

## Before Starting the CoC Application

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 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.
6. Questions marked with an asterisk (\*), which are mandatory and require a response.

## 1A. Continuum of Care (CoC) Identification

### **Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**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. Continuum of Care (CoC) Engagement

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.**

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	Yes	Yes
Hospital(s)	Yes	Yes
EMS/Crisis Response Team(s)	Yes	Yes
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Not Applicable	No
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Mental Illness Advocates	Yes	Yes
Substance Abuse Advocates	Yes	Yes

<b>Other:(limit 50 characters)</b>		
Higher Education/Vocational	Yes	Yes
Churches/Religious Organizations	Yes	Yes
Veteran Service Organizations	Yes	Yes

**1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 2,000 characters)**

The CoC has created specific strategies to ensure that organizations & persons having an interest in addressing homelessness are able to voice their opinions on how to prevent & end homelessness. The CoC includes a wide variety of individuals/organizations who weigh in on the issues of homelessness. Through ongoing planning process, we rely on local expertise from nonprofits that oversee/manage homeless programs, along with homeless/formerly homeless people who have lived experience. Collaborative efforts include a Strategic Planning workshop attended by providers, civic leaders & community at large as well as ongoing sessions convened for training purposes & discussion regarding best practices, procedures and barriers. We also solicit participation from our local PHAs & law enforcement in all committees. The Coalition coordinates monthly general membership meetings which are advertised on the agency’s website & announced through the list serve of 450+ email addresses. These 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. The City of El Paso is the ESG Recipient and a member of the CoC and frequently contacts the Coalition regarding feedback from City Council Representatives and their constituents. Similarly, the County of El Paso is the Coordinated Entry operator, a member of the CoC, & information is communicated to the Coalition from County Commissioners & their constituents. CoC Board meetings have had 5 open meetings this year & are open to the public to give input on written standards, SPM report, HUD Application review, etc. Meetings are open & announced to a diverse group of individuals & organizations who have a full range of knowledge who are part of the CoC list serve. As required by CoC Program Interim Rule, the CoC Board has a designated seat for a member who is currently experiencing or has experienced homelessness.

**1B-2.Open Invitation for New Members. Applicants must describe:  
 (1) the invitation process;  
 (2) how the CoC communicates the invitation process to solicit new members;  
 (3) how often the CoC solicits new members; and  
 (4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.  
 (limit 2,000 characters)**

1) The Coalition posts an open invitation on its website: Membership in the El Paso Coalition for the Homeless is open to all who care about the issue of

homelessness in our community. Representatives of social and governmental agencies, religious congregations, & concerned citizens are encouraged to attend the monthly meetings for the purpose of education, networking, & discussion of important issues related to homelessness. In addition, each year an email is distributed to the Coalition's listserv of 450+ email addresses (funded and non-funded agencies, community organizations, businesses, local governments, developers) describing the work of the CoC including the Coalition's role as coordinating entity for numerous agencies that provide housing, services & support to the homeless in our community, inviting entities to join the initiative & support the Coalition with all of our partners to address federal strategic initiatives to prevent & end homelessness. Interested entities are directed to the Coalition's website to complete a Membership Application or to contact the Coalition directly for an invoice to renew their membership.

2) Invitations are communicated/announced at county-wide community task force meetings, Coalition meetings, business districts, Lions Club meetings, regional health fairs, emails via list serves, website and through many networking opportunities. Coalition posts on its website the meeting schedule for the year, including locations.

3) The CoC solicits new members throughout the year, openly accepting membership applications at meetings, email and website. The Coalition also distributes notices of meetings each month with the date, time, location and meeting agenda.

4) Homeless/formerly homeless are encouraged to join the CoC during events such as Point in Time, homeless advisory meetings (all homeless-local mental health authority), etc. CoC will continue to encourage those who are homeless or formerly homeless to join the CoC.

**1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals. (limit 2,000 characters)**

The CoC actively notifies and encourages new proposals/applicants who are not currently funded. Communication via: email to CoC membership with attachments, posting on CoC website, social media, informational about the CoC process. The CoC has an ongoing process to encourage new entities to apply. The CoC is the City's contact for any potential applicant. The CoC ensures training/education are provided to help prospects become proficient with all funding regulations. On July 16, 2018, the CoC began notifying the public by releasing a local Request for Proposal for DV Bonus and Bonus projects. The RFP was sent to 450+ CoC members and non-members. The Coalition announced on July 18, 2018 that a public informational meeting would be held for those entities interested in submitting a new project proposal or a proposal for a DV Bonus or Bonus project. On July 23, 2018, the public informational meeting was held to answer questions and provide information for potential applicants, new and renewal. Handouts highlighting project criteria as well as the competition timeline, as posted in the RFP, were distributed to attendees.

## 1C. Continuum of Care (CoC) Coordination

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.**

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
Quasi-governmental agency	Yes
Local Governments	Yes

**1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:**  
**(1) consulted with ESG Program recipients in planning and allocating ESG funds; and**  
**(2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.**  
**(limit 2,000 characters)**

The CoC consults with the City ESG recipients:

1) On July 23 and July 26, 2018, the CoC consulted with the City of El Paso as ESG recipient in planning and allocating ESG Funds. Annually, the City of El Paso, Entitlement City, distributes a comprehensive survey to their award

recipients for feedback and input. There were no recommended changes made to the previous year's allocation of ESG Program funds. The Policies and Procedures covering the 2018-2019 funding year, which incorporated the allocation of ESG funds, were distributed on August 16, 2018 for approval by City Council during a special meeting on August 20, 2018. The CoC also consults with the Texas Dept. who is a recipient of ESG. As a result, the CoC administers the application process & a funding decision is made at a local level.

2) The CoC communicates individual ESG sub-recipient performance to the City of El Paso as ESG recipient on a quarterly, semi-annual and annual basis. Annually, the CoC provides actual performance by ESG component compared to local benchmarks which is uploaded to IDIS for CAPER reporting. The City of El Paso has an active MOU with the CoC regarding the planning & allocation of ESG funds and performance monitoring. All ESG recipients have language in their contract referencing this monitoring as well as a copy of the benchmarks established annually by the Performance and Benchmarks committee and approved by the CoC Board. The Coalition serves as ESG Coordinator on behalf of the Texas Department of Housing and Community Affairs, the state ESG Entitlement entity, for the allocation of ESG funding. ESG awards are made by the CoC Board, therefore, all performance reporting for state-funded ESG subrecipients is provided to the CoC Board following the same timeline as described above.

**1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?** Yes to both

**1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)?** Yes

**1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:**

**(1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and**

**(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.  
(limit 2,000 characters)**

CoC coordinates with our local Domestic Violence shelter for the safety needs needed by victims and survivors of DV 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 prioritizes safety, confidential ES and 24 hour hotline. The Transfer Plan also requires all housing providers to be trauma-informed and to troubleshoot other possible options to resolve in a safe way.

2) Coordinated Entry Policies ensure survivors have access to all resources. Coordinated Entry Staff (CES) staff will receive ongoing training on safety protocols, how to identify participants fleeing or attempting to flee DV or sexual assault. CE refers DV victims to DV center hotline. The shelter assists victims to navigate the criminal justice & social service systems to meet their needs & maintain their safety, based on choice. DV Provider operates the only safe and confidential shelter for victims and sexual assault (86 beds) & a TH shelter with 15 beds. As part of the CoC, the shelter provides consistent guidance to the CoC & community on issues surrounding victims & provides needed services. CoC coordinates housing services w/shelters through referral & collaboration at the DV Center to ensure victims are given safe options & safety planning is received. Safety & security are maintained through safety planning & following all applicable laws & statutes guiding confidentiality & disclosure of victims. CoC ensures DV training so non-victim service providers are knowledgeable about safety precautions & resources to assist victims.

**1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)**

CoC provides regular training & support to the Coordinated Entry administrator to ensure that staff have a thorough understanding of DV providers/projects, dynamics of domestic violence privacy and confidentiality. Training ensures that assessments are consistent, & all protocols are followed so that all clients are assessed equally, with an emphasis on minimizing trauma for these clients. CoC has consistently monitored data, i.e PIT, HIC, APR, CAPER, to assess the needs of the community when analyzing gaps in services. Based on 2018 PIT data that 52.8% of homeless families & 11.7% of individual's experience DV, CoC continues to prioritize this subpopulation for available funding opportunities. To ensure safety for victims, protocols are established for CE to bypass regular service providers when appropriate & direct to a DV hotline. Otherwise, specific questions facilitate alternate interventions, relying on the guidance/expertise of DV providers in serving DV in a true client-centered and trauma-informed approach based on what they identify as their immediate need.

**1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)**

The CoC HMIS identifies victims/survivors referred directly to shelters who otherwise could not be accommodated by dedicated programs due to lack of beds. The CoC provides on-going training to CE staff on safety planning, addressing physical and emotional safety, privacy/confidentiality, legal protection, cycle of violence, culturally-relevant services, emergency needs of participants, trauma-informed care and practices. CE Policies mandate that CE

lead provide updated information on programs best equipped to serve households experiencing DV based on location, program model & linkages to other supportive services and that survivors are safely referred through a 'warm hand off'. Data from the 2018 PIT was utilized in analyzing data and found that families were more likely to have experienced domestic violence at a rate of 52.8% versus individuals at 11.7%. The CoC has consistently monitored data, i.e. PIT, HIC, APR, CAPER to assess the needs of the community when analyzing gaps in services. The CoC Board will continue to prioritize this population for available funding. A large portion of data is collected from the DV ES, a state-wide DV comparable database. The CoC will begin to utilize data from law enforcement and HMIS to better understand the magnitude of DV, dating violence, sexual assault and stalking.

**1C-4. DV Bonus Projects. Is your CoC Yes  
 applying for DV Bonus Projects?**

**1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.**

SSO Coordinated Entry	<input checked="" type="checkbox"/>
RRH	<input checked="" type="checkbox"/>
Joint TH/RRH	<input type="checkbox"/>

**1C-4b. Applicants must describe:**

- (1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;**
- (2) the data source the CoC used for the calculations; and**
- (3) how the CoC collected the data.**  
**(limit 2,000 characters)**

- 1) On any given day, the CoC is currently serving 137 unique households, representing 17% of the total homeless population as recorded in the 2018 PIT.
- 2) Data sources from DV provider data comparable database and HMIS (client records and Coordinated Entry).
- 3) Data collected from victims who self-referred to CE Intake Process or who were advised by the DV provider about HUD funded programs. Data was also collected by reviewing DV provider data from their comparable database and HMIS data from non DV providers who are serving victims/survivors.

**1C-4c. Applicants must describe:**

- (1) how many domestic violence survivors need housing or services in the CoC's geographic area;**
- (2) data source the CoC used for the calculations; and**
- (3) how the CoC collected the data.**  
**(limit 2,000 characters)**

- 1) According to DV database, more than 4,500 clients seek services or housing each year of which approximately 1,000 seek housing. Through HMIS, the CoC

serves approximately 1,350 households. Those households are in ES and TH programs waiting for RRH availability.

2) Data comes from multiple sources including CES, the annual reports from the DV provider and households reporting domestic violence as the cause of their homelessness in HMIS.

3) Data collected from victims who self-referred to CE Intake Process or who were advised by the DV provider about HUD funded programs. Data was also collected by reviewing DV provider data from their comparable database and HMIS data from non DV providers who are serving victims/survivors.

**1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:**

- (1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;**
  - (2) quantify the unmet need for housing and services for DV survivors;**
  - (3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and**
  - (4) describe how the CoC determined the unmet need for housing and services for DV survivors.**
- (limit 3,000 characters)**

1) According to data collected, there are 137 household on any given day for the entire geographic area. There is a substantial lack of RRH and because the majority of our RRH programs focus on DedicatedPLUS and Chronically Homeless, the CoC has evaluated population data and recognized the need for a RRH program that ties housing directly to DV services.

2) According to the CoC sole DV provider report, they see approximately 4,500 clients a year, of which 900-1000 temporarily reside in the ES. The rate of housing DV survivors is 78% are entered into a PH intervention, however they are not dedicated to DV survivors. Utilizing the various sources of data allows the CoC to determine that a significant percentage of those needing services would remain homeless, due to the lack of dedicated DV PH interventions. These statistics demonstrate that there is a need for Rapid ReHousing for approximately 100 DV households.

3) DV provider presented deidentified data for use in this application as well as their data report of services and unmet needs.

4) The CoC HMIS provided deidentified housing data for those who reported their domestic violence status during intake and enrollment. Additionally, along with 2018 PIT data and reports obtained from HMIS and the DV providers comparable system, data collected from those fleeing domestic violence. The majority of the DV Bonus allocation is directed to a proposed Rapid ReHousing program. When calculating unmet need, the CoC utilizes PIT data and data/expertise from our DV provider.

**1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors.**  
**(limit 2,000 characters)**

The CoC expects that if funded, the RRH project will increase the CoCs capacity to secure an additional 16 fair market rental housing opportunities, which would otherwise not be available, assisting the CoC in closing the gap of the unmet need. The proposed project will operate as a mid-term RRH project;

providing rental assistance anywhere between 4-24 months. The proposed project will operate as a housing first, low barrier program which will reduce the length of time it will take to connect DV survivors to housing.

**1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:**

- (1) rate of housing placement of DV survivors;**
  - (2) rate of housing retention of DV survivors;**
  - (3) improvements in safety of DV survivors; and**
  - (4) how the project applicant addresses multiple barriers faced by DV survivors.**
- (limit 4,000 characters)**

- 1) The rate of housing DV survivors is 57% are entered into a PH intervention, 11% self-resolve (find PH on own), 8% return to abuser, 21% remain homeless, 3% unknown. The DV provider was able to refer clients to non-DV rapid rehousing placements in the community.
- 2) Of the 57% who are housed, 94% are able to remain stably housed for a minimum of 8.5 months.
- 3) The only DV provider in our CoC operates the only ES and Joint TH RRH program that serve exclusively DV. The staff of the DV provider will provide various programs, services, and resources through their Family Resource Center. The overarching goal is to help survivors maintain housing sustainability by attaining the skills and knowledge to support financial independence. The proposed RRH project includes comprehensive case management to assist in furthering education and restoring lost documentation. As the exclusive DV provider within the CoC, the applicant has protocols in place to assure the unique safety needs of each household. The DV Bonus will ensure that safety will be tailored for each household receiving services.
- 4) The barriers that DV survivors experience are unique, therefore, DV provider staff will help survivors choose placements that best fit their needs and meet their safety requirements. Additionally, DV Staff will provide trauma informed care to address issues identified by professional staff for both adults and children. Proposed project staff will provide case management in the form of referrals, benefits enrollment, budgeting, financial education, education and GED, and other employment supports.

**1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:**

- (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;**
- (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and**
- (3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer
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	homelessness at entry		needing intensive supportive services, e.g. move on?
Housing Authority of the City of El Paso	15.00%	Yes-Public Housing	No
County of El Paso Housing Authority	10.00%	Yes-HCV	No

**If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.**

**1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)**

The CoC continues to take active measures to educate The City of El Paso PHA on homelessness in El Paso and the need for PH options outside of CoC funded PH programs. As a result the local PHA has adopted a homeless preference for public housing. Currently, discussions are taking place to expand the preference to include HCV. The County of El Paso PHA has partnered with the Coalition for strategic planning efforts and reviewing their policies to possibly have a homeless preference.

**1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)?** No

**1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness. (limit 2,000 characters)**

Recognizing the lack of services for LGBTQI, in 2016, providers within the CoC have prioritized and created services addressing the population, including a TH program, ES, day resource center and support groups. The CoC has provided annual training on LGBTQI issues/strengths/needs to ensure community is not just tolerant, but inclusive. The CoC has developed an outreach team that focuses on finding unsheltered youth. Outreach team has lived experience in homelessness and LGBTQI. The CoC also facilitates discussions at the General Membership meetings between the CoC and shelters. In addition, the CoC are expected to adhere to Fair and Equal Housing policies. Fair Housing and Equal Access are incorporated into all training, whether it is RRH Training,

PSH Training, Coordinated Entry Training, etc. Over the past 2 years, implementation of these anti-discrimination policies have been noticeable with the increased housing of transgendered adults and same sex couples. El Paso Center for Children who serves the mentioned population is one of the primary voices in the CoC planning processes.

**1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.**

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the 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 the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

**1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.**

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
Other:(limit 50 characters)	
CIT Implementing Diversion Programs	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

**1C-8. Centralized or Coordinated Assessment System. Applicants must:**  
 (1) demonstrate the coordinated entry system covers the entire CoC geographic area;  
 (2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;  
 (3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and

**(4) attach CoC's standard assessment tool.  
(limit 2,000 characters)**

- 1) El Paso County, as the operator of Coordinated Entry System (CES), ensures 100% coverage of the CoC geographic area, El Paso County, through guiding principles within their governing jurisdiction. The CoC's entire geographic area is accessible to CE processes either through the designated Coordinated Entry centers, the 2-1-1 community information and referral hotline, one of the many shelter and program participants, or a street outreach team.
- 2) El Paso County has partnered with the local 2-1-1 and will serve as the entry point to Coordinated Entry. Our local Homeless Outreach Consortium will work closely with Coordinated Entry to ensure those living in encampments receive on-going outreach and support; a population that are resistant to services of any kind. The Homeless Outreach Consortium will also be working closely with El Paso Police Department Crisis Intervention Team again to reach out to those who are highly resistant to receiving assistance.
- 3) The El Paso County Coordinated Entry System links to street outreach efforts so that people sleeping on the streets are prioritized for assistance in the same manner as any other person assessed through the Coordinated Entry process. Street outreach teams are considered an access point for the CE process, and they will operate as such. They will seek to engage persons who may be served through CE but who are not currently seeking assistance, or are unable to seek assistance.
- 4) Coordinated Entry System utilizes VI-SPDAT. There are a total of three assessment tools, one for families, one for individuals, one for youth.

# 1D. Continuum of Care (CoC) Discharge Planning

## Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).**

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

**1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).**

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

## 1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

### Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:**

- (1) objective criteria;**
- (2) at least one factor related to achieving positive housing outcomes;**
- (3) a specific method for evaluating projects submitted by victim services providers; and**
- (4) attach evidence that supports the process selected.**

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	No

**1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:**

- (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and**
- (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.**

**(limit 2,000 characters)**

1) The CoC Board utilized HUDs Scoring Tool for the 2nd year. The tool places an increased emphasis on serving households who are high acuity. The CoC Board places emphasis on chronically homeless households, households who have no income, households with criminal histories, households with severe mental health, physical disabilities and vulnerable populations such as DV Victims, Veterans and Youth. The CoCs main priority is reducing the number of chronically homeless in our community.

2) The CoC Independent Review Team (IRT) focused on the barriers mention in #1 as well as those households who were living on the streets. The scoring tool utilized the last two years gave additional points to programs who were serving a higher number of CH. Evaluation of all project proposals included Housing First:

- a. Rapid placement regardless of barriers
- b. Project conducting outreach from the streets rather than ES
- c. High acuity – Additional points for multiple disabilities

Over the past several years, the CoC was able to make strides with ALL CoC funded projects, so that they were prioritizing chronically homeless families and

individuals. The scoring tool utilized the last two years gave additional points to programs who were serving a higher number of CH. Applicants were scored on utilization rates, funding utilization, length of stay in PH, commitment to Housing First principles, and participation in coordinated entry. Over the years we have been able to increase beds dedicated to CH in existing programs. All new PH programs are focusing on the DV, CH population and/or DedicatedPLUS and were prioritized in Tier 1.

- 1E-3. Public Postings. Applicants must indicate how the CoC made public:**
- (1) objective ranking and selection process the CoC used for all projects (new and renewal);**
  - (2) CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and**
  - (3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.**

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	<input checked="" type="checkbox"/>	CoC or other Website	<input checked="" type="checkbox"/>
Email	<input checked="" type="checkbox"/>	Email	<input checked="" type="checkbox"/>
Mail	<input type="checkbox"/>	Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>	Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>	Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>	Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

**1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between the FY 2014 and FY 2018 CoC Program Competitions.**

**Reallocation:** Yes

**1E-5. Local CoC Competition. Applicants must indicate whether the CoC:**  
**(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline—attachment required;**  
**(2) rejected or reduced project application(s)—attachment required; and**  
**(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline—attachment required. :**

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

## **2A. Homeless Management Information System (HMIS) Implementation**

**Intructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required.** Yes

**2A-1a. Applicants must:** Page 3 & 4  
**(1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and**  
**(2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).**

**2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required.** Yes

**2A-3. HMIS Vender. What is the name of the HMIS software vendor?** Clarity Human Services

**2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area.** Single CoC

**2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:**  
**(1) total number of beds in 2018 HIC;**  
**(2) total beds dedicated for DV in the 2018 HIC; and**

**(3) total number of beds in HMIS.**

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	880	86	514	64.74%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	244	15	183	79.91%
Rapid Re-Housing (RRH) beds	189	0	189	100.00%
Permanent Supportive Housing (PSH) beds	79	0	79	100.00%
Other Permanent Housing (OPH) beds	124	0	0	0.00%

**2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months. (limit 2,000 characters)**

In a commitment letter dated August 15, 2018, the Opportunity Center for the Homeless (OC) agreed to be fully compliant with respect to all HMIS data on all agency programs effective April 1, 2019. Compliance with HMIS data means that all local HMIS Participation Standards will be met including having an executed Participation Agreement on file with the HMIS Lead, fulfilling Financial Requirements of the HMIS Lead if any, conforming to Data Timeliness (<=5 days after client enters or exits a program), Data Completeness and Accuracy (entering complete data per the current HMIS Data Standards as published by HUD) and having more than two Trained Users. The OC has a multitude of programs from ES, SH, TLC and SROs that currently do not participate in the geographical HMIS. In June 2015 and after multiple efforts beginning in June 2012, HUD TA agreed to serve as a mediator to assist the El Paso Continuum of Care in obtaining complete HMIS data from the OC. In consultation with the HMIS vendor for the El Paso CoC and the vendor for the OC's system, TA developed various options for consideration. A program to upload data has been successfully tested or dual data entry can be performed. The Coalition will begin discussions regarding the integration process preferred in order to ensure compliance by the April 1, 2019 data. The HMIS Commitment Letter resolves a six year gap in significant data missing from the El Paso CoC HMIS system.

**2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept? 8**

**2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/30/2018**

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

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).** 01/25/2018

**2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).** 04/30/2018

## 2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC's sheltered PIT count results.  
(limit 2,000 characters)**

There was no change to the sheltered PIT methodology.

**2C-2. Did your CoC change its provider coverage in the 2018 sheltered count?** No

**2C-2a. If "Yes" was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.**

Beds Added:	0
Beds Removed:	0
Total:	0

**2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC's 2018 sheltered PIT count?** No

**2C-3a. If "Yes" was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.**

Beds Added:	0
Beds Removed:	0
Total:	0

**2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct an unsheltered PIT count in 2018, select Not Applicable.** Not Applicable

**2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?** Yes

**2C-5a. If “Yes” was selected for question 2C-5., applicants must describe: (1) how stakeholders serving youth experiencing homelessness were engaged during the planning process; (2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and (3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count. (limit 2,000 characters)**

- 1) Two agencies who focus on serving youth reviewed the PIT questions to ensure engagement from those youth who are sheltered. The survey questions based on their youth specific feed back.
- 2) The 2018 year was shelter count only.
- 3) The 2018 year was shelter count only.

**2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count: (1) individuals and families experiencing chronic homelessness; (2) families with children experiencing homelessness; and (3) Veterans experiencing homelessness. (limit 2,000 characters)**

For the past 10 years, the PIT, Sheltered and Unsheltered, is a thorough process identifying those who are experiencing homelessness and chronic homelessness. The 2018 PIT was sheltered only. All shelter case managers are thoroughly trained on 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 HMIS. 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.

In addition to demographic questions, the Coalition requests that each person experiencing homelessness on the date of the PIT complete a 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 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.

## 3A. Continuum of Care (CoC) System Performance

### Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

#### 3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.	1,858
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#### 3A-1a. Applicants must:

- (1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;
- (2) describe the CoC's strategy 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 the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)

- 1) Risk factors were identified for individuals/families who have become homeless for the first time utilizing HMIS. Factors identified, include young mothers with children less than 3 years of age, complete families who were less than 3 months in prior living situation; and living with family/friends.
- 2) Strategies that the CoC uses to address individuals/families at risk of becoming homeless are: programs that provide financial management, credit repair, childcare, utility & rental assistance services (homeless prevention) to help at risk households maintain their housing. Local Legal Aid provides free legal services to assist households who are illegally evicted and may become homeless. The CoC holds regular committee meetings with agencies administering prevention/rapid rehousing funds to discuss barriers to services, such as "timing out" of welfare benefits.
- 3) The Coalition is responsible for ensuring strategies have been established/implemented to meet this measure of Reducing the Number of First-Time Homeless.

#### 3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:

- (1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);
- (2) describe the CoC's strategy to reduce the length-of-time individuals and persons in families remain homeless;
- (3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
- (4) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time

**individuals and families remain homeless.  
 (limit 2,000 characters)**

- 1) Length of Time Homeless Persons in ES, SH and TH = 89 days
- 2) Strategies include: establishing community standards for average length of stay for all ES & TH programs, promoting best practice models that decrease length of stay and increase stability in housing/successful exit to PH, increasing midterm RRH for households and addressing the lack of affordable housing and insufficient income as a part of our local Strategic Plan. CES Policies requires prioritization be given to households with the longest lengths of homelessness. Specific training, developed in collaboration with the ESG entitlement entity, is conducted at least annually to discuss barriers and review options available within the community. Efforts to engage landlords to lower barriers and increase affordable housing options is ongoing.
- 3) On a quarterly, semiannual and annual basis, utilizing HMIS data, the CoC monitors the average length of program stay and evaluates households with longest length of stay to determine their recurring factors. In addition to monitoring, we also provide needed tools and best practices to ensure length of stay is decreased. CoC is working with ES, RRH & TH programs to ensure they are connecting participants with employment opportunities & mainstream benefits. The El Paso CoC uses By Name list tools to track data regarding length of homelessness for specific populations including veterans, youth and chronically homeless. CES Policies requires prioritization be given to households with the longest lengths of homelessness.
- 4) The Coalition along with the Performance and Benchmarks Committee is responsible for ensuring strategies have been established/implemented to meet this measure.

**3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:**

- (1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and**
- (2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.**

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	58%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	95%

**3A-3a. Applicants must:**

- (1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and**
- (2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.**

**(limit 2,000 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 CES is fully functional in identifying, 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 and is also working with several agencies regarding the use of Master Leases to facilitate rapid movement into housing.
- 2) The CoC has been focusing with new local PH interventions, to increase home based case managers to ensure that households in PH interventions receive case management while in the program. The CoC is also focusing on improving access to healthcare, mental healthcare, mainstream benefits, etc. The Coalition is responsible for ensuring strategies have been established/implemented to meet this measure.

**3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.**

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	6%

**3A-4a. Applicants must:**

- (1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;**
- (2) describe the CoC’s strategy to reduce the rate of additional returns to homelessness; and**
- (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the rate individuals and persons in families returns to homelessness. (limit 2,000 characters)**

- 1) HMIS data is analyzed to identify characteristics of those households experiencing multiple bouts of homelessness in our community. The CoC identified common factors of households (families/individuals) by analyzing HMIS data. Data revealed that 37% who return within one year is someone likely to be chronically homeless (13%), individual male, 45+ years, has a disability (mental, alcohol abuse). Based on data, the CoC will be creating a High User Committee by year end. This Committee, comprised of reps from ES and TH programs, mental health providers, CE staff, PH programs, will focus on identifying those who are returning to homelessness and target them for services that may have not been offered.
- 2) To reduce returns to homelessness, the CoC has implemented the following strategies: Coordinated Entry using VISPDAT to identify vulnerabilities of those experiencing homelessness, referral into PH program based on score, programs providing PSH must prioritize beds for those households with longest histories of homelessness and/or most episodes of homelessness, and provide

best practices training on case management. The CoC feels that case management is crucial in ensuring that households are able to remain stably housed. Agencies providing RRH or TH assistance must make accommodations to provide at least 6 months of follow-up services to ensure households have transitioned & remain stable in PH. This year, the CoC is implementing a total of 29 additional PSH beds (families and youth).  
3) The Coalition is responsible for ensuring strategies have been established/implemented to meet this measure.

**3A-5. Job and Income Growth. Applicants must:**

- (1) describe the CoC’s strategy to increase access to employment and non-employment cash sources;**
  - (2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**
  - (3) provide the organization name or position title that is responsible for overseeing the CoC’s strategy to increase job and income growth from employment.**
- (limit 2,000 characters)**

1) The CoC continues to ensure program participants are connected with mainstream resources of non-employment & employment income for which they are eligible. CoC has developed a process in identifying & implementing best practices, including supportive services for employment & client tailored wrap around services. This process helps the household & 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 & training leading to employment. Another key strategy implemented 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 cash assistance they are entitled to. A SOAR Steering committee has been established as an ongoing support system to assist those completing applications & discuss barriers and solutions encountered. This effort will continue indefinitely. The CoC has also organized partnerships between employment vendors for training & education. Learn Invest Focus Train (LIFT) is a partnership with TX Workforce, which focuses on training the parent(s) entering the workforce. TX Workforce routinely meets with homeless clients to develop plans on obtaining employment.  
2) The CoC has a partnership with TX Department of Aging and Disability in working with head of households and individuals in gaining employment while receiving SSI/SSDI. The VAs Compensated Work Therapy works with homeless veterans to gain employment. The TX Workforce has a specialized program that targets those who are unemployed, provides assistance and necessary tools to obtain employment, i.e. transportation, equipment, uniforms, etc.  
3) The Coalition is responsible for ensuring strategies have been established/implemented to meet this measure.

**3A-6. System Performance Measures Data 06/01/2018**  
**Submission in HDX. Applicants must enter**  
**the date the CoC submitted the System**

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**Performance Measures data in HDX, which  
included the data quality section for FY 2017  
(mm/dd/yyyy)**

## 3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

### Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:**
- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and**
  - (2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.**

Total number of beds dedicated as DedicatedPLUS	30
Total number of beds dedicated to individuals and families experiencing chronic homelessness	155
<b>Total</b>	<b>185</b>

**3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required.** Yes

**3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.**

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input type="checkbox"/>
Unsheltered homelessness	<input type="checkbox"/>
Criminal History	<input type="checkbox"/>
Bad credit or rental history	<input type="checkbox"/>
Head of Household with Mental/Physical Disability	<input type="checkbox"/>

**3B-2.2. Applicants must:**

- (1) describe the CoC’s current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;**
  - (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and**
  - (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.**
- (limit 2,000 characters)**

1) The CoC recognizes that the Coordinated Entry System is the key to rapidly rehousing households. In alignment with the HEARTH Act, the goal is to house families with children within 30 days of becoming homeless. From 2017 to 2018 PIT, we have seen a 24% decrease, a result of adding substantial new RRH capacity. When a household has been identified for a PH option and a referral made, the household is placed in a temporary shelter. Within 48 hours, the PH provider quickly identifies the household and processes their entry into the available PH program. The CoC has developed toolkits (cooperative landlords, standardized forms, available housing options) that expedite this process. As the CoC increases RRH and PSH inventory, it will give households viable PH options. Additional efforts in the community include shortening length of stays in transitional housing programs.

2) CoC members, along with Coalition staff, have attended the VA-sponsored Rapid Rehousing Institute and have coordinated quarterly training sessions for RRH providers to review best practices, barriers to success, and peer to peer sharing. The CoC provides continual training for shelter support staff, to ensure that households are exiting to PH.

3) The Coalition is responsible for ensuring strategies have been established/implemented to meet this measure.

**3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.**

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	<input checked="" type="checkbox"/>
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	<input checked="" type="checkbox"/>
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	<input checked="" type="checkbox"/>

**3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied homeless youth includes the following:**

Human trafficking and other forms of exploitation	Yes
LGBT youth homelessness	Yes
Exits from foster care into homelessness	Yes
Family reunification and community engagement	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

**3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.**

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input checked="" type="checkbox"/>

**3B-2.6. Applicants must describe the CoC's strategy to increase:  
 (1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and  
 (2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.  
 (limit 3,000 characters)**

- 1) Local PHA applied for Family Unification vouchers for youth in collaboration with the Coalition. One of the local PHAs were recently awarded. The CoC has implemented a strategy to address ending youth homelessness, 'By Name' List. This process has improved the ability to identify all homeless youth sheltered and unsheltered. Street outreach programs assisting El Paso youth access homeless services, PH, shelters, building awareness of homeless youth issues in the community.
- 2) CE effectively utilizes youth adapted VI-SPDAT to link youth to housing/services. Over the past year, the CoC has implemented an ES for male homeless youth, RRH for youth, TH program for LGBTQ youth, PSH for youth and has expanded HHSP funded ES capacity. The CoC has developed and integrated youth voices/input to implement effective services for youth.

**3B-2.6a. Applicants must:**

**(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;**

**(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and**

**(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.**

**(limit 3,000 characters)**

1) In the planning efforts to apply for the HUD Youth Demonstration Grant Program, a Youth Committee was developed. Although the grant was not awarded, this Youth Committee continues to voice and provide input to implement effective services for youth. The CoC has made substantial progress with regard to securing funding opportunities from ESG and CoC, an emergency shelter, RRH and PSH programs were developed and funded specifically targeting youth to include unsheltered youth. The CoC recently created a new outreach team that focuses on unsheltered youth. Past years PIT data shows that unsheltered youth is almost nonexistent, less than 3%. This new outreach team has been able to expand outreach hours, i.e. Friday evening, 7pm-11pm, resulting in an increase in the identification of unsheltered youth from the PIT count. The CoC will closely gauge the expanded outreach hours and will plan to implement a youth count. Over the past year, the CoC implemented a new ES for Homeless Youth males, rapid rehousing (mid-term) for youth, street outreach focused on unsheltered youth and a TH program for LGBT youth. All programs mentioned use CES to effectively utilize the Youth VI-SPDAT to link youth to housing/service solutions to include those fleeing sex trafficking and violence.

2) With new programs on-line (ES, RRH, PSH), the CoC will measure bed utilization of new ES for youth, the number of youth exiting to new RRH and PSH beds. While youth are in RRH and PSH program, data will be evaluated closely to see factors that contribute towards stability, i.e. employment income, disability income, mental health services, substance abuse services, etc. These measures will allow the CoC to determine the effectiveness of this strategy.

3) The 'By Name' List utilized for veterans has been such an effective way of addressing veteran homelessness that the process was adopted for addressing youth homelessness. The By 'Name List', along with CES and HMIS data, is used to measure effectiveness and success of strategies.

**3B-2.7. Collaboration—Education Services. Applicants must describe how the CoC collaborates with:**

**(1) youth education providers;**

**(2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);**

**(3) school districts; and**

**(4) the formal partnerships with (1) through (3) above.**

**(limit 2,000 characters)**

1) The CoC has formal partnerships with Region 19, Local Education Service Center and with McKinney-Vento school district homeless liaisons who serve on the Coalition Board. At quarterly meetings liaisons provide information regarding the needs of homeless children.

2) The CoC works closely with the McKinney-Vento State Education Agency (SEA), Texas Education Agency who has a subcontract with the Texas

Homeless Education Office. At bi annual meetings with the Texas Homeless Education Office (THEO) and all area school Districts mentioned in #3 below, discuss are the rights and privileges of homeless children. THEO tailors training to the unique needs of our geographic area, a county that borders with Mexico.

3) The CoC with El Paso ISD, Ysleta ISD, Socorro ISD, Canutillo ISD, Clint ISD, Anthony ISD, Fabens ISD meets quarterly to address the rights of homeless students in their school districts, transportation issues, communication with shelters to ensure that children are connected to a liaison, coordination between shelters and homeless liaisons to ensure timeliness.

4) The CoC has formal partnerships with Region 19 and all homeless liaisons. CoC ensures that McKinney-Vento educational services are being met, programs are actively engaging with schools, & the CoC's policies include educational needs of youth, ensuring homeless children in CoC & ESG programs are enrolled in school & connected to services in collaboration with School District Homeless Liaisons. Providers who work with families with children or unaccompanied youth attend State & local education meetings. Provider staff at family programs 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. The CoC provides quarterly training on HUD funded programs & eligibility.

**3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services. (limit 2,000 characters)**

Providers who work with families with children or unaccompanied youth attend State & local education meetings. Provider staff at family programs 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 and Transitional Housing programs have policy/procedures, publically 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 and take advantage of their rights under McKinney-Vento, to include, uniforms, transportation, school supplies and after school tutoring which is provided by Region 19, local Education Service Center. The CoC, SEA and LEA ensure that shelter staff are trained regularly on assuring that families seek out and receive services in a timely manner. The homeless liaisons and shelter staff work to maximize benefits for the homeless children. Quarterly meetings are held to discuss issues/barriers that are faced when dealing with school aged homeless children. The CoC provides quarterly training on HUD funded programs & eligibility.

**3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No". Applicants must select "Yes" or "No", from the list below, if the CoC has written formal agreements, MOU/MOA's or partnerships with providers of early childhood services and support.**

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	Yes	No

Head Start	Yes	No
Early Head Start	Yes	No
Child Care and Development Fund	Yes	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	Yes	No
Birth to 3 years	Yes	Yes
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		
Local Education Service Center (Region 19)	Yes	Yes

**3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD). (limit 2,000 characters)**

The CoC works closely with the SSVF grantee and Coordinated Entry to address Veteran Homelessness. Coordinated Entry is the primary tool used to identify and assess Homeless Veterans. Once identified they are incorporated into the 'By Name' List, which includes those who are living on the streets, ES, and TH to include GPD; prioritized per the Order of Priority adopted by the CoC. The 'By Name' list is updated weekly so there is constant monitoring of veterans becoming homeless and receiving housing. Bi weekly, meetings are held to review the 'By Name' list and ensure that veterans are being offered housing interventions and that the Order of Priority is followed. Veterans with a high acuity are then prioritized (CH). The VA & SSVF coordinate and outreach to Veterans to determine eligibility, i.e. discharge status, and offer available PH interventions. Once eligibility is determined, the Veteran is referred to VASH, SSVF, GPD (limited circumstances), PSH, or RRH. This collaborated effort has assisted the CES to effectively work with PH interventions, to quickly move veterans into housing within 20 days. These are steps the CoC has established to implement an efficient process in identifying, assessing and referring homeless Veterans. The VA & SSVF staff attend monthly CoC meetings to network, provide ongoing updates of Veteran resources and review efficacy of the established process.

**3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC?** Yes

**3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness?** Yes

**3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?** Yes

**3B-5. Racial Disparity. Applicants must:** No  
**(1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;**  
**(2) if the CoC conducted an assessment, attach a copy of the summary.**

## 4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:**
- (1) assists persons experiencing homelessness with enrolling in health insurance; and**
  - (2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.**

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	No
Private Insurers:	Yes	No
Non-Profit, Philanthropic:	Yes	No
Other: (limit 50 characters)		

- 4A-1a. Mainstream Benefits. Applicants must:**
- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;**
  - (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and**
  - (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy for mainstream benefits. (limit 2,000 characters)**

1) Mainstream benefit providers are partners & are regularly engaged with the CoC: TX HHS (SNAP, TANF, people of disabilities, etc.), El Paso County General Assistance, FQHCCs, and Molina Health Care. CoC provides SOAR training to providers to ensure quick access to SSA benefits. Partner providers assist with ACA applications and linkages to health care through mobile units, multiple clinics throughout the CoC’s geographical area and on-site visits to shelters.

2) CoC regularly invites State and local benefit programs to monthly meetings. CoC staff are regularly encouraged to attend benefits meetings & review benefit program websites to ensure they are aware of changes & opportunities. As information becomes available to CoC, emails are distributed to all CoC

members. TX HHS have presented to CoC how to access their website to assist clients in applying for benefits. Because TX is not a Medicaid expansion state, the CoC relies heavily on our local FQHCCs, many of whom are partners as described above. This allows for immediate health assessments, treatment, access to medications & ongoing health care while in the program. A Resource Directory for Homelessness was created by the University of El Paso's Spring 2018 MSW class and gifted to the Coalition. Program Staff at provider agencies are utilizing this comprehensive directory regarding resources available for person's experiencing homelessness.

3) The CoC Planning Committee along with the El Paso Coalition for the Homeless (Resource Facilitator) is responsible for ensuring strategies have been established/implemented.

**4A-2.Housing First: Applicants must report:**

- (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and**
- (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.**

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	14
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	14
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

**4A-3. Street Outreach. Applicants must:**

- (1) describe the CoC's outreach;**
- (2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;**
- (3) describe how often the CoC conducts street outreach; and**
- (4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)**

1) The CoC has developed an outreach consortium that covers 100% of the County to focus on identifying individuals experiencing homelessness. Funding resources from multiple donors and federal, state and local agencies have been combined to support this comprehensive multi-agency initiative which includes youth, LGBTQI, veterans, mentally ill, individuals & families who are on the street, in encampments or other places not meant for human habitation. It is understood that multiple contacts may be required prior to either engaging the homeless or linking them to the community's CE process. When appropriate and agreed upon, triage is conducted utilizing the VISPDAT & those assessed are placed on the CoC's acuity list.

2) The CoC utilizes CoC, ESG, SSVF, HHS and private foundation funds to

ensure that outreach teams are covering 100% of the geographic area  
 3) Street Outreach occurs 7 days/week w/ varying shifts to accommodate the needs in the community & includes afterhours & emergencies.  
 4) CoC tailored its street outreach to target youth, LGBTQI, veterans, mentally ill, individuals & families. Teams target encampments that have a high concentration of those with long history of homelessness and have acuity.

**4A-4. Affirmative Outreach. Applicants must describe:**

- (1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and**
- (2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above. (limit 2,000 characters)**

1) Because the CoC borders Mexico, the CoC has a long standing practice that all HUD funded projects ensure that they meet minimum standards in accordance with the Rehabilitation Act, Fair Housing Act and Title II of ADA. The Coordinated Entry staff focus on securing housing & ensure all housing needs are met for all eligible clients without discrimination. The Coalition regularly provides training and education through membership meetings and email distributions regarding fair housing and equal access laws, which supports and emphasizes that client choice is always a priority. Services include dual language staff, scattered site housing, & the ability to accommodate multiple needs of those served. When securing housing, the CE Staff adhere to the requirements of Fair Housing & Equal Opportunity. Ample attention is given to housing for specific sub-populations, housing for persons with shared spaces & facilities, disabilities, individual & family needs, & tenant rights. All subrecipients must provide program participants with information on rights available under federal, fair housing and civil rights laws.  
 2) CoC provides outreach to individuals & families who are least likely to seek services. Materials distributed are provided in English/Spanish. Outreach teams are directly linking households to the Coordinated Entry System. Services include dual language staff, scattered site housing, & the ability to accommodate multiple needs of those served. CoC has contracts w/ providers for those requiring additional communication methods i.e. limited English proficiency, sign-language, deaf & hard of hearing & blind.

**4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.**

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	79	189	110

**4A-6. Rehabilitation or New Construction No Costs. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new**

**construction?**

**4A-7. Homeless under Other Federal Statutes.** No  
**Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other Federal statutes?**

## 4B. Attachments

**Instructions:**

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:  
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	HACEP Homeless Pr...	09/18/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	VISPDAT Family Yo...	09/18/2018
1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	Scoring Tool	09/18/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes	Public Posting of...	09/18/2018
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	Public Posting	09/18/2018
1E-4. CoC's Reallocation Process	Yes	Reallocation Plan	09/18/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Public Posting Fi...	09/18/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Projects Rejected	09/18/2018
1E-5. Public Posting–Local Competition Deadline	Yes	Competition Deadl...	09/18/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	CoC and HMIS Lead...	09/18/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	HMIS Gov and Stan...	09/18/2018
3A-6. HDX–2018 Competition Report	Yes	HDX Competition R...	09/18/2018
3B-2. Order of Priority–Written Standards	No	CH Prioritization	09/18/2018

3B-5. Racial Disparities Summary	No		
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No	Emergency Transfe...	09/18/2018
Other	No		
Other	No		