Either party has cause to believe that termination of the Agreement is in the best interest of the health and safety of the persons served under this Agreement; or (c) The Partner Agency or its employees has its Texas license or certification suspended or revoked.

VI. Privacy and Confidentiality of Consumer Information

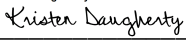
1. Emergence Health Network and Partner Agency will coordinate care, as set forth in this Agreement, in a manner that complies with privacy and confidentiality requirements, including but not limited to those of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) (Pub. L. No. 104-191, 110 Stat. 1936 (1996)), 42 CFR Part 2, and other federal and state laws, including privacy requirements specific to the care of minors.

2. Each Party agrees it shall request consumers' consent for disclosure of their health information, in accordance with state and federal law and regulations. Each Party shall follow consumers'


preferences for shared protected health information, consistent with the philosophy of person and family-related consent.

3. This Section VI shall survive termination of this Agreement.

Emergence Health Network

By: DocuSigned by:

C167C8463EE9495
Kristen Daugherty, CEO

Date: 9/1/2023 | 10:00 AM PDT

By: DocuSigned by:

A76559814408448
Bill Schlesinger

Date: 8/30/2023 | 11:27 AM MDT