Before Starting the CoC Application

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

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

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

- 1. The FY 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
- 2. The FY 2022 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
- 3. All information provided to ensure it is correct and current.
- 4. Responses provided by project applicants in their Project Applications.
- 5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2022 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

appeal HÚD's funding determination.

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

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: IA-500 - Sioux City/Dakota, Woodbury Counties

CoC

1A-2. Collaborative Applicant Name: City of Sioux City

1A-3. CoC Designation: CA

1A-4. HMIS Lead: City of Sioux City

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

1B-1.	Inclusive Structure and Participation—Participation in Coordinated Entry.
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.
	In the chart below for the period from May 1, 2021 to April 20, 2022
	In the chart below for the period from May 1, 2021 to April 30, 2022:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	Disability Advocates	Yes	Yes	Yes
5.	Disability Service Organizations	Yes	Yes	Yes
6.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
7.	Homeless or Formerly Homeless Persons	No	No	Yes
8.	Hospital(s)	No	No	Yes
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tri Organizations)	bal Yes	Yes	Yes
10.	Law Enforcement	Yes	Yes	Yes
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
12.	LGBTQ+ Service Organizations	Yes	Yes	Yes
13.	Local Government Staff/Officials	Yes	Yes	Yes
14.	Local Jail(s)	No	No	Yes
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	Yes
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, applicant	Clour City/Danola, Woodbary Co.	-
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17.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
18.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
19.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
20.	Other homeless subpopulation advocates	Yes	Yes	Yes
21.	Public Housing Authorities	Yes	Yes	Yes
22.	School Administrators/Homeless Liaisons	No	No	Yes
23.	State Domestic Violence Coalition	Yes	Yes	Yes
24.	State Sexual Assault Coalition	Yes	Yes	Yes
25.	Street Outreach Team(s)	Yes	Yes	Yes
26.	Substance Abuse Advocates	Yes	Yes	Yes
27.	Substance Abuse Service Organizations	Yes	Yes	Yes
28.	Victim Service Providers	Yes	Yes	Yes
29.	Domestic Violence Advocates	Yes	Yes	Yes
30.	Other Victim Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Nonexistent	No	No
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)		•	•
34.	Community Action/Social Service Agencies	Yes	Yes	Yes
35.	Legal Aid	Yes	Yes	Yes

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

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Each October, the CoC conducts a social media campaign to solicit new members to join. The CoC has an on-going, open invitation on our Facebook page, website, and meeting agendas and minutes. We are always looking for new members from agencies, churches, businesses, local government, and the general public to join the CoC, attend our meetings, participate in our committees, serve on our board, and help us end homelessness in Siouxland. Board members have a responsibility to invite other community members and key partners to the CoC meetings and encourage them to become an active member.

We ensure effective communication with individuals with disabilities by utilizing PDF's in written communication and on our website. We have Language Line for non-English speaking members and clients.

This year, our focus will continue to be homeless or formerly homeless persons, hospital representatives, Indian tribes and tribally designated housing entities, LGBTQ+ service organizations, organizations led by and serving black, brown, indigenous and other people of color, school administrators/homeless liaisons, youth advocates, and youth service providers. At various provider meetings the CoC asks if anyone knows of any currently homeless or formerly homeless individuals interested in joining the CoC. Member agencies are encouraged to recommend and/or solicit homeless or formerly homeless persons to join the CoC as they provide valuable insight into current programs/services and what's working well or what could be improved as well as community needs and programs and services that should be added in our CoC.

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

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The CoC holds open meetings bi-monthly and encourages current members to invite new individuals, businesses, and agencies to participate in the CoC. All participating individuals and organizations are invited and expected to share their opinions and expertise with the group. In an effort to reach those that are not aware of our CoC, we have a Facebook page, Twitter account, and a website where we have posted an on-going, open invitation to join the CoC, and we help promote and share events and information regarding homelessness and available services. Homeless providers, business owners, law enforcement, education, and social service agencies participate in other public forums to address homelessness in downtown Sioux City and the community. We spotlight several agencies, benefits and health care providers, and employment agencies at each meeting and provide time for all to share agency news and events. We have regular open discussions regarding the many facets of homelessness and the issues facing our homeless populations. We use these discussions as a sounding board to brainstorm possible solutions, options, and opportunities to assist our homeless and near homeless. On our Facebook page, Twitter, and website anyone with an interest in preventing and ending homelessness in Siouxland can find meeting minutes and agendas, data regarding homelessness in Siouxland, information about funded projects, and our by-laws and policies.

CoC member agencies provide regular updates and share ideas and opinions gathered at meetings and other public forums, and these are used as a sounding board to promote additional discussion and brainstorming to make improvements or inspire new approaches to preventing/ending homelessness. Multiple CoC member agencies attended a special meeting called by the City of Sioux City Diversity Equity & Inclusion Department to address homeless camps and services available to homeless community members. The meeting was open to the public and all in attendance were able to share opinions, ideas, and information about services provided and how to access them. Other CoC member agencies have also worked with Sioux Rivers and Rolling Hills Mental Health Regions and Woodbury County Jail staff to coordinate access to services for individuals who were at the stabilization center or in jail and being discharged into homelessness. Our community's acceptance and use of EHVs also demonstrates our openness to new approaches to ending homelessness.

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

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The CoC is fully open to and encourages proposals from entities that have not previously received funds in prior competitions. Even before the NOFO drops, the CoC Grant Committee Chair announces the impending NOFO/CoC Program Competition at CoC meetings and encourages all non-funded agencies to consider applying for a new project, especially PSH and RRH projects which are a priority for our CoC. Once the NOFO drops, the CoC Grant Committee Chair meets with the Project Monitoring and Development Committee to review the Review, Rank, and Reallocation policies as well as the scoring charts for new and renewal project applications. Once these have been finalized, the Grant Committee Chair announces the RFP for project applications. The FY 2022 CoC Program Competition RFP was made public on August 9, 2022, via e-mail, the CoC's social media, and on the CoC's website. The RFP provides background information on the CoC Program, the local CoC, and the current competition, including eligible new project types and funding amounts, links to HUD and esnaps resources and detailed instructions for accessing esnaps and the project application, and the local competition timeline/deadlines. The CoC Grant Committee Chair and the Project Monitoring and Development Committee Members are readily available to assist new applicants with developing projects, understanding program regs, and navigating the esnaps online application.

The CoC's Project Review/Score/Rank Process, Reallocation Policy/Procedure, and New and Renewal Project Application Scoring Tools are available to all potential applicants when the RFP for project applications is announced. The Project Review/Score/Rank Process and Realloction Policy/Procedure explain how new and renewal project applications are reviewed, scored, and ranked in Tier 1 and Tier 2 according to their overall score. The Reallocation Policy explains both voluntary and involuntary reallocations processes.

We ensure effective communication with individuals with disabilities by utilizing PDF's in written communication and on our website. We have Language Line for non-English speaking members and clients.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	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)	Nonexistent
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

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18.	
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1C-2.	CoC Consultation with ESG Program Recipients.
	NOFO Section VII.B.1.b.
	Describe in the field below how your CoC:
1.	consulted with ESG Program recipients in planning and allocating ESG and ESG-CV funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and

(limit 2,500 characters)

The City of Sioux City serves as both the CoC Lead Agency and the recipient of ESG and ESG-CV funds. CoC and ESG representatives work together to review data and current programs, and determine priority areas and the application process for ESG and ESG-CV funds.

4. provided information to Consolidated Plan Jurisdictions within your CoC's geographic area so it could be addressed in Consolidated Plan update.

The CoC's Project Monitoring Committee, which is comprised of CoC and ESG recipients and non-funded agencies/sommunity members, review quarterly performance reports submitted by ESG and CoC projects. Quarterly reporting includes a review of system performance measures related to housing stability, cash income, data quality and completeness, and funding spenddown. When a project isn't meeting the performance measures, the committee works together with the projects to address issues and problem solve.

The CoC Lead Agency provided PIT and HIC data to the Consolidated Plan jurisdictions from the HUD HDX system.

There is very close working relationship between the CoC Lead Agency, CoC member agencies, and the Sioux City Consortium Consolidated Planning staff, so the consultation process is a very positive experience for all. The Sioux City Consortium Consolidated Planning Staff encourage a high level of agency consultation in an effort to demonstrate a commitment to identifying priority needs and engaging public agencies and nonprofit organizations in a productive and collaborative manner. Initially, public agencies and private nonprofit organizations, many of whom are CoC member agencies, whose missions focus on the provision of affordable housing and human services to those experiencing homelessness and LMI households and persons complete an annual survey in an effort to help the Consortium determine gaps in the community and provide input on how best to manage all federal funds. Additionally, they are invited to participate in 2 public hearings each year, one in February and one in March, where additional input is requested. The current plan, information gathered from the surveys, and public input regarding gaps and how they can be resolved are discussed. This often results in the creation of new programs or changes to current programs and funding allocations, which are then made a part of the Consolidated Plan.

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1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.B.1.c.	
	Select ves or no in the chart below to indicate how your CoC ensures emergency shelter.	

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:

Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated. Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated. Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients. 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. Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers. Other. (limit 150 characters)			
separated. 3. Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients. 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. 5. Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.			No
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. Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers. Yes	2.		Yes
area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance. 5. Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers. Yes	3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
noncompliance of service providers.	4.	area that might be out of compliance and took steps to work directly with those facilities to bring them into	Yes
6. Other. (limit 150 characters)	5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	Yes
	6.	Other. (limit 150 characters)	

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

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

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

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section VII.B.1.d.	

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

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The CoC has formal partnerships with the two largest and most widely-used school districts in our tri-state area - Sioux City (Iowa) Community School District and South Sioux City (Nebraska) Community School District. A similar partnership is enacted when we have homeless students from smaller schools districts such as Sergeant Bluff-Luton (lowa) Community School District. Within this partnership, the CoC, its member agencies and the school districts' Educational Equity Department agree to follow McKinney-Vento Education for Homeless Children and Youths Program Policy. We do this by ensuring that the parents know of their child's right to the same education as non-homeless students and that the homeless students in our CoC and programs are enrolled in and attending school. To the greatest extent possible, children enroll in and continue attending their home school/school of origin, if considered least restrictive. Agency staff work with the Equity Departments to arrange transportation to and from school. This includes using the traditional school bus as well as public transportation and taxi cabs. Agency staff also assist the parents with advocating for their students. This has included everything from getting a WIFI hot spot and student computers for the children while in shelter, especially during the pandemic, and requesting meetings with teachers and school district staff to address learning issues, IEP requests, and behaviors on the bus or in the classroom. The Equity Departments also ensures the students have needed school supplies and school fees are reduced or waived so homeless students can participate in extra curricular activities they couldn't otherwise afford. Although a formal agreement hasn't been drawn up, our shelter programs have also worked with Siouxland Human Investment Partnership/Beyond the Bell, a before/after school and summer education program designed to reduce learning loss, to get "preferred placement" as well as scholarships/greatly reduced fees so they can attend Beyond the Bell, especially during the summer.

IC-4b. Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.

NOFO Section VII.B.1.d.

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

The CoC's HEARTH Act/McKinney-Vento Education for Homeless Children and Youths Program Policy states that the CoC shall: 1) provide Homeless Assistance Providers with a copy of the McKinney-Vento Education for Homeless Children and Youths Program guidelines and the respective state's (Iowa and Nebraska) Administrative Code regarding educating the homeless; 2) review key principles of the McKinney-Vento Education Program and the State Administrative Code as needed to keep Homeless Assistance Providers apprised of the requirements; and 3) assist Homeless Assistance Providers with implementing the McKinney-Vento Education for Homeless Children and Youths Program as needed. The policy requires that Homeless Assistance Providers ensure all children are enrolled in school and connected to appropriate services as well as: 1) be aware of the requirements of the McKinney-Vento Education for Homeless Children and Youths Program and the respective state's (Iowa and Nebraska) Administrative Code regarding educating the homeless; 2) maintain contact with local school districts Homeless Liaison or Student Services Office to keep them apprised of the homeless children they are serving; and 3) maintain contact with local school districts' Homeless Liaison or Student Services Office to keep informed of the services available to homeless children and how to help their parents access these services. Per CoC policy, homeless assistance providers are also required to educate the parents on their rights, maintain regular contact with local education liaisons regarding the homeless children in their programs, and ensure access to fair and equal education.

1C-4c. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

NOFO Section VII.B.1.d.

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

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

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1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Collaborating with Victim Service Providers.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault,	
	and stalking to:	
1.	update CoC-wide policies; and	
2.	ensure all housing and services provided in the CoC are trauma-informed and can meet the	

(limit 2,500 characters)

needs of survivors.

The CoC regularly collaborates with both DV and non-DV organizations who provide housing and services to survivors to update CoC-wide policies. One example of this is the CoC collaborating with CoC Member agencies to update CoC-wide policies regarding VAWA policies and procedures. The CoC worked with funded agencies to ensure there were CoC-wide and agency-specific emergency transfer plans. The CoC also worked with providers to develop its policies regarding annual training to ensure that all providers are trained in trauma-informed care and have the safety, planning, and confidentiality protocols necessary to meet the needs of survivors.

The CoC regularly collaborates with organizations who provide housing and services to survivors to ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors. The CoC keeps agencies and agency staff informed of trainings offered locally as well as through HUD Exchange, various State agencies, and experts throughout the United States. The DV providers' staff are trained in trauma-informed care and are Certified Domestic Abuse Advocates through the state of Iowa. Over the past year, CoC project staff, agency front line staff, and Coordinated Entry staff have participated in trauma-informed care, mental health, and suicide prevention trainings. Licensed counselors are trained in evidence-based practices for serving survivors. These services include, Trauma Focused-Cognitive Behavioral Therapy (TF-CBT), Parent Child Interactive Therapy (PČIT), Certified Adoption Therapist, Seeking Safety, and Cognitive Based Interventions for Trauma Strategies (CBITS). The counselors at one agency in particular work closely with SafePlace and Haven House to house individuals. The agency also has a formal written agreements with the Dakota County Victim Assistance Program to provide therapy services at no cost to survivors.

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

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(limit 2,500 characters)

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The CoC keeps agencies and agency staff informed of trainings offered locally as well as through HUD Exchange, various State agencies, and experts throughout the United States. The DV providers' staff are trained in trauma informed care and are Certified Domestic Abuse Advocates through the state of lowa. Over the past year, CoC project staff, agency front line staff, and Coordinated Entry staff have participated in trainings including: Gottman Method, Level 1 & 2; Eye Movement Desensitization Processing; Mental Health First Aid; ASIST: Suicide Prevention; Taking Care of You; Children and Grief; Trauma-Informed Suicide Prevention; Hijacked: Understanding How Trauma Impacts the Brain and Body; and Trauma 101: Adverse Childhood ExperienceS (ACES) Overview. Service agencies are trained in evidence-based practices for serving survivors. These services include, Trauma Focused-Cognitive Behavioral Therapy (TF-CBT), Parent Child Interactive Therapy (PCIT), Certified Adoption Therapist, Seeking Safety, and Cognitive Based Interventions for Trauma Strategies (CBITS). The CoC will develop a training schedule to ensure that agency staff receive appropriate trainings including trauma-informed care; best practices for survivors of domestic violence, dating violence, sexual assault, and stalking; etc. Training is provided at least annually, but most agency staff participate in related trainings at least quarterly. Our Coordinated Entry System policies and procedures contains a list of recommended training topics which includes safety and best practices on safety and planning protocols in serving survivors. All CE staff participate in traumainformed motivational interview training and training on various VAWA topics including safety and planning protocols and emergency transfer plans. All new staff will receive training within 6 months of their hire date, and all staff will participate in refresher trainings annually.

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

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The CoC uses a de-identified aggregate data source from a comparable database for data on survivors of domestic violence, dating violence, sexual assault, and stalking. The system is integrated but separate from the HMIS system and provides for client safety by assigning each client a unique ID number rather than using their name, SSN, or other identifying information. Every DV client in emergency shelter completes a needs assessment to see if they have their necessary documents to apply for benefits such as Medicaid, food stamps, childcare assistance, employment, etc. Their demographics are captured in the assessment and that data is used to ensure provision of culturally appropriate services that may be available such as tribal services or immigration services which have VAWA protections for those affected by domestic violence. The DV service providers will assist in helping clients become document ready, so they are able to begin the application processes for community services/benefits. The DV providers report their data to the CoC and collectively we use the data to determine training needs (i.e. traumainformed care, victim-centered care, cultural sensitivity, etc.). All CoC and ESG funded projects have developed an Emergency Transfer Plan and adhere to VAWA rules and regulations when serving DV clients to ensure their rights are maintained and they are able to access the housing and services they need. We also use client-level exit destination information to determine the types of housing services and programs needed in our community. Through this analysis, we determined the need for a DV-specific RRH program and assisted the local DV provider with their application for a new RRH project several years ago. The hope is that we will be able to assist more DV clients with successful exits to their own permanent housing destinations directly from shelter.

1C-5c.	Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
1.	the emergency transfer plan policies and procedures; and	
2.	the process for individuals and families to request an emergency transfer.	

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All CoC and ESG-funded programs are required to have an Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking in accordance with the Violence Against Women Act (VAWA). The Emergency Transfer Plan policies and procedures identify tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. Upon program entry, the client is given a copy of HUD-5380 Notice of Rights under the VAWA/Emergency Transfer Plan and HUD-5382 Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and Alternate Documentation. These forms are reviewed with the client, and the client is asked to sign the Acknowledgement of Receipt of HUD-5380 and HUD-5382. The Emergency Transfer Plan allows a tenant who is/has been a victim of Domestic Violence et al to request an emergency transfer from the tenant's current unit to another unit if the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit, or if the tenant is a victim of sexual assault and the assault occurred on the premises within the 90-calendar-day period preceding a request for an emergency transfer, whether or not they are in good standing with the program. The plan ensures client confidentiality and assists the client with securing other safe housing either within the same property or from another housing provider if there are no safe and available units in their current property. Clients must submit a written request for a transfer to another unit. The written request for an emergency transfer should include either a statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit OR a statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premised during the 90-calendar-day period preceding the request for an emergency transfer. Program staff is available to assist the tenant with making the written request and have even recommended that the tenant consider requesting an emergency transfer when they become aware of a potentially dangerous situation for the tenant and/or the tenant's children.

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

NOFO Section VII.B.1.e.

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

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The CoC has a large membership of victim and non-victim service providers who work together to ensure DV survivors are provided housing and services without barriers while maintaining safety and confidentiality. The use of DVMIS, our CoC's comparable database, and a CE prioritization list that combines participants from the HMIS system and the DVMIS system allows equal access to all HUD-funded housing and services available within our CoC. As listed in the Coordinated Entry Policy, affirmative marketing is conducted for survivors. During the initial call, all participants are asked screening questions to assess risk or potential harm. If there is risk present or the participants identifies that they are actively fleeing domestic violence, dating violence, sexual assault, or stalking, the participant is referred to available specialized services and housing assistance, especially emergency shelter, to prioritize participant safety. Once the participant is safely sheltered, CE or DV shelter staff will complete the Coordinated Entry Intake Assessment with the household and place them on the unnamed DVMIS prioritization list. Prior to the CE pull meeting, the DVMIS prioritization list is combined with the HMIS prioritization list so that the participant can be referred to any available housing and services within the CoC. Additionally, fleeing DV is a tie-breaker when prioritizing those accessing the coordinated entry system and seeking a referral to housing and services. Therefore, if two participants have the same score and one is fleeing DV, that person scores higher and will be prioritized over the other and receive a referral first.

1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
1.	safety protocols,	
2.	planning protocols, and	
3.	confidentiality protocols.	

The safety, planning, and confidentiality protocols in our Coordinated Entry Policies and Procedures include the use of a separate but integrated DVMIS system and a pre-screen tool to immediately refer those currently fleeing DV to the DV shelters/crisis line. Clients entered into the DVMIS system are unnamed and each is assigned a unique number identifier. All providers and clients have signed confidentiality agreements. At all times, the client is only referred to by their unique number. All CoC and ESG-funded programs are required to comply with VAWA and have written policies to meet the safety and confidentiality needs of victims of domestic violence, dating violence, sexual assault, and stalking. All DV and non-DV shelter staff as well as other frontline agency staff have received training in trauma-informed care and victim-centered services. Mental health and substance abuse services are available to survivors without going through their health insurance for risk of exposure to their partner. A crisis response team is available 24/7 at no cost to the survivor as well. Keeping them safe and secure is the number one priority. All of our shelters have secured entrances and a written emergency transfer plan to ensure safety. The case managers are well-versed in available services and ensure DV clients are able to safely access them as necessary, including providing safe transportation to school, work, and appointments and safe access to educational opportunities. health/mental health care, and childcare options as needed. Each agency creates safety plans with survivors. A safety plan is a personalized, practical plan to improve the safety of the client while preparing to leave an abusive situation or after they leave. The plan includes vital information tailored to each unique situation and will help prepare for and respond to different scenarios, including telling friends and family about the situation, coping with emotions, and various resources suited to the individual circumstances. Both while working with the DV shelters and after the clients enter other TH, PSH, or RRH programs, the client is always made aware of his/her options and staff recommendations, but ultimately, the final decisions regarding housing and services are up to the client.

Policy and Training.	y, Bisexual, Transgender and Queer+–Anti-D	Iscrimination	
NOFO Section VII.B.1.f.			
		LGBTQ+ individuals and	Yes
Did your CoC conduct annual CoC-wide to Housing in HUD Programs Regardles	e training with providers on how to effectively ss of Sexual Orientation or Gender Identity (E	implement the Equal Access Equal Access Final Rule)?	Yes
			Yes
NOFO Section VII.B.1.f.			
Describe in the field below:			
	ide anti-discrimination policy, as necessary, b		
	NOFO Section VII.B.1.f. 1. Did your CoC implement a written CoC families receive supportive services, sh 2. Did your CoC conduct annual CoC-wid to Housing in HUD Programs Regardle 3. Did your CoC conduct annual CoC-wid Accordance With an Individual's Gende Identity Final Rule)? 6a. Anti-Discrimination Policy–Updating F Compliance–Addressing Noncomplian NOFO Section VII.B.1.f.	NOFO Section VII.B.1.f. 1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that families receive supportive services, shelter, and housing free from discrimination? 2. Did your CoC conduct annual CoC-wide training with providers on how to effectively to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (E. 3.) Did your CoC conduct annual CoC-wide training with providers on how to effectively Accordance With an Individual's Gender Identity in Community Planning and Develo Identity Final Rule)? -6a. Anti-Discrimination Policy-Updating Policies-Assisting Providers-Evaluating Compliance-Addressing Noncompliance. NOFO Section VII.B.1.f.	NOFO Section VII.B.1.f. 1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination? 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)? 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)? 6a. Anti-Discrimination Policy-Updating Policies-Assisting Providers-Evaluating Compliance-Addressing Noncompliance. NOFO Section VII.B.1.f.

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- how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
 - 3. your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
 - 4. your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

Our CoC reviews the CoC-wide anti-discrimination policy at least annually and updates it as necessary based on stakeholder feedback. In recent years, the anti-discrimination policy has been updated to add language specific to HUD's Equal Access and Gender Identity Final Rules.

The CoC utilized the CoC-approved anti-discrimination policy as a basis to assist providers in developing project-level anti-discrimination policies. Once the CoC's anti-discrimination policy was adopted, the CoC encouraged all providers to review their current anti-discrimination policy and make revisions as necessary, especially in terms of adding language specific to HUD's Equal Access and Gender Identity Final Rules, ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination. As providers and/or their boards of directors had questions and concerns about adding certain language and revising their own antidiscrimination policy, CoC board and committee members were available to provide additional information and examples of how the revisions were necessary and beneficial to the agency and program participants. In CoC- and ESG-funded housing projects, the CoC evaluates compliance with the CoC's anti-discrimination policy by reviewing program participation in coordinated entry, the participant referrals made and accepted by the program through coordinated entry, and the participants successfully housed and served by the program.

If there are suspected and/or reported issues of provider or program non-compliance with the CoC's anti-discrimination policies, the CoC board will review and investigate the complaint, ensuring that both sides of the complaint are heard. If the non-compliance is founded, CoC board members would work with the offending provider or program to resolve the issue and bring them back into compliance with the CoC's anti-discrimination policies. This may include reviewing and revising the provider's anti-discrimination policy up to and including reducing or reallocating funding.

1C-7. Public Housing Agencies within Your CoC's Geographic Area—New Admissions—General/Limited Preference—Moving On Strategy.

NOFO Section VII.B.1.g.

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the FY 2021 CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with-if there is only one PHA in your CoC's geographic area, provide information on the one:

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South Sioux City Housing Agency

Yes

Yes-HCV

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2021 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Sioux City Public Housing Authority	5%	Yes-HCV	Yes

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

(limit 2,500 characters)

The City of Sioux City Housing Authority adopted a homeless admission preference and Move On strategy for persons in PSH several years ago. The PHA and the CoC brought together other homeless providers to discuss the idea and work out the details. We also worked together to create an MOU for participating providers. For years the other PHA's in our CoC have maintained that they do not need a homeless admission preference or Move On strategy because they have short waiting lists and could serve a homeless family without a preference. The CoC Lead Agency took the lead and started contacting and having the conversation with the South Sioux City Housing Agency following the FY2018 competition. After several months of discussing the idea and educating them about a homeless preference/move on strategy, the South Sioux City Housing Agency adopted a homeless preference/move on strategy. Because both PHA's use a standardized online application, neither Sioux City nor South Sioux City have the ability to track homeless admissions. The SCEH utilizes HMIS data to report the number of persons exiting HMIS-participating programs to permanent housing with an HCV. Representatives from both the City of Sioux City PHA and the South Sioux City Housing Agency regularly attend CoC meetings.

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	РНА	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes

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Other (lii	mit 150 characters)	
5.	,	
		<u> </u>
1C-7d	c. Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section VII.B.1.g.	
	In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process?	
1.	Emergency Housing Vouchers (EHV)	Yes
	Family Unification Program (FUP)	No
	Housing Choice Voucher (HCV)	No
	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
	Mainstream Vouchers	No
	Non-Elderly Disabled (NED) Vouchers	No
	Public Housing	No
8.	Other Units from PHAs:	INO
0.	Other Offits Hoffi Phas.	
1C-7c	I. Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessnes	ss.
	NOFO Section VII.B.1.g.	
1	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		Program Funding Source
2	2. Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	
1C-7€	 Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV). 	9
	NOFO Section VII.B.1.g.	
Di Vo Pla	d your CoC coordinate with any PHA to apply for or implement funding provided for Housing Cho ouchers dedicated to homelessness, including vouchers provided through the American Rescue an?	Yes
		•

1C-7e.	1. List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	
	es your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the V Program?	Yes
lf yo	ou select yes to question 1C-7e.1., you must use the list feature below to enter the name of every A your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		
Sioux Citv Public		

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

Name of PHA: Sioux City Public Housing Authority

1D. Coordination and Engagement Cont'd

10	D-1.	Discharge Planning Coordination.	
		NOFO Section VII.B.1.h.	
		Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are no discharged directly to the streets, emergency shelters, or other homeless assistance programs	ot 3.
1. Foster Care		Ye	es
2. Health Care		Ye	es
3. Mental Health Care		Ye	es
4. Correctional Facilities		Ye	es
10	D-2.	Housing First–Lowering Barriers to Entry. NOFO Section VII.B.1.i.	
		NOFO Section VII.B. I.I.	
	entry	er the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated y, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC gram Competition.	3
	entry	er the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated y, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC gram Competition that have adopted the Housing First approach.	i 3
3. This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2022 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.		ted 100%	
1D-	-2a.	Project Evaluation for Housing First Compliance.	
		NOFO Section VII.B.1.i.	
	[Describe in the field below:	
	1.	how your CoC evaluates every recipient–that checks Housing First on their Project Application-determine if they are actually using a Housing First approach;	ı–to
	2.	the list of factors and performance indicators your CoC uses during its evaluation; and	
	3.	how your CoC regularly evaluates projects outside of the competition to ensure the projects are using a Housing First approach.	е
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The CoC Project Monitoring and Development Committee uses the project application and the most recent FY CoC APR report to evaluate every recipient that checks Housing First to determine if they are actually using a Housing First approach.

The CoC Project Monitoring and Development Committee reviews 3B. Project Description to ensure that the elements of Housing First are included in the scope of the project. The Committee also Project reviews the most recent FY CoC APR report submitted by the project for quarterly reporting. The factors and performance indicators used during the evaluation include housing stability/exits to or retention in permanent housing, length of time prior to housing (date homelessness started), and length of time between project start date and housing move-in date. The CoC also looks at sources of cash income and maintaining/gaining/increasing income at program exit and annual assessment as these can also indicate if a program is truly following Housing First by stabilizing housing and then connecting clients to other services and resources.

Through discussions with the projects both during the guarterly reporting and the bi-monthly Coordinated Entry referral meetings, the CoC ensures that the projects that committed to using a Housing First approach are prioritizing rapid placement and stabilization in PH and not requiring service participation or preconditions. During the quarterly reviews, the CoC reviews which projects have declined referrals from coordinated entry and the reasons for declining a referral to ensure that they remain in compliance with Housing First. Likewise, if the project reports than 80% exiting to their own permanent housing destination, the Committee makes sure that the project isn't terminating clients or creating barriers, thus not following Housing First. During our bi-monthly CE referral meetings, we prioritize those persons who score the highest on the SPDAT and who have the most vulnerabilities. Due to a lack of PSH beds/units, people who score for PSH are often referred to TH and RRH so that they do not languish on the prioritization list. The programs accepting these referrals work to get them stabilized in housing as quickly as possible and then work to ensure they are accessing the services needed to maintain their housing and exit the programs successfully to their own permanent housing.

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

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Street outreach is conducted by various agencies in the CoC, including the City of Sioux City's Street Outreach program, Siouxland Mental Health Center Project Restore staff, Sunnybrook Church Stephen's Ministry street medicine volunteers, and Heartland Counseling's Permanent Supportive Housing and Crisis Response staff.

Street outreach covers 100% of the CoC's geographic area, with frequency and activity varying by community.

In the metropolitan area outreach workers canvas known locations (neighborhoods, shelters, food pantries/meal sites, parks, the library) weekly to identify, engage, and screen people for housing/services. In rural areas, outreach workers provide information to local service agencies and partners such as law enforcement and respond to specific outreach needs as requested. To reduce barriers to assistance, outreach workers and agency staff meet the clients where they are and are present weekly at Siouxland Community Health Center and daily at the seasonal Day/Warming Shelter to visit with potential homeless clients. They also distribute fliers to social service organizations, laundromats, gas stations, and local grocery stores and on social media to create a presence in the community. The Warming Shelter and Siouxland Community Health Center provide personal care items, shower and laundry services, and a street address where homeless can receive their mail. The Warming Shelter has laptops so the homeless can apply for benefits, housing, and services. Workers are trained in trauma-informed care, person-centered care, motivational interviewing, and unique strategies for youth, veterans, persons with serious mental illness, and other unsheltered homeless persons. In order to reach those least likely to request assistance, agencies employ Spanish-speaking staff and collaborate with a local agency dedicated to helping non-English speaking clients, or outreach workers read and explain program information.

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

NOFO Section VII.B.1.k.

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

		Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		

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

	2021	2022
Enter the total number of RRH beds available to serve all populations as reported in the HIC-only enter bed data for projects that have an inventory type of "Current."	117	95

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

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

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

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.
	NOFO Section VII.B.1.m
	Describe in the field below how your CoC:
1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

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The CoC systematically keeps agency staff up to date regarding mainstream resources by providing a platform at each CoC meeting for benefits providers to present program and resource information. Information is also shared informally during the Coordinated Entry pull meetings and other community/agency meetings and events as well as through email and social media in order to ensure the agencies and their clients are well-informed about programs and benefits and accessing them and trainings/information sessions being offered. The CoC encourages program staff to participate in trainings or informational sessions to get the most up-to-date information about programs and services. Program staff have a close working relationship with mainstream benefit providers, and benefit providers are available via phone to answer questions and brainstorm specific client situations.

Through trainings, program staff come to know staff and providers so that they are able to contact them and collaborate with them to help the homeless access healthcare services. Many program staff have developed close working relationships with the Benefits Specialists and MCO staff who assist staff and individuals with applying for Medicaid, Medicare, and Medicare supplements. The MCOs send email notifications about open enrollment, town hall meetings, benefit classes, diaper showers, and surveys to constituents about services. Agency staff are informed of both lowa and Nebraska Medicaid/MCO programs and use this knowledge to assist their clients with effectively using Medicaid and the related benefits such as utilizing medical transportation services to/from medical appointments and accessing sliding scale medical/mental health and substance use care.

The CoC works with projects, especially PSH projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff. The CoC has provided information regarding SOAR and SOAR training including a 2-part National Disability Forum - Homelessness: Working with Stakeholders to Improve Access to SSA Benefits and Services to be held this fall. Two agencies in the CoC, one who provides PSH and one who provides RRH and CE, have SOAR-certified staff. These staff have successfully assisted several clients with obtaining their medical history and other supporting documents needed to apply for and receive SSI/SSDI.

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

NOFO Section VII.B.1.n.

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

Project: IA-500 CoC Registration FY 2022

For the first two years of

For the first two years of the pandemic, the CoC provided non-congregate shelter beds through arranagements with local hotels. At first, the beds were provided for those, especially families, displaced by the closing of a local, seasonal congegrate homeless shelter that was not prepared for the severity and wide-spread ramifications of COVID-19. As the pandemic drug on, the noncogegrate shelter beds at local hotels transformed into beds where those experiencing homelessness could quarantine after testing positive for COVID-19. When the seasonal, congregate shelter opened for the 2021 season, they had added more non-congegrate family rooms, which could also be used for individuals, to reduce the spread of disease through congregate shelters. During Phases 37, CARES, 38, and ARPA-R of FEMA's Emergency Food and Shelter Program (EFSP), the EFSP Ad-Hoc Committee of the CoC awarded funds to several agencies to provide "other shelter" in the absence of other appropriate shelter. These funds were not only earmarked for the homeless but also for those impacted or ill from COVID. The CoC also increased the number of PSH units and beds that are available. Although not technically an emergency shelter, these units do provide more stable, non-congregate housing in our community.

As the pandemic continues, our CoC will continue to consider alternative housing, such as hotels, motels, dormitories, or other forms of non-congregate shelter to prevent the spread of infectious diseases. The solutions we will focus our efforts on meeting the criteria of non-congregate sheltering for infectious diseases, including what is necessary to protect public health and safety, what is in accordance with guidance provided by appropriate health officials, and what is reasonable and necessary to address the threat to public health and safety.

ID-8.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section VII.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

		1
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During the initial COVID outbreak, the CoC and its partner agencies worked closely with Siouxland District Health and the State Health Departments to learn as much as we could about COVID and preventing the spread of COVID. We participated in webinars and trainings and watched daily press conferences (federal, state, local) to stay up-to-date on CDC and health department guidelines and recommendations. Since then, the CoC has worked with providers to develop policies and procedures to respond to infectious disease outbreaks. These policies and procedures include regularly monitoring state and local health agency websites and social media for up-to-date information and recommendations as well as signing up for emails listserves to ensure receipt of vital information regarding infections diseases and responding to outbreaks. For many providers, their policies and procedures consist of a 3-tier system where each tier represents protocols taken at varying severities of the outbreak. Tier 1 relates to no infectious disease outbreak. Tier 2 relates to an outbreak where community spread is moderate. Tier 3 relates to an outbreak where community spread is extreme.

During and since the initial COVID outbreak, the CoC and its partner agencies have worked closely with Siouxland District Health and the State Health Departments to improve best practices in an effort to prevent infectious disease outbreaks among people experiencing homelessness. The 3-tier system many providers have adopted to respond to infectious disease outbreaks includes information at each tier for preventing infections disease outbreaks and the spread of infectious disease. The procedures in the 3-tier system cover everything from daily cleaning and sanitation to social distancing and working/providing services remotely to mask mandates and quarantining infected staff and clients. The CoC and its providers have followed public health recommendations for increased cleaning and sanitation protocols, which have continued even with COVID numbers decreasing. We continue to receive information regarding available vaccines and boosters and disseminate this information to provider staff and clients. All providers have a supply of PPE (hand sanitizer, masks, etc.) to give to staff and clients as needed.

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

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The CoC primarily communicated information on safety measures, changing local restrictions, and vaccine implementation to homeless service providers via email. As information came out from the CDC and state and local health departments, it was shared via the CoC's email list serve, and homeless service providers then passed the information along and shared it as appropriate with other non-CoC agencies and clients. Resources and information were also posted to the CoC's website and shared on social media.

The CoC facilitated communication between the public health agencies and homeless service providers by taking the lead and serving as the first line of communication between the public health agencies and homeless service providers. The CoC ensured that all street outreach, shelter, and housing providers received up-to-date information regarding protocols and available resources designed to prevent or limit infectious disease outbreaks. The CoC helped ensure homeless service providers had access to PPE and cleaning and sanitizing supplies as needed as well as the best ways to help those experiencing homelessness get tested, quarantine if they became infected, and get vaccinated.

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

Our Coordinated Entry System covers 100% of the CoC's geographic area. The CES operates under a centralized approach with a single Access Point. Both CoC- and ESG-funded agencies are required to participate in the CES and refer clients to the centralized access point and accept referrals for openings in their programs. We also have several non-funded agencies/service providers within Sioux City, IA and South Sioux City, NE who participate in the CES by making and accepting referrals. CES staff have also worked to inform providers in the rural areas about the CES and have provided information for accessing the CES and completing the intake assessment via telephone. In addition to having a single access point and access for clients in rural areas, several local agencies provide Street Outreach and meet clients in known locations such as under bridges, in parks, and at the library, Soup Kitchen, and the seasonal Day Shelter in order to ensure that people sleeping on the streets are prioritized for assistance in the same manner as any other person assessed through CE. The CES utilizes a standardized assessment tool, the VI-SPDAT, VI-F-FPDAT, or the TAY-VI-SPDAT, depending on the situation of the individual or family seeking assistance. When a client presents at the access point, trained agency staff complete both the HMIS Iowa Basic Assessment and the appropriate SPDAT assessment, enter the information into the HMIS, and place the client on the CE Prioritization List. Clients are prioritized by SPDAT score and literal homelessness combined with additional tiebreakers (chronic status, length of time homeless or on the streets, DV, veterans, and youth) as needed. To the extent possible, persons who are the most vulnerable and/or have been homeless the longest will be prioritized for housing first.

The CES policy and procedure manual is reviewed annually and updated as needed based on feedback received from participating projects and households that participated in CE. For example, in previous years the CoC used feedback to update the CE intake process, moving from a "No Wrong Door" model to a centralized CES with a centralized access point. We have also added language specific to the Equal Access and Gender Identity Final Rules under non-discrimination and have adjusted some of our timeframes for responding to clients, both those who wish to complete a CE assessment and those who have been referred to a program, and completing CE intake assessments.

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

(limit 2,500 characters)

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The CES system reaches people who are least likely to apply for homeless assistance by conducting affirmative marketing and posting notices in all agencies participating in CES. This is regardless of race, color, national origin, religion, sex, age, familial status, marital status, handicap, actual or perceived sexual orientation, or gender identity. Additionally, all people within the CoC's geographic area including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence have fair and equal access to the CES. In addition to having a single access point and access for clients in rural areas, several local agencies provide Street Outreach and meet clients in known locations such as under bridges, in parks, and at the library, Soup Kitchen, and the seasonal Day Shelter in order to ensure that we are reaching those who are least likely to apply for homeless assistance.

To the extent possible, persons who are the most vulnerable and/or have been homeless the longest will be prioritized for housing first. Clients are prioritized by SPDAT score and literal homelessness combined with additional tiebreakers (chronic status, length of time homeless or on the streets, DV, veterans, and youth) as needed.

The ĆES ensures the people most in need of assistance receive assistance in a timely manner by meeting the clients where they are and providing various methods of communication consistent with the client's preferences (phone, text, email, Facebook Messenger, in-person). In addition to having a single access point and access for clients in rural areas, several local agencies provide Street Outreach and meet clients in known locations. To facilitate prompt referrals and ensure those most in need of assistance receive that assistance in a timely manner, providers follow CES guidelines, yet all referrals made are participant choice and participants have the ability to decline a referral and wait for a referral to another provider.

CES staff make every effort to reduce burdens on people using coordinated entry and improve the speed at which a person or household can be appropriately housed. CES staff is continually collaborating among service providers, working to streamline referrals and ensure easier access to services. This includes having a centralized point of entry and providing multiple methods for completing the CE intake assessment, updating information, etc.

1D-10	Promoting Racial Equity in Homelessness–Conducing Assessment.	
	NOFO Section VII.B.1.q.	
		1
1. Ha	s your CoC conducted a racial disparities assessment in the last 3 years?	Yes
	ter the date your CoC conducted its latest assessment for racial disparities.	07/01/2020
2. Litter the date your ooo conducted its latest assessment for radial disparities.		
40.40		
1D-10a	 Process for Analyzing Racial Disparities—Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance. 	
	NOFO Section VII.B.1.q.	
	Describe in the field below:	

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- your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
 - 2. what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC uses HUD's CoC Analysis Tool for Race and Ethnicity. Data from the US Census as well as CoC HMIS data is reviewed regarding the total population, people living in poverty, people experiencing homelessness, and people experiencing unsheltered homelessness. Racial distributions are compared between persons experiencing homelessness and the general population to identify if certain racial groups experience homelessness at a disproportionate rate. We also compare and identify the difference in demographics of those experiencing homeless who are sheltered as opposed to those who are unsheltered. We review data to ensure that there isn't a racial disparity among homeless persons being referred to specific programs or services and to see if certain racial groups successfully complete/exit our homeless programs at a disproportionate rate.

During the last analysis, the CoC discovered there are a disproportionate number of Native American/Alaska Native/Indigenous experiencing homeless. This led to a higher number of Native American/Alaska Native/Indigenous persons being referred to programs and perhaps being assisted by programs. Other than that, we did not identify any racial disparities with relation to the provision of homeless assistance or the persons to whom assistance was offered. In addition to the complete analysis, we reviewed one ESG-funded Rapid Rehousing Program in an effort to determine the success rate among that population. Since the inception of the program in January of 2020, 65 of the 136 participants (48%) were Native American/Alaska Native/Indigenous. Of those 65 participants, 54 (83%) successfully completed the program and maintained their permanent housing. The 2nd largest population served in the program were white (26%). Of this population, 33 (77%) successfully completed the program and maintained their permanent housing.

1D-10b. Strategies to Address Racial Disparities.		
	NOFO Section VII.B.1.q.	

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	No
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes

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8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

1D-10c.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

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

(limit 2,500 characters)

In order to address the racial disparity identified in the provision and outcomes of homeless assistance, the CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness. The CoC has staff and committees charged with collecting and analyzing data to better understand the pattern of program use for people of different races and ethnicities in our homeless services system. The staff and committees then use the data to develop steps to address racial disparities related to homelessness. We review and analyze our data quarterly during funded project reporting as well as on our annual PIT counts to determine disparities and fill gaps where possible. The CoC Lead Agency has attended several webinars focused on improving racial equity in the CES. The CoC reviews the coordinated entry processes annually to understand their impact on people of different races and ethnicities experiencing homelessness and revise them as needed to improve provision and outcomes of homeless assistance. Other providers have completed Diversity, Equity, and Inclusion training, and the City of Sioux City has formed an Inclusive Sioux City Advisory Committee on which many CoC Member agencies participate. The Lead Agency has also hired interns over the past year in an effort to do more street outreach to connect those experiencing homeless with Coordinated Entry. The Lead Agency continues to build the racial equity task force that was formed in December 2021. This task force was formed to analyze community-wide data and develop and implement ideas to address racial disparity and improve racial equity. Additionally, the passing in 2019 of a prominent Native American advocate left a huge void in our community. Recently, the Siouxland Human Investment Partnership filled that gap by hiring a Community Based Native American Advocate. CoC Lead Agency staff met with this advocate to discuss racial disparity and to determine how the CoC can partner with him to address this disparity. He is available as an advocate for any agency in the community, including courts, DHS, juvenile probation, adult probation, etc.

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1D-10d. Tracking Progress on Preventing or Eliminating Disparities.

Describe in the field below the measures your CoC has in place to track progress on preventing or

eliminating disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC utilizes the CoC Racial Equity Analysis Tool, which draws on Point-In-Time (PIT) Count and American Community Survey (ACS) data to analyze racial disparities, to measure and track progress on preventing or eliminating disparities identified in the provision and outcomes of homeless assistance. The next analysis is expected to occur in the summer of 2023. In the interim, all CoC- and ESG-funded projects submit quarterly data reports which the CoC's Project Monitoring and Development Committee review and discuss with the CoC and the projects. One element that we review is the racial distribution of persons experiencing homelessness within our projects to see if there is one or more races that are experiencing homelessness at disproportionate rates. We also review the system performance measures related to permanent housing and income to see if there is one or more races that experience more or less success in our programs. From this information, we are able to work with Coordinated Entry and program/agency staff to determine what may have caused any disparities in the data and how we might resolve them.

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

NOFO Section VII.B.1.r.

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

(limit 2,500 characters)

The CoC has a website and Facebook page where we post announcements regarding our local coalition to end homelessness and our homeless services and providers and where we attempt to engage those with lived experience of homelessness. We post about our CoC board and coalition, member/provider agencies, events, announcements and general posts about housing and homelessness. CoC Member/Provider agencies have and continue to conduct targeted outreach by asking current and past program participants if they would be willing to attend CoC meetings and serve on CoC committees and/or the Board. An employee/case worker with Promise Jobs, a program for homeless/formerly homeless and/or low income families who receive TANF benefits, has been actively working to recruit participants with lived experience. We discuss the need to fill vacancies both on the CoC board and on CoC committees at every CoC meeting and remind agency representatives that we need better representation from persons with lived experience, persons of color, and persons from the LGBTQ+ community.

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

NOFO Section VII.B.1.r.

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

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

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

NOFO Section VII.B.1.r.

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

(limit 2,500 characters)

The CoC and CoC member/provider organizations provide professional development and employment opportunities to individuals with lived experience in a variety of ways. Heartland Counseling provides professional development opportunities through The Life Center and also works with Vocational Rehab in both lowa and Nebraska, as well as, staffing agencies to help client gain employment. Bridges West provides professional development by discussing best practices and then assisting clients with filling out applications and writing a resume and cover letter. The case manager practices interview techniques and assists them with how to explain criminal charges or other things in their background that may prevent them from getting hired. They also work on developing vital life skills including communication, keeping a schedule, and establishing support systems. All CoC member/provider organizations also make referrals to other professional development and employment resources such as the local state workforce development offices, Promise Jobs, Goodwill, staffing agencies, and various businesses who have a history of working well with persons who are facing challenges including homelessness, transportation, child care, health/mental health issues. The Junior League of Siouxland, although not a CoC member agency, is reintroducing their "Dress for Success" program and reestablishing partnerships with agencies who serve persons with lived experience of homelessness to not only help them acquire appropriate clothing for work but also to provide opportunities for mentorship/quidance on presenting themselves.

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1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	
	Describe in the field below how your CoC:	
1.	how your CoC routinely gathered feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance; and	
2.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness	

(limit 2,500 characters)

following:

The CoC uses a variety of methods to gather feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG on their experience receiving assistance. More formal methods include satisfaction surveys, treatment plans, and outcome measures. Equally important is the mostly unsolicited verbal feedback CoC and program staff receive when clients are inquiring about programs and services or when they are exiting a program. Feedback is gathered whenever the client is willing to provide it. We receive feedback from people experiencing homelessness, especially in relation to the Coordinated Entry process and accessing programs and services. Their chief complaints revolve around all the "hoops" they have to jump through to access services - obtaining required documents, eligibility requirements, criminal history, income, etc. and the hardships they face with communication, transportation, wait lists, availability, etc. For clients in our programs, staff receive feedback at least weekly. The feedback received mostly pertains to treatment/case plans, goals, and action steps, but it also pertains to program operations and barriers within the various systems.

The CoC and its member agencies accept the feedback and use it to determine the best steps forward, determine which changes may be necessary, and which changes are feasible. The CoC uses the feedback received from people experiencing homelessness to make changes in policies and procedures and improvements in programs and provision of services. When feedback indicated that our Coordinated Entry system wasn't working as efficiently as possible, the CoC transitioned from a "no wrong door" model to a single point of entry for CE intakes. At the program level, feedback often brings about program improvements and helps the case manager and client work better together to break down barriers. When working with clients and goals, there is a constant and consistent conversation about the action steps needed to reach their goals and any hardships, barriers, or challenges they may face and need to overcome to achieve the action steps and eventual goal. Many CoC member agencies also have a compliance officer or quality assurance/quality improvement committee that meets at least quarterly to review the feedback received and discuss the challenges presented and possible solutions.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	
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	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that engage city, county, or state governments that represent your CoC's geographic area regarding the	

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- 1. reforming zoning and land use policies to permit more housing development; and
- 2. reducing regulatory barriers to housing development.

(limit 2,500 characters)

Although the city governments that represent the CoC's geographic area haven't officially reformed zoning and land use policies or reduced regulatory barriers to housing development, the City of Sioux City has been open to and approved several zoning and regulatory variance requests. In particular, the City of Sioux City has a history of granting variances from the zoning code for housing development, particularly for infill housing, which is where a lot of affordable housing is built. In the past year, the Lead Agency of the CoC was granted a variance from the zoning ordinance to reduce front yard setbacks, allow for shared garages, and create an irregular lot configuration. The Lead Agency of the CoC then served as the developer and constructed 3 affordable, single family houses on a triangular-shaped lot that no other developer was interested in due to the difficulty of situating 3 houses on the lot. The Lead Agency of the CoC encouraged City of Sioux City Planning and Zoning staff to allow for reduced required on-site parking for an affordable apartment housing project on W. 3rd Street in Sioux City, Iowa. The City of Sioux City approved that request.

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

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

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

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Yes
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Yes Yes
Yes
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 VII.B.2.a., 2.b., 2.c., and 2.d.		
			٦	
		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.	Wh	at were the maximum number of points available for the renewal project form(s)?		50
2.	Hov	w many renewal projects did your CoC submit?		4
3.	Wh	at renewal project type did most applicants use?	None	
1E	E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.		
		NOFO Section VII.B.2.d.		
			7	
		Describe in the field below:		
	1.	how your CoC collected and analyzed data regarding each project that has successfully housed program participants in permanent housing;		
	2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;		
	3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and		
	4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.		

(limit 2,500 characters)

The CoC collects and analyzes cumulative project data quarterly on each project that provides housing and services. The projects submit the cumulative CoC APR report each quarter, and the CoC's Project Monitoring and Development Committee analyze the data against the CoC's performance measures which include 80% of persons exiting to/maintaining their own permanent housing.

In addition to analyzing the rate of success in obtaining/maintaining permanent housing, the CoC also reviews the CoC APR report to determine trends in the amount of time a person spends in homelessness and the length of time it takes from the time a person enters a PSH or RRH program to the time they move into their housing.

When reviewing, ranking, and rating projects, the CoC considered our CoC's need to increase and provide more PH-PSH housing to serve the chronically homeless in Siouxland. Additionally, the CoC considered the target population/subpopulations to be served by the projects as well as the project design and how it addresses HUD's priorities for ending chronic homelessness, ending homelessness among households with children, and reducing the amount of time a person spends homeless by rapidly rehousing clients. The CoC also considered the extent to which the projects reduce or eliminate barriers to project entry and/or follow a Housing First approach to better serve the most vulnerable and hardest to house and to address the needs of those who have: low or no income, current or past substance use, a significant criminal history, and/or those who are victims of domestic violence, service resistant, and severely mentally ill.

The CoC's scoring tool awards points for projects that adhere to a Housing First approach, are 100% dedicated to serving the chronically homeless, and dedicated to serving households with children. The CoC is committed to assisting the most vulnerable and hardest to house through our Coordinated Entry System and HUD-funded CoC and ESG programs and has worked with all programs to reduce or eliminate barriers to program entry. The CoC scores all projects based on objective criteria such as performance measures, but also gives serious consideration to adjusting the rank of projects that may be lower performing projects because they serve the hardest to serve populations and meet a more dire need in our CoC's geographic area.

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

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(limit 2,500 characters)

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The CoC strives to obtain input and include persons of different races and promote racial equity in the local review, selection, and ranking process. As we invite persons to join the CoC and serve on our Board and Committees, we strive to include persons of different races and those who are most indicative of those over-represented in our local homeless population. Each October, the CoC conducts a social media campaign to solicit new members to join. This year, our focus was homeless or formerly homeless persons; Indian tribes and tribally designated housing entities; organizations led by and serving black, brown, indigenous and other people of color; and school administrators/homeless liaisons. Although we completely understand the importance of ranking projects to the degree in which their program participants mirror the homeless population demographics, one of the issues our CoC continues to face is getting people of different races, especially those overrepresented in the local homeless population, to participate in the CoC and the CoC Board and Committees. Another issue our CoC continues to face is the number of new and renewal project applications that are submitted in each competition. Each year we put out an RFP for new and renewal project applications, yet until the past 5 years, we haven't had any new project applications and haven't applied for funding above and beyond the ARD. Essentially, without new project applications, our CoC isn't able to have a full and complete "competition."

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

(limit 2,500 characters)

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The Coc's written process for reallocation involves both voluntary reallocation where an applicant chooses to reallocate all or part of their renewal funds to create a new project(s) and involuntary reallocation where the CoC may reallocate funds from low-scoring or low-performing projects to create one or more new projects without decreasing the CoC's ARD. Low performing projects are those who aren't meeting CoC performance standards. Projects that have had funds recaptured are also subject to having the amount of recaptured funds reallocated. If there are no new project applications, the funds remain available for the original renewal project(s). The project scoring/ranking and reallocation procedures are based largely on the SCEH's quarterly reporting. All CoCfunded projects submit quarterly reports and data including housing stability, income, data quality and timeliness, and financial accountability is reviewed by the Project Monitoring and Development Committee. This data is taken into consideration along with the project application and overall performance when the projects are scored and ranked during the competition. The CoC's Project Monitoring and Development Committee also considers the CoC's need for a particular project type when considering and scoring/ranking new and renewal project applications.

The CoC's Project Monitoring and Development Committee did not identify any low performing projects through the local competition this year.

The CoC did not reallocate any low performing or less needed projects during the local competition. However, we did have a project applicant whose project funding was reduced in the FY 2021 competition and who chose not submit a renewal project application in the FY 2022 competition. The only new project application the CoC received in this year's competition was for a DV Bonus RRH project.

In years where we do not receive new project applications, we do not reallocate funds from low performing projects. Instead, we continue to work with the project to help them improve their performance. Our CoC continues to fund a TH project. In some CoC's TH projects may be considered less-needed, but in our CoC where we are still working to increase PSH and RRH projects, this TH project is still very important to our CoC and the homeless we serve.

1E-4a.	Real	llocation Between FY 2017 and FY 2022.	
	NOF	FO Section VII.B.2.f.	
	Did y	your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	No
1	E-5.	Projects Rejected/Reduced-Notification Outside of e-snaps.	
1		Projects Rejected/Reduced-Notification Outside of e-snaps. NOFO Section VII.B.2.g.	
1			
1		NOFO Section VII.B.2.g. You must upload the Notification of Projects Rejected-Reduced attachment to the 4B.	
		NOFO Section VII.B.2.g. You must upload the Notification of Projects Rejected-Reduced attachment to the 4B.	No

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pro	oject applications were pplicants on various date	ement 1 of this question, enter the date your CoC n being rejected or reduced, in writing, outside of e-ses, enter the latest date of any notification. For exa . 06/27/2022, and 06/28/2022, then you must enter	snaps. If you notified imple, if you notified	
-				l
1E-5a	a. Projects Accepted-N	otification Outside of e-snaps.		
	NOFO Section VII.B.	2.g.		
	You must upload the	Notification of Projects Accepted attachment to the	e 4B. Attachments Screen.	
rar ap	nked on the New and R oplicants on various date	notified project applicants that their project applicate enewal Priority Listings in writing, outside of e-sna as, enter the latest date of any notification. For exa .06/27/2022, and 06/28/2022, then you must enter	ps. If you notified imple, if you notified	09/13/2022
1E-5b	b. Local Competition S	election Results-Scores for All Projects.		
	NOFO Section VII.B.	2.g.		
	You must upload the Screen.	Final Project Scores for All Projects attachment to	the 4B. Attachments	
11	Applicant Names;			
2. 3. 4. 5.	Project Names; Project Scores; Project Rank-if accepte Award amounts; and Projects accepted or re			
2. 3. 4. 5. 6.	Project Names; Project Scores; Project Rank–if accepte Award amounts; and Projects accepted or re	jected status.		
2. 3. 4. 5. 6.	Project Names; Project Scores; Project Rank-if accepte Award amounts; and Projects accepted or re	of CoC-Approved Consolidated Application.		
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2. 3. 4. 5. 6.	Project Names; Project Scores; Project Rank-if accepte Award amounts; and Projects accepted or re c. 1E-5c. Web Posting NOFO Section VII.B. You must upload the Attachments Screen.	of CoC-Approved Consolidated Application. 2.g. Web Posting—CoC-Approved Consolidated Application Consolidated Application Consolidated Application Consolidated Application Coluded:	n on the CoC's website or	09/21/2022
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2A. Homeless Management Information System (HMIS) Implementation

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

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

	T		
2A-1.	HMIS Vendor.		
	Not Scored–For Information Only		
Ente	er the name of the HMIS Vendor your CoC is o	currently using.	WellSky
04.0	LINAIO Lundario della Communia Anna		
2A-2.	HMIS Implementation Coverage Area.		
	Not Scored–For Information Only		
Sele	ect from dropdown menu your CoC's HMIS co	verage area.	Single CoC
			'
2A-3.	HIC Data Submission in HDX.		
	NOFO Section VII.B.3.a.		
Ente	er the date your CoC submitted its 2022 HIC d	ata into HDY	03/24/2022
Entit	er the date your coc submitted its 2022 File d		03/24/2022
2A-4.	Comparable Database for DV Providers–CoC Data Submission by Victim Service Providers	and HMIS Lead Supporting Data Coll .	ection and
	NOFO Section VII.B.3.b.		
	In the field below:		
1.	describe actions your CoC and HMIS Lead ha	ave taken to ensure DV housing and s	ervice
	providers in your CoC collect data in database requirements; and	es that meet HUD's comparable datab	ase
2.	'	2022 HMIS Data Standards.	
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(limit 2,500 characters)

The CoC and HMIS Lead have worked with WellSky, the HMIS Vendor, to ensure that all DV housing and service providers in our CoC collect data in databases that meet HUD's comparable database requirements. This comparable database, known as DVIMS, is operated and maintained by the HMIS Lead. The system is maintained and operated separately from the HMIS version of ServicePoint that is used by non-DV providers. The HMIS Lead manages the DV database project setup, licensed user training, and system administration. Providers utilize an un-named client function of the ServicePoint software. Initially the end user enters the client's name at the point of client record creation. The system then creates a unique ID for that client and discards the client's name from the system. No ICA staff, vendor staff, or end user staff have access to the client's name once the unnamed client has been created. DVIMS is a replicated version of ServicePoint and meets the same HUD HMIS Data Standards and reporting requirements as HMIS. Due to the use of the same software as the non-DV HMIS, the CoC can request the same performance data as it does for any project participating in HMIS. Additionally, the HMIS Lead can produce system performance measure data through the use of the DV database. Any report that is provided by the software vendor in HMIS is also available for use in DVIMS.

The CoC is compliant with the 2022 HMIS Data Standards in both HMIS and DVIMS.

2A-5. Bed Coverage Rate–Using HIC, HMIS Data–CoC Merger Bonus Points.

NOFO Section VII.B.3.c. and VII.B.7.

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

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	216	36	58	32.22%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	76	5	71	100.00%
4. Rapid Re-Housing (RRH) beds	95	42	53	100.00%
5. Permanent Supportive Housing	52	0	22	42.31%
6. Other Permanent Housing (OPH)	0	0	0	

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.
NOFO Section VII.B.3.c.	
	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

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(limit 2,500 characters)

Currently bed coverage rates for emergency shelter and permanent supportive housing project types fall below 84.99%. Steps to increase bed coverage within the CoC in these project types will include continuing to build relationships with the privately-funded, faith-based organization that operates these ES beds although past efforts have not yielded much success as well as initiating talks with the VA and PHA to establish data collection and reporting in HMIS. The CoC and the HMIS Lead will continue talks with the VA and the PHA to increase HMIS participation among the HUD-VASH program following the guidelines set for in the HUD Exchange resource on HMIS Participation and HUD-VASH Data Sharing dated 10/07/2020. Due to staff turnover at the VA and the COVID pandemic, new VA staff have not been trained to enter HUD-VASH data into HMIS. In the FY 2021 grant year, our CoC will also have a new HMIS Lead, they will have to establish a relationship with the VA, but it is our hope that the meeting will merely be a formality and the VA will get on board now that they are fully staffed. This would bring PSH coverage up to 100%. It will be important to continue to educate community leaders and local providers about the benefit of HMIS participation and our ability to provide a full picture of homelessness and the homeless response system in the CoC if all beds are included in data collection and reporting. Without full HMIS participation we do not have true pictures of important data points such as first time homeless and returns to homelessness. To further incentivize HMIS participation, the CoC and HMIS lead agency will continue to meet with the ES agency to answer questions, demonstrate the capabilities and benefits of HMIS and encourage HMIS use.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.		
	NOFO Section VII.B.3.d.		
Did	your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?	Yes	

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

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

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

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	
		•
Ent	er the date your CoC conducted its 2022 PIT count.	01/26/2022
2B-2.	PIT Count Data-HDX Submission Date.	
	NOFO Section VII.B.4.b	
		•
Ent	er the date your CoC submitted its 2022 PIT count data in HDX.	03/24/2022
2B-3.	PIT Count–Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	
	Describe in the field below how during the planning process for the 2022 PIT count your CoC:	
1.	engaged stakeholders that serve homeless youth;	
2.	involved homeless youth in the actual count; and	
3.	worked with stakeholders to select locations where homeless youth are most likely to be identified.	

(limit 2,500 characters)

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Prior to the 2022 PIT, Coordinated Entry staff had noted an increase among homeless youth, especially those who were 17, nearly 18 years old and not currently DHS-involved. Area high school guidance counselors were contacting CE because these youth were either homeless or at risk of becoming homeless (doubled up with friends) and DHS was choosing not to get involved with the youth and help them secure housing. During the planning process for the 2022 PIT count, stakeholders that serve homeless youth served on the planning committee as well as volunteered during the unsheltered PIT count. Our providers that serve homeless youth provided insight as to known locations for homeless youth and best practices for engaging them in order to gain an accurate count of our CoC's homeless youth.

We were only able to involve homeless youth in the actual count to the extent that they participated in the count and were counted and they helped us identify other known locations and persons.

Although we don't typically have a large homeless youth population, especially unaccompanied youth under the age of 18, we do take measures to identify and count homeless youth. Many youth-serving agencies including Crittenton Center, Boys and Girls Home and Family Services, Sioux City Community Schools, Siouxland Community Health Center, and the Human Rights Commission, who works closely with the LGBTQ community, participate in the CoC and provide information to the CoC of any known locations of unsheltered homeless youth. Additionally, the knowledge gained through Street Outreach and Coordinated Entry assessments is used to identify known locations of homeless youth.

00.4	DIT O(Mathedale		
2B-4.	PIT Count-Methodology Change-CoC Merger Bonus Points.		
	NOFO Section VII.B.5.a and VII.B.7.c.		
	In the field below:		
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable;		
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable; and		
3.	describe how the changes affected your CoC's PIT count results; or		
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2022.		

(limit 2,500 characters)

No changes made to the sheltered PIT count implementation, methodology, or data quality between 2021 and 2022. In an effort to make improvements and ensure a more complete unsheltered PIT count, we added a new count location and increased the number of volunteers conducting the 2022 PIT count. As we've done in the past, we set specific hours for the unsheltered count with the exception of the Warming Shelter day shelter, our Street Outreach staff, and our Coordinated Entry staff. These staff counted the unsheltered who presented at their site through the day and used survey questions which included asking whether they had already completed a count survey. Street Outreach staff also went out to known locations throughout the day to count the unsheltered. Despite making changes to our unsheltered PIT count methodology in an effort to improve our efforts and ensure a more complete count, the changes made did not affect our CoC's PIT count results. We had the same number of unsheltered on our 2022 PIT count as we had on our 2021 PIT count.

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	1 3	

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

(limit 2,500 characters)

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The Number of First Time Homeless in our CoC decreased 31% (632 to 434) from FY2020 to FY 2021. The CoC looks at the reasons persons give as the primary and secondary cause of their homelessness to determine the risk factors used to identify persons experiencing homelessness. The CoC found that mental health and substance abuse, unemployment, and lack of childcare, transportation, and/or education/skills and life skills like budgeting are among the leading causes of homelessness. Some of these are the result of the lingering effects of COVID. Many of those at risk of becoming homeless are also facing eviction. Others are doubled up with friends or family, and still others have lost their housing and are living in a hotel.

CE Staff work with individuals and families at risk of becoming homeless to problem solve and try to come to a resolution that will prevent them from entering the homeless system. Coordinated Entry employs a shelter diversion tool/Prevention-SPDAT to try to divert and prevent persons from becoming homeless. Due to a lack of ES beds for households with dependent children, a portion of the ESG RRH/HP funds are approved for homeless prevention so families are assisted before they become literally homeless. Our service providers are also very well-versed in available resources and can often make appropriate referrals to employment, education, subsidized housing, DHS, Consumer Credit Counseling, etc. to obtain assistance and prevent them from becoming homeless. When we are unable to prevent them from becoming homeless, the CoC, through the CES, not only prioritizes clients by their VI-SPDAT score, but we also consider tie-breakers including domestic violence, chronically homeless, length of time homeless, and veteran status. CoC/ESG-funded agencies and The CoC Project Monitoring and Development Committee oversee this strategy.

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

(limit 2,500 characters)

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Our CoC is reporting a 68% increase (63 days in FY2020 up to 106 days in FY2021) in the average LOT individuals and persons in families remain homeless for persons in ES and TH. Our CoC holds CE Case Conferencing meetings twice a month where CE staff and providers discuss client situations. and recognizing our community's limited resources, we brainstorm and discuss potential solutions that may help the client self-resolve. CE Staff engage clients in diversion conversations each time they touch the system. The conversations quide the client through strength-based problem solving to identify places they may be able to stay until permanent housing can be identified. All programs have adopted a Housing First model and program staff work to quickly stabilize their housing first. In the FY 2021 competion, we doubled the number of PSH beds in our CoC, and although the expansion project won't begin operation until December 2022, all PSH, RRH, TH, and ES program providers work to quickly move the clients to permanent housing. Program staff work closely with clients to help them overcome barriers preventing them from obtaining their own permanent housing. They assist the homeless with completing applications for permanent housing and housing assistance, both subsidized and unsubsidized, and help ensure they have filled out their applications correctly and completely. Staff also make referrals to appropriate agencies to help the client improve their credit or clear up past due rent and utility bills so that they can obtain their own housing and utilities. They also assist them with appeals if they are denied by the landlord due to credit or rental history or criminal history. Often, homeless clients remain homeless or in an ES or TH program longer than 90 days simply because it takes longer to work through their complex barriers to housing. Those with the longest length of time homeless are identified through the Coordinated Entry intake and that information is used in placement on the prioritization list and referral to housing opportunities. CoC/ESG-funded agencies and the CoC Project Monitoring and Development

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

(limit 2,500 characters)

Committee oversee this strategy.

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Our CoC is reporting a 9% increase (29% to 38%) from FY 20 to FY 21 in the number of persons who exited ES, TH, and RRH programs to a permanent housing destination, and a 5% increase (91% to 96%) from FY 20 to FY 21 in the number of persons who remained in PSH or exited PSH to another permanent housing destination. Although we are reporting an increase, we continue to see a low percentage of persons exiting to permanent housing destinations, especially from our seasonal ES where so many of the clients disappear without completing an exit interview or check in for a night and then disappear for several weeks.

All ES, TH, and RRH providers strive to move clients through their programs to their own permanent housing as quickly as possible. While in a program the clients work on action steps to address and overcome the complex barriers and hardships preventing them from being eligible for housing such as poor credit or rental history, criminal history, past due debt with the housing authority or utility companies, and/or persistent substance abuse and mental health issues. Program staff also work with clients who are denied housing to help them write an appeal to help them plead their case and get housed.

While PSH project participants are not required to participate in supportive services or case management, they are all encouraged to participate in supportive services, and the case managers maintain regular contact with them to ensure thee are successful in the program and are maintaining their permanent housing. Services such as applying for SSI/SSDI, mental health counseling, substance abuse counseling, crisis response, day rehabilitation, psychiatry, medical and dental services, and community support that includes teaching them life skills, such as cleaning, cooking, and hygiene are offered to the clients to improve their housing stability. When it is determined that a client has stabilized their housing, finances, and disability, PSH staff work with the client to help them secure subsidized housing and other supports to successfully transition and maintain their own permanent housing. CoC/ESG-funded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

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

(limit 2,500 characters)

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Our Return to Homelessness rate remains fairly steady and low. Of the 200 persons who exited to a permanent housing destination, only 4 persons (2%) returned to homelessness in 6 months. This is an increase of 1% from FY 20, but the 6-month return to homelessness rate remains well below 5%. Thirteen persons (7%) returned to homelessness in 12 months which is an increase of 5% from FY 20, but still below 10%. Eleven (11) of those who had a return to homelessness had exited from TH; 3 had exited from street outreach, and 3had exited from PH. Through Coordinated Entry and the sharing agreement among providers we can fully utilize system-level HMIS reports to identify common factors and identify the individuals and families who return to homelessness. Once clients enter our homeless programs, program staff provide intensive case management to determine the root cause of their homelessness and to provide education and supportive services to prevent a reoccurrence of homelessness. Often, through that intensive case management, various assessments and questions are asked to determine what barriers exist, what needs are unmet, and what struggles are present. Case management also provides guidance and accountability as the case manager and client work together to set and achieve goals, access various community resources, work toward and/or maintain a healthy and positive lifestyle, develop social skills and increase community involvement, etc. In addition to PSH programs, within our CoC there are a couple of ESG-funded RRH programs that can provide rental assistance for up to 12 months, allowing the clients time to address mental health and substance abuse issues, obtain income, and develop financial and housing stability to avoid a return to homelessness. Knowing when someone is returning to homelessness and knowing which other programs the client has been in allows us to better assess their situation and work with the client to set goals and connect to community resources (substance abuse treatment, mental

and break the cycle and prevent future returns to homelessness. CoC/ESG-funded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

health care, life skills – budgeting/money management, etc.) that will help them overcome their barriers to maintaining permanent housing and self-sufficiency

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

(limit 2,500 characters)

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Although the number of persons who exited with increased income from employment decreased by 2% (from 34% in FY 2020 to 32% in FY 2021), our rate of employment income remained higher than 20%. Through regular case management, the clients set education and/or employment goals designed to help them increase access to employment and cash income from employment. While setting goals, the case manager often discovers that the client has a specific skill set but is unable to work in the desired field because they have an expired license/certification or need to finish classes/credits in order to earn the certification. The case manager then assists the client with accessing resources to pay for re-certification, classes, etc.

All CoC-funded projects refer clients to mainstream employment organizations such as IowaWorks, Goodwill, Nebraska Vocational Rehab, Western Iowa Tech Community College, and Boost for classes to help them develop skills (application/resume writing, interviewing, job-related) and find/maintain employment. Staff from Iowa Workforce Development (IowaWorks) regularly attend the CoC meetings both to keep the CoC informed of their initiatives and how to access their services and to work with the CoC to help the homeless gain employment and cash income. In addition, there are several local shortterm staffing agencies that help connect people with employment through various employers. Case managers and specialized classes through lowaWorks assist the clients with overcoming the barriers (criminal history, transportation, childcare, etc.) preventing them from obtaining/maintaining employment. lowaWorks tracks employment services, provides workshops, and completes skill assessments. IowaWorks also works with local mental health agencies on how to work with clients struggling with chronic mental illness leading to unemployment or difficulty obtaining/maintaining employment. CoC/ESG-funded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

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

(limit 2,500 characters)

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The number of persons who exited with increased non-employment cash income decreased by 11% (from 37% in FY 2020 to 26% in FY 2021) and our rate of non-employment income was less than 50%. All agencies recognize the need for clients to have a source of cash income in order to pay their rent and other bills. The CoC is working to increase non-employment income by inviting non-cash benefits providers to present information about their benefits at our CoC meetings. The information provided includes more specific information about available benefits, eligibility requirements, and the application process. Agencies also collaborate to problem solve and determine non-employment cash income sources for which clients may be eligible. Regular case management is an important strategy to help clients access non-employment cash income. For clients who are fleeing domestic violence, often they either were not working or they left/lost their job when they fled. While in shelter, shelter staff assist them with applying for FIP/TANF so that they have a source of cash income until their housing can be stabilized and they can return to work. For clients who are unable to work due to a disability, staff help them apply for SSDI/SSI benefits. Even with a SOAR-trained staff, this can be a long process that many clients could not and would not complete without assistance. Among our agencies there are 2 staff who has completed SOAR training. These staff work with PSH clients and assist them with obtaining the required information and applying for SSDI/SSI benefits. The CoC is encouraging all projects, especially street outreach and coordinated entry to have at least one staff complete and stay current on SOAR training. Once a client is approved for SSI/SSDI, the case manager continues to assist them with budgeting or requesting a Representative Payee, if needed, to assist them with budgeting and money management.

CoC/ESG-funded agencies and the CoC Project Monitoring and Development

Committee oversee this strategy.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3	A-1. New PH-PSH/PH-RRH Project–Leveraging Housing Resources.		
	NOFO Section VII.B.6.a.		
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.		
	La company of the state of the	NI-	
	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	
3	A-2. New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.		
	NOFO Section VII.B.6.b.		
	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No	
3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.		
	NOFO Sections VII.B.6.a. and VII.B.6.b.		
If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.			
Project Name	Project Type Rank Number Leverage T	уре	
This list contains no items			

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3B. New Projects With Rehabilitation/New Construction Costs

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

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

3B-1.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section VII.B.1.s.	
Is ye for I	our CoC requesting funding for any new project application requesting \$200,000 or more in funding housing rehabilitation or new construction?	No
3B-2.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section VII.B.1.s.	
	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and	
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.	

(limit 2,500 characters)

N/A

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

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

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

		,
3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	
proj	our CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component ects to serve families with children or youth experiencing homelessness as defined by other eral statutes?	No
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	
	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.	
	If you answered yes to question 3C-1, describe in the field below:	
	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.	

(limit 2,500 characters)

N/A

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4A. DV Bonus Project Applicants

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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77	A-1. New DV Bonus Project Applications.		
	NOFO Section II.B.11.e.		
	Did your CoC submit one or more new project applications for DV Bonus Funding?		Yes
4A	1a. DV Bonus Project Types.		
	NOFO Section II.B.11.e.		
	Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2022 Priority Listing.		
	Project Type		
1.	SSO Coordinated Entry	No	
2.	PH-RRH or Joint TH and PH-RRH Component	Yes	
Vou m	ust click "Save" after selecting Ves for element 1 SSO Coordinated	Entry	
	ust click "Save" after selecting Yes for element 1 SSO Coordinated to view questions 4A-2, 4A-2a. and 4A-2b. A-3. Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area	Entry	
	to view questions 4A-2, 4A-2a. and 4A-2b.	Entry	
	to view questions 4A-2, 4A-2a. and 4A-2b. A-3. Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	Entry	140
	to view questions 4A-2, 4A-2a. and 4A-2b. A-3. Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area. NOFO Section II.B.11.(e)(1)(c)	Entry	140 96

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4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section II.B.11.e.(1)(c)
	Describe in the field below:
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,500 characters)

Our CoC calculated the number of DV survivors needing housing or services using data from our HMIS and DVMIS system. Currently there are 12 clients who are fleeing Domestic Violence situations enrolled in projects that are closely associated with homelessness (ES, SH, TH, SO, RRH, PSH) and DO NOT have a move-in date. Another 78 clients who have a history of DV are enrolled in projects that are closely associated with homelessness (listed above) and DO NOT have a move-in date. According to the Coordinated Entry Prioritization List, there are currently 14 households on the list who are fleeing domestic violence situations. Also accounted for in these numbers is the local DV shelter census, which during the month of August was 36. The total number of 140 indicates the number of DV survivors who are in need of housing or services.

The data sources for this data are the local CoC's HMIS System, DVMIS System, and Empower database for advocates through the Department of Justice.

Our unmet need is listed at 44 survivors. The primary barrier to meeting needs is the availability of safe, affordable rental housing units. The second barrier is funding or assistance for paying rent for survivors. Other barriers our CoC has encountered include substance use or unmanaged mental health. Prior tenants causing property damages has resulted in a lack of landlord engagement or landlords requiring a double deposit and above fair market rent for housing units. Our CoC continues to engage landlords and provide funding as we're able to mediate damages and make repairs. Our CoC also offers support to survivors through case management and referrals and connections to community and mainstream resources.

	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

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Applicant: Sioux City/Dakota, Woodbury Counties CoC **Project:** IA-500 CoC Registration FY 2022

IA-500 COC_REG_2022_191924

Applicant Name

SafePlace

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

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2022 Priority Listing:

1.	Applicant Name	SafePlace
2.	Project Name	SafePlace RRH
3.	Project Rank on the Priority Listing	5
4.	Unique Entity Identifier (UEI)	DNP9VAL6GG98
5.	Amount Requested	\$110,855
6.	Rate of Housing Placement of DV Survivors–Percentage	70%
7.	Rate of Housing Retention of DV Survivors–Percentage	86%

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

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below

- 1. how the project applicant calculated both rates;
- whether the rates accounts for exits to safe housing destinations; and
- the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

The rate of housing placement and rate of housing retention were calculated using exit destination data from the CoC APR report for SafePlace's RRH programs from 07/01/2021 - 06/30/2022. To calculate the rate of housing placement in question 4A-3b, we used question 22c. Length of Time Between Project Start Date and Housing Move-in Date. Our APR showed 54 persons who had applied for housing, and 38 of those had successfully moved into housing for a 70% housing placement rate. To calculate the rate of housing retention in question 4A-3b, we used question 23c. Exit Destinations. Our APR showed 51 persons completed the program, and 44 of those retained their permanent housing for an 86% housing retention rate.

The rates account for exits to safe housing destinations.

The data source used was SafePlace's CoC APR report pulled from the DVMIS comparable database system.

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4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section II.B.11.e.(1)(d)
	Describe in the field below how the project applicant:
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;
2.	prioritized survivors–you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;
3.	determined which supportive services survivors needed;
4.	connected survivors to supportive services; and
5.	moved clients from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends.

(limit 2,500 characters)

DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing. Provider staff assisted the survivor with obtaining documents necessary for housing such as ID's, SS cards, and birth certificates. Case managers completed basic screening and housing instability assessments with all survivors. These assessments helped determine the individual and familial barriers to housing. From this information a case plan was developed to best meet the survivor's need and help them achieve self sufficiency and safe, affordable housing.

SafePlace prioritizes survivors through Coordinated Entry. CE Intakes are completed by SafePlace staff and entered into a comparable database, DVIMS. The prioritization list is a generated from DVIMS with non-identifying numbers assigned to survivors and combined with the prioritization list generated by the CoC's HMIS system. Merging the DVMIS and HMIS prioritization lists ensures all in need are prioritized equally and have equal access to all HUD-funded housing and services. Additionally, fleeing DV is a tie-breaker when prioritizing clients through CE.

We determined which supportive services survivors needed by administering a strength-based assessment and motivational interviewing during case management. Based on client need, eligibility, and choice, the case manager assisted the survivor with developing a plan for accessing supportive services. We connected survivors to supportive services by maintaining a working knowledge of available services and by developing and/or maintaining strong working relationships with the community partners who provide the service. SafePlace coordinated the referral to supportive services based on client choice and ensured a warm hand-off was in place when the client was referred. SafePlace staff assisted with applications as needed.

SafePlace moved survivors from assisted housing to housing they could sustain by ensuring the unit where the survivor was receiving assistance met the qualifications for a housing choice voucher or other subsidy. The case manager assisted the survivor with applying for a Housing Choice Voucher and other properties that have tenant- or project-based subsidies to have continued assistance in place prior to our assistance ending. If the survivor was ineligible for subsidized housing assistance, the case manager worked with the client to secure non-subsidized affordable housing and create a working budget based on their income and expenses

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Project:	IA-500	$C \cap C$	Registration	FΥ	2022
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4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section II.B.11.e.(1)(d)
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping information and locations confidential;
4.	training staff on safety and confidentially policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

All employees of SafePlace are Certified Domestic Abuse Advocates through the State of Iowa. All information the Survivor provides is entered into both the Empower database and DVMIS, which is a comparable HMIS database. Both of these databases assigns the survivor a unique number identifier to de-identify the survivor. To ensure the survivor's privacy/ confidentiality during the intake, survivors are interviewed alone, by the advocate, either on the phone or in person in a closed office. If a survivor brings a support person or other person with them, they are asked to wait in another location while the advocate and the survivor complete the intake and interview. This allows the survivor to speak freely with the advocate and minimizes, in not completely eliminates, potential coercion or survivors.

Anyone in an unsafe situation due to domestic abuse, sexual abuse, or human trafficking is offered placement in our emergency shelter. Once in shelter advocates began working with the survivor to locate safe, stable, permanent housing. The advocate and the survivor explored what "safe" looks like to the survivor and, adhering to client choice, work to locate and place the survivor in housing that keeps the survivor safe.

The location of the shelter is not published. Client information is kept confidential on secure databases, Empower and DVMIS ServicePoint. Any request for a Release of Information request is discussed together with the advocate and the survivor. The advocate advises the survivor of the pros and cons to signing a Release of Information. Both the survivor and the advocate sign the release of information.

Training for staff on safety and confidentiality policies and practices is included in the initial advocacy certification training. After the initial training, all staff receive ongoing training at least annually. Adherence to safety and confidentiality policies and practices is also reviewed during staff supervision and performance reviews.

Safe Place shelter has a security system with cameras. We are also a locked facility and can view and speak with anyone who wishes to enter our shelter. For scattered site RRH locations, SafePlace assists the survivor with locating housing where they feel secure. We also provide financial assistance to purchase and install new locks to keep survivors safe. SafePlace will never reveal the location of the shelter or any survivor's individual location.

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4A-3d.1. Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.

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

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

SafePlace has evaluated its ability to ensure the safety of DV survivors served in our emergency shelter and rapid rehousing projects by reflecting on past and current practices, policies, and procedures. For more than 30 years, SafePlace has worked to safely house survivors first in shelter and then in the survivors own housing. Upon entering SafePlace, survivor safety is ensured by having a locked shelter and security cameras on property. Each survivor develops safety plans while meeting with their advocate. When a survivor transitions out of shelter, whether to a rapid rehousing placement or another permanent housing placement, our advocates assist the survivor with locating safe housing and are mindful of the housing location and whether the facility is locked. The agency has an Emergency Transfer Plan for Victims of Domestic Violence, etc. in accordance with VAWA. The Emergency Transfer Plan policies and procedures identify tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. The Emergency Transfer Plan allows a tenant who is/has been a victim of Domestic Violence et al to request an emergency transfer from the tenant's current unit to another unit if the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit, of if the tenant is a victim of sexual assault and the assault occurred on the premises within the 90-calendar-day period preceding a request for an emergency transfer, whether or not they are in good standing with the program. The plan ensures client confidentiality and assists the client with securing other safe housing either within the same property or from another housing provider if there are no safe and available units in their current property. SafePlace adheres to the U.S. Department of Justice Office on Violence Against Women VAWA Confidentiality Provision, Family Violence Prevention and Services Act. and VOCA regulations, prohibiting sharing personally identifying information about survivors without informed, written, and reasonably time-limited consent. Areas identified for improvement include continued training in survivor confidentiality with staff and program participants and increasing creativity when securing housing for survivors within and outside of our CoC.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs:	

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2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

Over the past years, SafePlace's advocates have worked with survivors, allowing the survivor to express their wishes and follow their desires when making the decision whether to leave or stay with/return to their abuser. We take the same approach when housing survivors. SafePlace advocates have conversations with each survivor about what has worked well in the past and what they desire for their future, and using those strengths, they assist the survivor with developing their most appropriate housing option and securing safe, affordable housing.

SafePlace advocates value all and meet survivors where they are in their life journey. Our shelter practices housing first and is solution-focused. The project does not use punitive interventions, and program participation is not terminated for reasons such as failure to participate in program services or having no or too little income. Advocates are trained in trauma-informed, victim-centered approaches and are expected to have transparency with survivors, empowering them through choice. The equality wheel is referenced daily as a model for staff and participant interactions.

At SafePlace, morning groups are available five days a week and evening groups are available two days a week. Additionally, there are multiple survivor groups that meet within the community at various times of the day/week. During these group meetings, trained staff provide survivors information about trauma, the effects of trauma, and resiliency in the face of adversity. Cultural, historical, and gender issues and topics are included in staff trainings and in group discussions.

As advocates, our staff is trained in supporting, defending, and pleading on behalf of the survivors. Using a strength-based, reflective questioning framework helps survivors share their strengths, goals, and aspirations. The strengths identified by the survivor help the advocate empower the survivor to attain their goals and aspirations. Typically, the advocate meets with the survivor once a week to reflect on strengths and empower the survivor to see their own value.

SafePlace advocates complete trainings on civil rights, cultural competence, equal access, and nondiscrimination. Advocates listen to survivors when they share what safety looks like to them. SafePlace uses a language line to overcome language barriers including American Sign Language. SafePlace is also accessible for all abilities and has advocated to secure accessible housing outside of shelter.

In addition to the morning and evening groups and individual case management, SafePlace partners with local providers and houses of worship to provide a variety of opportunities for survivors to connect with others and the community. We provide transportation for survivors to participate. SafePlace also invites various community groups to train advocates in the spiritual needs of diverse cultures. An example of this is understanding when and how program participants with Indigenous decent may want to sage.

SafePlace has partnered with community agencies such as Crittenton Center, mental health providers, childcare providers, and lowa Legal Aid to offer support for survivor parenting. We make referrals for parents wishing to participate in parenting classes or to connect with Parent Child Interaction Therapy (PCIT) and counseling/play therapy for them and their children. We have assisted or referred parents to childcare providers so that parents are able to attend work and appointments. Most support groups also provide childcare during group. We help parents connect with lowa Legal Aid to resolve familial legal and income tax issues.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	

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

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

(limit 5,000 characters)

During SafePlace's most recent funding year, 9/1/21 - 8/31/22, SafePlace advocates provided the following supportive services to survivors: *Criminal Justice Support & Advocacy - Advocates provided 57.25 hours of criminal justice support and advocacy. This included: assisting criminal justice & juvenile justice proceedings; notifying the survivor of case status, hearing dates, plea agreements, and sentencing terms; preparing survivor impact statements; and accompanying a survivor to court proceedings.

*Housing Search and Advocacy - Advocates provided over 194 hours of housing search and advocacy. This included: advocating with landlords; assisting survivors with completing housing forms/applications; advocating on behalf of the survivor to preserve their housing; and accompanying and advocating on behalf of survivors at housing hearings.

*Childcare Assistance - & the coordination of services Advocates provided 60.25 hours of assistance with securing and coordinating childcare services. This included: assisting with or advocating for a survivor in obtaining child care; maintaining child care services; and providing child care so the survivor could attend counseling or other appointments pertaining to the victimization. *Transportation Assistance - Advocates provided 98 hours of assistance advocating, obtaining, or coordinating transportation for survivors and their children. This included securing and arranging transportation with the school district so that their children could attend their home school and securing and arranging transportation to work and appointments.

*Economic & Education Advocacy totaled 67.25 hours. Advocates provided 67.25 hours of economic and education advocacy. This included: supporting survivors and their children in the school and education system and financial management issues such as improving credit, opening a bank account, and developing a household budget.

*Crisis DV Services and Intervention - This is one of the largest services we provide. Advocates provided 427.5 hours of Crisis DV Services and Intervention. This included identifying, assessing, and intervening with a survivor in crisis so as to restore balance and reduce the effects of the crisis in the survivor's life.

*Case Management - The largest service we provide is case management. Advocates provided 472 survivors for a total of 1305.5 hours of case management. Case management services included: working with a survivor to examine the impact of the crime and identifying needs and developing a plan of services and resources needed to respond to and meet the survivor's needs. Each service was identified by the survivor using a strength-based assessment and motivational interviewing. Listening to the survivor's voice, advocates carried out services using trauma-informed support. Providing advocacy with a high regard to confidentiality and trauma-informed care allowed survivors to move quickly from shelter to permanent housing. Our transitions advocate positions provide follow-up case management and services after a survivor leaves shelter. Through ongoing advocacy, informational resources offered by the agency, and mainstream resources and supportive services, the survivor was empowered to regain her self-sufficiency and obtain permanent housing.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(e)	
	Provide examples in the field below of how the new project will:	

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1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans works towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

SafePlace advocates will continue to work with and listen to survivors, allowing the survivor to express their wishes and follow their wants and needs in regards to housing. SafePlace advocates will have conversations with each survivor about what has worked well in the past and what they desire for their future, and using those strengths they will assist the survivor with developing their most appropriate housing option and securing safe, affordable housing. SafePlace advocates value all and meet survivors where they are in their life journey. Our shelter will continue to practice a housing first and solution-focused model. The project will not use punitive interventions, and program participation will not be terminated for reasons such as failure to participate in program services or having no or too little income. Advocates will receive training in trauma-informed, victim-centered approaches and are expected to have transparency with survivors, empowering them through choice. The equality wheel is referenced daily as a model for staff and participant interactions. At SafePlace, morning groups are available five days a week and evening groups are available two days a week. Additionally, there are multiple survivor groups that meet within the community at various times of the day/week. During these group meetings, trained staff provide survivors information about trauma, the effects of trauma, and resiliency in the face of adversity. Cultural, historical, and gender issues and topics are included in staff trainings and in group discussions.

As advocates, our staff will be trained in supporting, defending, and pleading on behalf of the survivors. Using a strength-based, reflective questioning framework helps survivors share their strengths, goals, and aspirations. The strengths identified by the survivor help the advocate empower the survivor to attain their goals and aspirations. Typically, the advocate meets with the survivor once a week to reflect on strengths and empower the survivor to see their own value.

SafePlace advocates will continue to participate in trainings on civil rights, cultural competence, equal access, and nondiscrimination. Advocates listen to survivors when they share what safety looks like to them. SafePlace uses a language line to overcome language barriers including American Sign Language. SafePlace is also accessible for all abilities and has advocated to secure accessible housing outside of shelter.

In addition to the morning and evening groups and individual case management, SafePlace will partner with local providers and houses of worship to provide a variety of opportunities for survivors to connect with others and the community. We will provide transportation for survivors to participate. SafePlace will also invite various community groups to train advocates in the spiritual needs of diverse cultures. An example of this is understanding when and how program participants with Indigenous decent may want to sage. SafePlace will continue our partnerships with community agencies such as

Crittenton Center, mental health providers, childcare providers, and Iowa Legal Aid to offer support for survivor parenting. We will make referrals for parents wishing to participate in parenting classes or to connect with Parent Child Interaction Therapy (PCIT) and counseling/play therapy for them and their children. We will assist or refer parents to childcare providers so that parents are able to attend work and appointments. Most support groups also provide childcare during group. We will help parents connect with Iowa Legal Aid to resolve familial legal and income tax issues.

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

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

(limit 2,500 characters)

SafePlace has the distinct advantage of providing housing along the full continuum of care, from an emergency shelter to permanent housing - rapid rehousing. This allows survivors to connect with each other as well as with staff and DV advocates to become more aware of their own and each other's lived experience. Survivors are encouraged to share their experiences and provide constructive feedback about our programs and services, especially regarding the assistance they received while in shelter or RRH. Listening sessions with SafePlace directors, staff, and survivors occur at least quarterly to gain insight and input for policy and program development. SafePlace firmly believes survivors are the experts on their needs and value recommendations and ideas shared from survivors as a result of their lived experience and interaction with various systems.

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.	B. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.			
4.	Attachments must match the questions they are associated with.			
5.	Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.			
6.	If you cannot read the attachment, it is likely we cannot read it either.			
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).			

- . We must be able to read everything you want us to consider in any attachment.
- 7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	IA500_PHA Homeles	08/26/2022
1C-7. PHA Moving On Preference	No	IA500 - PHA Movin	08/26/2022
1E-1. Local Competition Deadline	Yes	IA500 - Local Com	08/26/2022
1E-2. Local Competition Scoring Tool	Yes	IA500 - Local Com	08/26/2022
1E-2a. Scored Renewal Project Application	Yes	IE-2a. Scored Ren	09/14/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	1E-5. Notificatio	09/14/2022
1E-5a. Notification of Projects Accepted	Yes	1E-5a. Notificati	09/14/2022
1E-5b. Final Project Scores for All Projects	Yes	1E-5b. Final Proj	09/14/2022
1E-5c. Web Posting–CoC- Approved Consolidated Application	Yes	1E-5c Web Posting	09/21/2022
1E-5d. Notification of CoC- Approved Consolidated Application	Yes	Notification of C	09/21/2022
3A-1a. Housing Leveraging Commitments	No		

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Applicant: Sioux City/Dakota, Woodbury Counties CoC **Project:** IA-500 CoC Registration FY 2022

IA-500 COC_REG_2022_191924

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

Attachment Details

Document Description: IA500_PHA Homeless Preference

Attachment Details

Document Description: IA500 - PHA Moving On Preference

Attachment Details

Document Description: IA500 - Local Competition Deadline

Attachment Details

Document Description: IA500 - Local Competition Scoring Tool

Attachment Details

Document Description: IE-2a. Scored Renewal Project Application

Attachment Details

FY2022 CoC Application	Page 77	09/26/2022
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Document Description: 1E-5. Notification of Projects Rejected-Reduced

Attachment Details

Document Description: 1E-5a. Notification of Projects Accepted

Attachment Details

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

Attachment Details

Document Description: 1E-5c Web Posting CoC-Approved Consolidated

Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated

Application

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/16/2022
1B. Inclusive Structure	09/16/2022
1C. Coordination and Engagement	09/16/2022
1D. Coordination and Engagement Cont'd	09/16/2022
1E. Project Review/Ranking	09/21/2022
2A. HMIS Implementation	09/16/2022
2B. Point-in-Time (PIT) Count	09/16/2022
2C. System Performance	09/16/2022
3A. Coordination with Housing and Healthcare	09/26/2022
3B. Rehabilitation/New Construction Costs	09/16/2022
3C. Serving Homeless Under Other Federal Statutes	09/16/2022

FY2022 CoC Application	Page 80	09/26/2022
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Project: IA-500 CoC Registration FY 2022 COC_REG_2022_191924

4A. DV Bonus Project Applicants 09/16/2022

4B. Attachments Screen 09/21/2022

Submission Summary No Input Required

Excerpt from the Sioux City PHA Administration Plan:

Family Unification Program, Mainstream for Persons with Disabilities, VASH

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

PHA Policy

The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.

The PHA will use local preference to select families from the waiting list.

The PHA has selected the following system to apply local preferences:

Local preferences will be aggregated using the following system:

Each preference will receive an allocation of points. The more preference points an applicant has, the higher the applicant's place on the waiting list:

3 points – involuntary displacement

3 points – a family can only be eligible for ONE of these two preferences:

Moving up Preference – limited to 50 per year on a rolling basis

OR

<u>Homeless Student</u> – limited to 100 per year on a rolling basis

1 point – working preference/elderly (62 years old or older)/disabled

Among applicants with equal preference status, the waiting list will be organized by date and time of completed application.

At the time of application, an applicant's entitlement to a local preference will be verified before they are placed on the waiting list. The PHA may verify all preference claims at the time they are approaching the top of the waiting list when the full application is processed if a change in circumstances seems to have occurred.

If the preference verification indicates that an applicant does not qualify for the preference, the applicant will be returned to the waiting list without the local preference. If at the time the family applied, the preference claim was the only reason for placement of the family on the list and the family cannot verify their eligibility for the preference, the family will be removed from the list.

Definition of Local Preferences

Moving Up Preference: Siouxland Coalition to End Homelessness (CoC) partners will identify persons or families in Permanent Supportive Housing (PSH) and Transitional Housing (TH) that meet criteria: were previously homeless prior to entry in to the PSH or TH program but who no longer need that level of supportive services. The Moving Up Preference will be limited to 50 admission preferences per year on a rolling basis, and will contribute significantly to the to the community's overall efforts to end homelessness by freeing up units for currently homeless families and individuals with disabilities who need housing combined with services. To qualify:

- · Voluntary Tenant Participation
- · Permanent Supportive Housing Residency for at least 2 years, OR
- · Transitional Housing Residency for at least 3 months
- · Tenant in good standing
- · Referrals are restricted to service providers only; Continuum of Care (CoC) Providers with an Memorandum of Understanding (MOU)

Homeless Families with School Aged Children: This preference will identify homeless school aged children in the Sioux City Community School District that meet the criteria: meet HUD's definition of homelessness and are identified and referred by Sioux City Community Schools and other private Sioux City schools under MOUs. The Homeless Families with School Aged Children Preference will be limited to 100 admission preferences per year on a rolling basis. PHAs and schools can collaborate to identify and assist children whose families are experiencing homelessness and to support housing stability. By working together to end homelessness for families, schools and PHAs can strengthen communities and improve educational outcomes for students.

To qualify:

- Voluntary Tenant Participation
- Meet HUD's definition of homelessness: Category 1
- Referrals are restricted to Sioux City Community Schools, both public and private, who will identify and make referrals with an Memorandum of Understanding (MOU)

The students and their families must meet the definition of homelessness:

Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- a) An individual or family with a nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or
- b) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local governments for low-income individuals); *or*

c) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Working Preference: Families with at least one adult who is:

- 1) Employed an average of at least twenty hours per week for at least 6 months.
- 2) Is receiving unemployment benefits
- 3) Is an active, full time participant in an accredited education and/or training program designed to prepare the individual for the job market.
- 4) Is involved in a combination of education and employment to equal at least twenty hours per week for at least 6 months.
- 5) This preference is automatically extended to elderly families or families whose head or spouse is receiving income based on their inability to work or to which a doctor or other professional certifies his/her disability.

Involuntary Displacement

Involuntarily Displaced applicants are applicants who have been involuntarily displaced and are not living in standard, permanent replacement housing, or will be involuntarily displaced within no more than six months from the date of verification by the PHA.

Families are considered to be involuntarily displaced if they are required to vacate housing as a result of:

- 1. A disaster (fire, flood, earthquake, etc.) that has caused the unit to be uninhabitable.
- 2. Federal, state or local government action related to code enforcement, public improvement or development, as long as the action is unrelated to the actions of the tenant.
 - ➤ If the owner is an immediate family relative and there has been no previous rental agreement and the applicant has been part of the owner's family immediately prior to application, the applicant will not be considered involuntarily displaced.
- 3. To avoid reprisals because the family provided information on criminal activities to a law enforcement agency and, after a threat assessment, the law enforcement agency recommends rehousing the family to avoid or reduce risk of violence against the family.
 - The family must be part of a Witness Protection Program, or the HUD Office or law enforcement agency must have informed the PHA that the family is part of a similar program. The PHA will take precautions to ensure that the new location of the family is concealed in cases of witness protection.
- 4. By hate crimes if a member of the family has been the victim of one or more hate crimes, and the applicant has vacated the unit because of the crime or the fear of such a crime has destroyed the applicant's peaceful enjoyment of the unit.

Excerpt from South Sioux City Housing Agency Administration Plan:

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

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PHA Policy

<u>Domestic (first priority):</u> Victims of Domestic Violence. (See qualifications for preference)

<u>Work, Disabled (second priority)</u>: Head, Spouse or Sole Member maintains employment or persons over the age of 62 or receiving Social Security Disability or Supplemental Security Income or verified as disabled.

Residential (Third priority): Family/Individual maintains a permanent place of residence in the HA's jurisdiction. This preference applies to a Family/Individual who currently maintains a residence in the South Sioux City Housing Agencies jurisdiction for a minimum of 6 months prior to the application date. (This preference requires Applicant to provide a current active Lease with their name on it or a current local electric bill with their name & address, to prove permanent residency.)

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The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

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From: Amy Keairns

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"kashe.utesch@iowa.gov"; "katie@siouxlandcommunityfoundation.org"; "kaylaj@havenhousefsc.org"; "kimgsw@yahoo.com"; "office@sheslerhall.com"; "kweaver@longlines.com"; "Kristinewa@siouxlan.net"; "thomas.lorelei@yahoo.com"; "mcarlson@siouxlandmentalhealth.com"; "maria@safeplacesiouxland.org"; "marit@lilamaeshouse.onmicrosoft.com"; "Mary.Jordan7@va.gov"; "Angela.McelmurayDundee@va.gov"; Michelle

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"robin@safeplacesiouxland.org"; "jdeacon@dismas.com"; "sara.deluna@icalliances.org"; "sarah c hughes@uhc.com"; "Shelby.Marsden@amerigroup.com"; "stacy.schenk@nebraska.gov"; "stephanie.pickinpaugh@icalliances.org"; "spospisil@poncatribe-ne.org"; "ttieck@slandchc.com";

"tgerman@nencap.org"; Theresa Jochum; "terry I. inserra@hud.gov"; "tshanks@thewarmingshelter.com";

"tim@homeforwardiowa.org"; "valerie.uken@winnebagotribe.com"; "wjackson@1fbusa.com";

"bmathis@sschousingagency.com"; "stephanie@safeplacesiouxland.org"

Subject: FY 2022 CoC Competition NOFO and Request for Proposals

Date: Tuesday, August 9, 2022 3:00:00 PM

Attachments: FY 2022 Continuum of Care Competition and Noncompetitive YHDP NOFO.pdf

Good afternoon! Attached is the FY2022 Continuum of Care Competition NOFO. This is a competition and any agency that has the capacity and ability to manage a project as outlined in the NOFO is encouraged to participate and apply for funding.

HUD has a very quick turn around this year for applications, so if you are interested in a new or renewal project, **your application must be submitted in eSnaps by 5pm on Wednesday, August 31, 2022.**

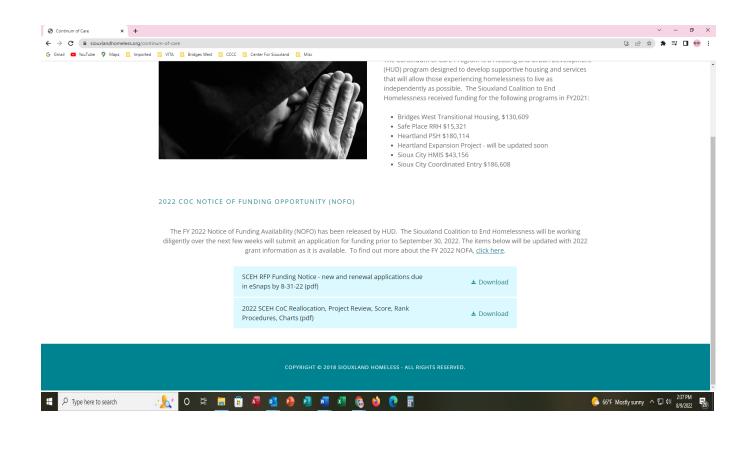
Below is a link to the Siouxland Coalition to End Homelessness website. There you will find a link to the Request for Proposals as well as other helpful links regarding this process. https://siouxlandhomeless.org/continum-of-care

If you have questions, please refer to the Request for Proposals and the NOFO. If you are unable to find the answer to your question please reach out to either Susan McGuire or me.

Thank you!

Amy Keairns
Neighborhood Services Outreach Supervisor
City of Sioux City
521 Nebraska Street

712-279-6255



Updated Local Competition Posting - Notifying the Public that the New and Renewal Applications were available in eSnaps

From: Amy Keairns

To: Amy Keairns; ftenuta@iowalaw.org; Susan McGuire; CENTER; Alison Justice; alli.larson412@gmail.com;

<u>amanda.eldridge@westcare.com;</u> <u>abloch@cathchar.com;</u> <u>amunderloh@nencap.org;</u> <u>Amy Tooley;</u>

sara.anderson@iowa.gov; agreen@caasiouxland.org; bmathis@southsiouxcity.org; wflynn@caasiouxland.org;

bjohnson@poncatribe-ne.org; cdruilhet@gmail.com; ckuchta@connectionsaaa.org; Clara Coly;

cjsgardenstudio@gmail.com; Danielle Dempster; MobilityManager@simpco.org; debbieg@havenhousefsc.org; dpalmer@siouxlandmentalhealth.com; dennis.brockhaus@materdeisc.org; eworrell@siouxlandmentalhealth.com; gvaldovinos@cathchar.com; gary.wickering@icalliances.org; gbeckwith@iowalaw.org; ghouts@slandchc.com;

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Stellish.Jackie@jobcorps.org; jlogan@caasiouxland.org; jennifer@heartlandcounselingservices.com; Jeremy

McClure; jessica@heartlandcounselingservices.com; Jacob Harlan; jtwidwell@snbonline.com; john.mccalley@amerigroup.com; Julie Albright; jschaap@siouxlandmentalhealth.com; Karen Mackey; kashe.utesch@iowa.gov; katie@siouxlandcommunityfoundation.org; kaylaj@havenhousefsc.org; kimgsw@yahoo.com; office@sheslerhall.com; kweaver@longlines.com; Kristinewa@siouxlan.net; thomas.lorelei@yahoo.com; mcarlson@siouxlandmentalhealth.com; maria@safeplacesiouxland.org; marit@lilamaeshouse.onmicrosoft.com; Mary.Jordan7@va.gov; Angela.McelmurayDundee@va.gov; Michelle

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stephanie@safeplacesiouxland.org, Women Aware Education

Subject: FY 2022 CoC Competition NOFO and UPDATED Request for Proposals

Date: Tuesday, August 16, 2022 3:59:14 PM

Attachments: FY 2022 Continuum of Care Competition and Noncompetitive YHDP NOFO.pdf

On August 9, 2022, I sent you the email below. At that time, HUD did not have the applications available in eSnaps. This email is to let you know that as of today, the New, Renewal and CoC Planning Project Applications are now available in eSnaps. Click the link below to access information and the updated RFP that lists the deadlines for this competition. If you have any questions, please refer to the NOFO attached. Thank you!

https://siouxlandhomeless.org/continum-of-care.

Good afternoon! Attached is the FY<mark>2022 Continuum of Care Competition NOF</mark>O. This is a competition and any agency that has the capacity and ability to manage a project as outlined in the NOFO is encouraged to participate and apply for funding.

HUD has a very quick turn around this year for applications, so if you are interested in a new or renewal project, **your application must be submitted in eSnaps by 5pm on Wednesday, August 31, 2022.**

Below is a link to the Siouxland Coalition to End Homelessness website. There you will find a link to the Request for Proposals as well as other helpful links regarding this process. https://siouxlandhomeless.org/continum-of-care

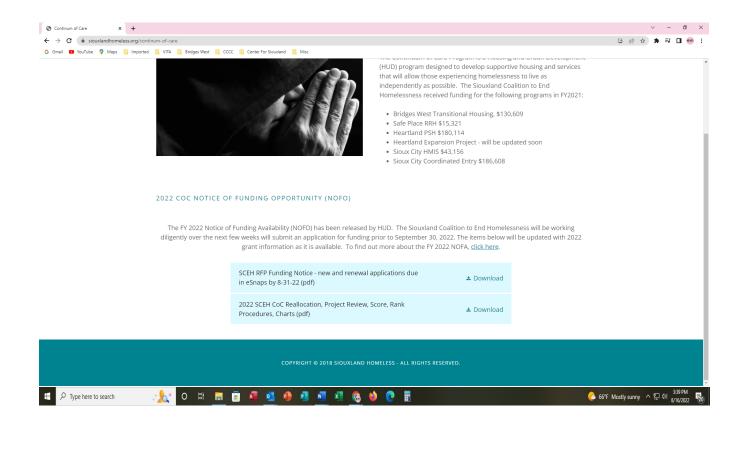
If you have questions, please refer to the Request for Proposals and the N<mark>OF</mark>O. If you are unable to find the answer to your question please reach out to either Susan McGuire or me.

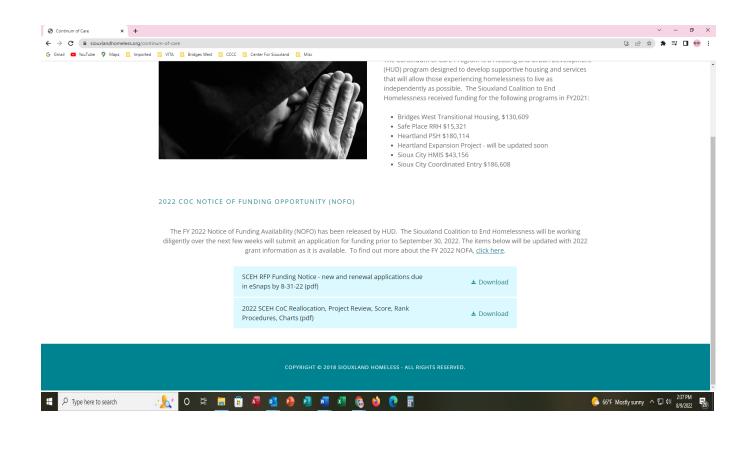
Thank you!

The https://siouxlandhomeless.org/continum-of-care

Amy Keairns

Neighborhood Services Outreach Supervisor City of Sioux City 521 Nebraska Street 712-279-6255





Siouxland Coalition To End Homelessness New and Renewal Project Review/Score/Rank Policy

Policy: to determine the process by which new and renewal project applications will be reviewed, scored, and ranked within HUD's CoC Program Competition.

Renewal HMIS, SSO-Coordinated Entry, PH-PSH, PH-RRH, and TH Projects

In order to be considered for reviewing, scoring, and ranking, all renewal project applications must submit:

- a complete renewal project application to the CoC through the eSnaps online system by the announced deadline
- a complete set of other required reports and documents, as requested, by the announced deadline Incomplete or late applications and materials will not be accepted, and the project application will be rejected by the CoC.

All renewal HMIS projects will be scored using the developed Performance Scoring Charts for HMIS Projects. Scoring criteria for renewal projects will include:

- HMIS System Performance
 - Training
 - Data Collection
 - Reporting
 - 360° Agency Review
- Quarterly Report/Response timeliness
- Grant Funding Expenditures/Drawdown
- Application submission timeliness

All renewal Coordinated Entry (CE) projects will be scored using the developed Performance Scoring Chart for CE Projects. Scoring criteria for renewal projects will include:

- CE System Performance
 - Access and Assessment
 - o Prioritization and Referral
 - o 360° Agency Review
- Quarterly Report/Response timeliness
- Grant Funding Expenditures/Drawdown
- Application submission timeliness

All renewal PH-PSH, PH-RRH, and TH projects will be scored using the developed Performance Scoring Charts for PH-PSH, PH-RRH, and TH Projects. Scoring criteria for renewal projects will include:

- Performance Measures
 - housing stability
 - o sources of cash income
 - o gained or increased income
- Housing First
- Data Quality/Completeness and Data Entry Timeliness
- Quarterly Report/Response timeliness
- Grant Funding Expenditures/Drawdown
- Application submission timeliness

Accepted projects will be ranked by score, from highest to lowest. In the event that 1st year renewal projects (new projects awarded during the previous federal FY funding cycle) are not under contract and have not begun operating at the time of the competition, they will be exempt from the scoring criteria for renewal projects and will instead be automatically ranked in the order they ranked in the Priority Rankings submitted to HUD in the previous year.

7/2019; rev. 9/2021

New HMIS, SSO-Coordinated Entry, PH-PSH, and PH-RRH Projects

In order to be considered for scoring and ranking, all new project applications must submit a complete new project application to the CoC through the *eSnaps* online system by the announced deadline. Incomplete or late project applications will not be accepted, and the project application will be rejected by the CoC.

All new HMIS projects will be scored using the developed Performance Scoring Charts for HMIS Projects. Scoring criteria for new projects will include:

- Agency Experience
- Project Detail
 - Training
 - o Data Standards
 - Privacy and Security
 - Reporting
- Budget
 - o Admin HUD allows 10% max., but SCEH recommends 7% max.
- Application Submission Timeliness

All new Coordinated Entry (CE) projects will be scored using the developed Performance Scoring Chart for CE Projects. Scoring criteria for renewal projects will include:

- Agency Experience
- Project Detail
 - Access
 - Assessment
 - Prioritization
 - o Referral
- Budget
 - o Admin HUD allows 10% max., but SCEH recommends 7% max.
- Application Submission Timeliness

All new PH-PSH and PH-RRH projects will be scored using the developed Performance Scoring Charts. Scoring for New PH Projects will include:

- Project Detail
- Housing type/capacity
 - CH dedicated focus
 - Housing First focus
- Supportive Services
- Budget
 - Ratio of Rental/Leasing dollars to Supportive Services dollars
 - o Admin HUD allows 10% max., but SCEH recommends 7% max.
- Agency Experience
- Application Submission Timeliness

Accepted projects will be ranked by score from highest to lowest.

CoC Reallocation Plan Siouxland Coalition to End Homelessness

Voluntary Reallocations:

Wholly voluntary reallocation: An applicant may voluntarily choose to reallocate funds from an existing renewal project to free additional funds for one or more new projects.

- The applicant may choose to reallocate all or a portion of their renewal funds to create a new project(s).
- o Projects Impacted:
 - •

Total Reallocated:

All funds freed through voluntary reallocation may be made available for one or more new projects. If no new project applications are submitted, funds will remain available for the original renewal projects.

If the same applicant wishes to apply for a new project using those same funds, the following parameters apply:

- The applicant will be required to submit a new project application in eSnaps following all usual HUD requirements for new projects.
- The Siouxland Coalition to End Homelessness retains final approval for the new project to be included in the CoC Consolidated Application to HUD.
- o If, for any reason, the Siouxland Coalition to End Homelessness does not approve the new project, the same applicant may instead submit the original renewal project. In this way, the applicant choosing to voluntarily reallocate to a new project avoids the risk that the new project will be rejected by the Siouxland Coalition to End Homelessness and funds lost as a result.
- o All projects are subject to final consideration by HUD for funding. Approval by the Siouxland Coalition to End Homelessness does not guarantee that a project will be funded by HUD.
- O The applicant may also choose to compete for a portion or all of the funds available to the CoC through bonus funds. In this case, the applicant would be subject to competitive review along with other new project applications. Any additional funding will depend on the scoring. If the applicant does not score well enough to be competitive for additional funding, it may still submit the new project using just their own voluntarily reallocated funds.

If another applicant wishes to apply for a new project using the reallocated funds, the following parameters apply:

- The applicant will be required to submit a new project application in eSnaps following all usual HUD requirements for new projects.
- The Siouxland Coalition to End Homelessness retains final approval for the new project to be included in the CoC Consolidated Application to HUD.
- o All projects are subject to final consideration by HUD for funding. Approval by the Siouxland Coalition to End Homelessness does not guarantee that a project will be funded by HUD.

Involuntary Reallocations:

Full or Partial Reallocation for low scoring or lower performing project(s): The SCEH may reallocate funds in whole or in part from eligible renewal projects to create one or more new projects without decreasing the CoC's ARD (Annual Renewal Demand).

- O Projects impacted:

 - Total Reallocated:
- o The following Project Types may be created through Reallocation:
 - Permanent Housing Permanent Supportive Housing (PH-PSH) projects
 - Permanent Housing Rapid Rehousing (PH-RRH) projects
 - Joint TH and PH-RRH component projects
 - Dedicated HMIS project for the costs at 24 CFR578.37(a)(4) that can only be carried out by the HMIS Lead, which is the recipient or subrecipient of an HMIS grant and is listed on the HMSI Lead form in the CoC Applicant Profile in *e-snaps*.
 - Supportive Services Only Coordinated Entry (SSO-CE) project to develop or operate a centralized or coordinated assessment system.
- o Projects with recaptured funds may be subject to having the amount of recaptured funds reallocated to new projects.
- o Funds from low/the lowest scoring project(s) and/or from lower performing projects may be involuntarily reallocated to higher scoring new projects.
- O Project applicants that are subject to partial involuntary reallocation must develop a plan to continue with their renewal project(s) with the reduced level of funding. This includes HUD contract compliance for numbers of persons served and the types of services provided. It may be possible to seek a contract amendment from HUD for some changes. Applicants should contact their HUD representative to discuss any options for amendment. If the reduction in funding will result in loss of assistance for persons currently served by the program, the applicant must develop a transition plan for these persons. Any concerns should be brought to the CoC.
- O If there are no applications for new projects, funds will remain available for the original renewal projects.

IA-500 SCEH CoC FY 2022 New Applicants Performance Charts

New Permanent Housing Projects

Project Scoring Summary

Performance/Scoring Measure (Max. Pts. Available)			
Agency Experience (10 pts.)			
Project Detail (10 pts.)			
Housing First (5 pts.)			
Low Barrier to Entry (2.5 pts.)			
Low Barrier for Termination (2.5 pts.)			
Performance Measures (5 pts.)			
Supportive Services (5 pts.)			
Budget (10 pts.)			
Bonus: Leveraging Housing/Healthcare (3 pts.)			
Application Submission Timeliness (5 pts.)			

TOTAL COMBINED SCORE (50 pts.)
TOTAL COMBINED SCORE - PERCENTAGE

0	0	0	0	0
0.00	0.00	0.00	0.00	0.00

New HMIS Projects

Project Scoring Summary

Performance/Scoring Measure (Max. Pts. Available)	
Agency Experience (10 pts.)	
Project Detail/HMIS Standards (25 pts.)	
Training	
Data Standards	
Privacy and Security	
Reporting	
Budget (10 pts.)	

Application/Report Submission Timeliness (5 pts.)	
TOTAL COMBINED SCORE (50 pts.)	0
TOTAL COMBINED SCORE - PERCENTAGE	0.00

New CE Projects

Project Scoring Summary

Performance/Scoring Measure (Max. Pts. Available)	
Agency Experience (10 pts.)	
Project Detail (25 pts.)	
Access	
Assessment	
Prioritization	
Referral	
Budget (10 pts.)	
Application/Report Submission Timeliness (5 pts.)	

TOTAL COMBINED SCORE (50 pts.)	0
TOTAL COMBINED SCORE - PERCENTAGE	0.00

IA-500 SCEH CoC 2021 New Applicants Performance Charts

Agency Experience/Qualifications

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

All New Projects Scoring:	
3 or more Yes = 10 pts.	
2 Yes = 5 pts.	
1 or less $Yes = 0$ pts.	

New Project Applicant	Experience with managing federal grants effectively	leveraging funds from other govt. and private sources	Adequate organization, management, and accounting structure	Total "Yes" responses	Score
					0
					0

IA-500 SCEH CoC 2021 New Applicants Performance Charts

All New Project types

Project Detail - Project Type, Housing Type, Target Population, etc.

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PSH/RRH Scoring:

2 pts. for each Yes answer up to 10 pts.

Permanent Housing Projects	PSH or RRH	Apartments or single family homes/ duplexes	100% from ES or street	75% or more HH w/ children	10 or more housing units	Total "Yes" responses	Score
							0
							0

Total 1BR Units	Total Units larger than 2BR	-	Total beds for HH w/ children

HMIS Scoring:

2 pts. for each Yes answer up to 10 pts.

*Does the Project Application/Description adequately address the following? = Yes

HMIS Project	HMIS	Training	Data Standards	Privacy and Security	Reporting	responses	Score
							0
							0

CE Scoring:

2 pts. for each Yes answer up to 10 pts.

*Does the Project Application/Description adequately address the following? = Yes

CE Project	CE	Access	Assessment	Prioritization	Referral	Total "Yes" responses	Score
							0
							0

IA-500 SCEH CoC FY 2022 New Applicants Performance Charts

New Permanent Housing Projects

Increase Housing Stability - Housing First/ Low Barrier

Note: Calculations based on GY 2023-2024 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PSH/RRH Housing First Scoring:

Yes = 5 pts.

No = 0 pts.

Permanent Housing Projects	Project will quickly and successfully connect clients to PH	Project has no barriers to program entry (based on low barrier scores below)	Project has no	supportive services to maximize housing stability and prevent returns to homelessness	Total "Yes" responses	Score
						0
						0

PSH/RRH Low Barrier Project Entry Scoring:

Yes = 2.5 pts.

No = 0 pts.

Permanent Housing Projects	Entry not denied for too little or no income	Entry not denied for active or history or substance abuse	Entry not denied for criminal record with exception for state- mandated restrictions	Entry not denied for fleeing domestic violence	Total "Yes" responses	Score
						0
		•				0

PSH/RRH Low Barrier Project Termination Scoring:

Yes = 2.5 pts.

No = 0 pts.

Clients not terminated for not making progress on a service plan	clients not terminated for loss of income or failure to increase income	Clients not terminated for being a victim of domestic violence	Clients not terminated for any other activity no covered in a typical lease agreement	Total "Yes" responses	Score
					0
					0

IA-500 SCEH CoC FY 2022 New Applicants Performance Charts New Permanent Housing Projects

Performance Measures

Note: Calculations based on GY 2023-2024 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Performance Measures Scoring:	
3 Yes = 5 pts.	
2 Yes = 2.5 pts.	
0 or 1 Yes = 0 pts.	

Permanent Housing Project	80% or more obtain and remain in PH project or exit to other PH destination	 15% or more (PSH)/ 50% or more (RRH) are employed	Score

IA-500 SCEH CoC FY 2022 New Applicants Performance Charts New Permanent Housing Projects

Supportive Services - Type, Provided by

Note: Calculations based on GY 2023-2024 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Supportive Services Scoring:

1 pt. per service up to 5 points for SS

provided by app	licant or applicant referral			
Project	Supportive Service	Provided by Applicant	Applicant Referral	Score
	Assessment of Service Needs			
	Assistance with Moving Costs			
	Case Management			
	Child Care			
	Education Services			
	Employment Assistance/Job Training			
	Food			
	Housing Search/Counseling Services			
	Legal Services			
	Life Skills Training			
	Mental Health Services			
	Outpatient Health Serivces			
	Outreach Services			
	Substance Abuse Treatment Services			
	Transportation			
	Utility Deposits			
	Assessment of Service Needs			
	Assistance with Moving Costs			
	Case Management			
	Child Care			
	Education Services			
	Employment Assistance/Job Training			
	Food			
	Housing Search/Counseling Services			
	Legal Services			
	Life Skills Training			
	Mental Health Services			
	Outpatient Health Serivces			
	Outreach Services			
	Substance Abuse Treatment Services			
	Transportation			
	Utility Deposits			

IA-500 SCEH CoC FY 2022 New Applicants Performance Charts

All New Project Types

Financial Management, Cost Per Client, Program/Shelter Capacity

Note: Calculations based on GY 2023-2024 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Budget Categories/Percentages - PH-PSH, PH-RRH Projects

Leasing/Rental Assistance - $\geq 75\% = 2.5$ pts.

Operations - $\leq 10\% = 2.5$ pts.

Supportive Services - $\leq 25\% = 2.5$ pts.

Admin - $\leq 7\% = 2.5$ pts.

Applicant/Project	Total Budget	Total Leasing/ Rental Assistance	% of Total Budget	Total Operations		Total Supportive Services	% of Total Budget	Admin	% of Total Budget	Score
			#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
			#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	

Budget Categories/Percentages - HMIS Projects

HMIS - $\geq 93\% = 5$ pts.

Admin - $\leq 7\% = 5$ pts.

Aumin - $27/0 - 3$ pts.						<u> </u>	
Applicant/Project	Total Budget	Total HMIS	% of Total Budget	Admin	% of Total Budget		Score
			#DIV/0!		#DIV/0!		
			#DIV/0!		#DIV/0!		

Budget Categories/Percentages - CE Projects

Supportive Services - $\geq 93\% = 5$ pts.

Admin - $\leq 7\% = 5$ pts.

Appli	cant/Project	Total Budget	Total Supportive Services	% of Total Budget	Admin	% of Total Budget
				#DIV/0!		#DIV/0!
				#DIV/0!		#DIV/0!

Note: Calculations based on FY 2021 application

Shelter Capacity - not scored

Applicant/Project	Total # of Clients to be served	Total # Singles/Couples to be served	Households w/ Children to be served	# of beds available	# of 1BR units available	# of 2BR units available	# units >2BR available
	0	0		0			

Application Submission Scoring

Application Complete and Submitted by 5:00 p.m., Wednesday, August 31, 2022 = 5 pts.

Application Incomplete or Late = 0 pts.; application rejected by SCEH

Applicant/Project	Application submitted in eSnaps by 08/31/2022	Addl. Materials submitted to SCEH by 08/31/2022	Score

All Projects

Project Scoring Summary

Performance/Scoring Measure (Max. Pts.)	Heartland Counseling - PSH	Center For Siouxland - Bridges West TH	
Housing Stability (5 pts.)			
Earned Income (5 pts.)			
Other Cash Income Source (5 pts.)			
Gained or Increased Income (5 pts.)			
Housing First Focus (5 pts.)			
Data Quality/Completeness (5 pts.)			
Data Entry Timeliness (5 pts.)			
Quarterly Report Submission Timeliness (5 pts.)			
Program Management/Spending (5 pts.)			
Application/Report Submission Timeliness (5 pts.)			

TOTAL COMBINED SCORE (50 pts.)
TOTAL COMBINED SCORE - PERCENTAGE

0	0	
0.00	0.00	

Performance/Scoring Measure (Max. Pts.)	City of Sioux City - HMIS
Training (10 pts.)	
Data Collection (10 pts.)	
Reporting (10 pts.)	
360 Agency Review (5 pts.)	
Quarterly Report Submission Timeliness (5 pts.)	
Program Management/Spending (5 pts.)	
Application/Report Submission Timeliness (5 pts.)	

TOTAL COMBINED SCORE (50 pts.) TOTAL COMBINED SCORE - PERCENTAGE

_
0
0.00

Performance/Scoring Measure (Max. Pts.)	City of Sioux City - Coordinated Entry
Access and Assessment (15 pts.)	
Prioritization and Referral (15 pt.s)	
360 Agency Review (5 pts.)	
Quarterly Report Submission Timeliness (5 pts.)	
Program Management/Spending (5 pts.)	
Application/Report Submission Timeliness (5 pts.)	

TOTAL COMBINED SCORE (50 pts.)	
TOTAL COMBINED SCORE - PERCENTAGE	

0
0.00

Transitional and Permanent Housing Projects

Increase Housing Stability. (Goal: 80%+ remaining in PH or exiting to PH)

Note: Calculations based on most recent SCEH Quarterly Reporting Data

For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PH - PSH/RRH Scoring:

(maintain/exit to PH)

80% or higher = 3 pts.

65% - 79% = 2 pts.

less than 65% = 0 pts.

PH - PSH/RRH Scoring:

(Avg. Length of Time to Housing)

90 days or less = 2 pts.

91-120 days = 1 pt.

more than 120 days = 0 pts.

1000 tildir 00 / 0		111010 111		••• • • • • • • • • • • • • • • • • •	•5•				
			Exits to Other	Total					
Permanent Housing Projects	Total participants	Stayers	PH (Q23A, 23B)	stayers and PH exits	Percentage of participants who either remained in PH or exited to PH.	Avg. length of time to housing	Score		
Heartland Counseling - PSH					#DIV/0!				
Totals	0	0	0	0	#DIV/0!				

TH Scoring

80% or higher = 5 pts.

65% - 79% = 3 pts.

less than 65% = 0 pts.

Transitional Housing Projects	Total participants	Stayers	PH (Q23A, 23B)	Total leavers	Percentage of participants who exited to PH.	Score
Center For Siouxland - Bridges West					#DIV/0!	
Totals	0	0	0	0	#DIV/0!	

All Projects (Excluding HMIS)

Sources of cash income. (PSH Goals: 15%+ obtain employment/earned income; 50%+ obtain other cash income;

RRH/TH Goals: 50%+ obtain employment/earned income; 30%+ obtain other cash income)

Note: Calculations based on most recent SCEH Quarterly Reporting Data For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Carned	Income	Scoring:	PSH I	Projects	
--------	--------	----------	-------	-----------------	--

15% or higher = 5 pts.

10% - 14% - 3 pts.

less than 10% = 0 pts.

Other Cash Income Scoring: PSH Projects

50% or higher = 5 pts.

30% - 49% = 3 pts.

less than 30% = 0 pts.

ress than 1070 o	Pesi		less than 5070 opts.							
Project	Cash Income Sources	# of Adult Leavers w/ income source (18)	Total Adult Leavers (5a)	% of Adults w/ earned income	% of Adults w/ other cash income		% of Adults w/ no cash income			
Heartland	Earned Income			#DIV/0!						
Counseling -	Other Cash Income Sources:				#DIV/0!					
PSH	Both Earned and Other Income Sources:					#DIV/0!				
	No Cash Income Sources:		_				#DIV/0!			

Earned Income Scoring: RRH/TH Projects

50% or higher = 5 pts.

30% - 49% = 3 pts.

less than 30% = 0 pts.

Other Cash Income Scoring: RRH/TH Projects

Score

Score

30% or higher = 5 pts.

10% - 29% = 3 pts.

less than 10% = 0 pts.

Project	Cash Income Sources	# of Adult Leavers w/ income source (18)	Total Adult Leavers (5a)	% of Adults w/ earned income	% of Adults w/ other cash income	% of Adults w/ both earned income and other income	% of Adults w/ no cash income
CFS - Bridges	Earned Income			#DIV/0!			
West	Other Cash Income Sources:				#DIV/0!		
vvest	Both Earned and Other Income Sources:					#DIV/0!	

No Cash Income Sources:			#DIV/0!	

All Projects (Excluding HMIS)

Obtain or increase project participants income (from employment and from other sources).

(Goal: PSH/RRH/TH - 40%+ gain or increase income from employment and other sources)

Note: Calculations based on most recent SCEH Quarterly Reporting Data

For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Gained or Increased Income Scoring:

40% or higher = 5 pts.

20% - 39% - 3 pts.

less than 20% = 0 pts.

Applicant/Project	Total Adult Leavers (5a6)	Adult Leavers who maintained income (19a2, row 6, column 4)	Percentage of Total Adults who maintained income (C/B)	Adult Leavers who gained or increased income (19a2; row 6, columns 5+6)	Percentage of Adult Leavers who gained or increased income (E/B)	Score
Heartland Counseling - PSH			#DIV/0!		#DIV/0!	
Center For Siouxland - Bridges West			#DIV/0!		#DIV/0!	

0	0	#DIV/0!	0	#DIV/0!

IA-500 SCEH CoC FY 2022 Renewal Applicants Performance Charts All Projects (Excluding HMIS)

Data Quality, Timeliness (Goals: <5% null/missing data in all categories;

100% of entry/exit data entered in <6 days)

Note: Calculations based on most recent SCEH Quarterly Reporting Data For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Data Quality/Completeness Scoring:	Data Entry Timeliness Scoring:
95-100% complete in all categories = 5 pts.	100% in $ days = 5 pts.$
85-94% complete in any category = 3 pts.	95-99% in $ days = 3 pts.$
less than 85% complete in any category = 0 pts.	less than 95% in $ days = 0 pts.$

Project	Data Element	% of Error Rate		Score
	Name (6a)			
	SSN (6a)			
	Date of Birth (6a)			
	Race (6a)			
	Ethnicity (6a)			
	Gender (6a)			
	Veteran Status (6b)			
	Relationship to HoH (6b)			
	Client Location (6b)			
Heartland - PSH	Disabling Condition (6b))			
	Destination (Exit) (6c)			
	Income and Sources (Entry) (6c)			
	Income and Sources (Annual Assess) (6c)			
	Income and Sources (Exit) (6c)			
	of Times/# of Months Homeless in Past 3 years)			
	Domestic Violence (14a)			
	Fleeing Domestic Violence (14b)			

	Residence Prior to Project Entry (15)				
	Non-Cash Benefit Received (20b)				
	Covered by Health Insurance (21)				
	, ,				
	Data Quality/Completeness Score				
Project	Data Entry Timeliness	Total # of Entry/Exit Records	# of Records entered in <6 days	% entered in <6 days	Score
Heartland - PSH	Data Entry Timeliness			#DIV/0!	
		% of Error			
Project	Data Element	Rate			Score
	Name (6a)				
	SSN (6a)				
	Date of Birth (6a)				
	Race (6a)				
	Ethnicity (6a)				
	Gender (6a)				
	Veteran Status (6b)				
	Relationship to HoH (6b)				
	Client Location (6b)				
	Disabling Condition (6b))				
CFS - Bridges	Destination (Exit) (6c)				
West	Income and Sources (Entry) (6c)				
	Income and Sources (Annual Assess) (6c)				
	Income and Sources (Exit) (6c)				
	Chronic Homelessness (Approx Date Started, #				
	of Times/# of Months Homeless in Past 3 years)				
	(6d)				
	Domestic Violence (14a)				
	Fleeing Domestic Violence (14b)				
	Residence Prior to Project Entry (15)				

Tab 4 - 3A Obj 4 - All

	Non-Cash Benefit Received (20b)				
	Covered by Health Insurance (21)				
	Data Quality/Completeness Score				
		Total # of Entry/Exit	# of Records entered in <6	entered in <6	
Project	Data Entry Timeliness	Records	days	days	
CFS - Bridges					
West	Data Entry Timeliness			#DIV/0!	

Availability of CoC-level data

Trainin	g (10 pts.)	Score:
	Points to consider when scoring:	
	Types of training provided	Scorer's Comments:
	Avg. # of hours spent providing training	
	Adequacy of training provided	
	Responsiveness to agencies	
	Barriers to training	
	Opportunities for the future	
	W	
Data Co	ollection (10 pts.)	Score:
	Points to consider when scoring:	
	Efforts to improve data collection/reporting	Scorer's Comments:
	Efforts to engage non-funded agencies	
	Efforts to improve SPM's	
	Bed Coverage % in HMIS	
	Efforts to increase bed coverage	
	Bariers to data collection	
	Opportunities for the future	
Report	ing (10 pts.)	Score:
	Points to consider when scoring:	
	Meeting HUD required data elements	Scorer's Comments:

Barriers to reporting Opportunites for the future	
360 Agency Review (5 pts.) Points to consider when scoring:	Score:
Types of training available/received Adequacy of training Responsiveness of staff Overall experience	Scorer's Comments:

IA-500 SCEH CoC FY 2022 Renewal Applicants Performance Coordinated Entry

Access and Assessment (15	pts.
---------------------------	------

Points to consider when scoring:

Accessibility of CE - advertising/promotion, walk-in hours, phone assistance, scheduled appts., etc.

Timeliness of CE Assessments # of CE Assessments done weekly Barriers to Access and Assessment Opportunities for the future

Prioritization and Referral (15 pts.)

Points to consider when scoring:

Adequacy of prioritization model - VI-SPDAT score, tiebreakers # of referrals made/accepted Efforts to increase CE participation - nonfunded agencies, PHA's, landlords, etc. Efforts to reduce avg. length of time homeless/ on the CE prioritization list Efforts to decrease # of 1st time homeless through prevention/diversion Barriers to Prioritization and Referral Opportunities for the future

360 Agency Review (5 pts.)

Points to consider when scoring:# of referrals made vs. # of successful placements
Responsiveness of staff

Score:	
--------	--

Scorer's Comments:

Score:

Scorer's Comments:

Score:		

Scorer's Comments:

Overall experience	

All Projects

Financial Management, Program Capacity/Shelter Utilization, Housing First, Quarterly Reporting, Application Submission

(Goals: 100% funds expended; Housing First focus)

Note: Financial Calculations based on Most Recently Completed Grant Year/APR Report

 $For all \ performance \ charts, please \ review \ all \ numbers \ from \ your \ APR \ and \ email \ susan.mcguire@centerforsiouxland.org \ if \ corrections \ are \ needed.$

Recaputred Funds Scoring

100% expended = 5 pts.

1% - 5% recaptured = 2 pts.

6% - 10% recaptured = -2 pts.

>10% recaptured = -5 pts.

Applicant/Project	Total Budget	Total Funds Expended	% of Funds Expended	Score
Heartland Counseling - PSH			#DIV/0!	
Center For Siouxland - Bridges West TH			#DIV/0!	
Sioux City - HMIS			#DIV/0!	
Sioux City - Coordinated Entry			#DIV/0!	

Shelter Capacity/Utilization Scoring

Not Scored

Housing First Focus

Yes = 5 pts.

No = 0 pts.

Applicant/Project	# of Beds/Units available per 2022 HIC	# Beds/Units occupied as of 12/31/2021	# Beds/Units occupied as of 3/31/2022	# Beds/Units occupied as of 6/30/2022	# Beds/Units occupied as of 9/30/2022	Housing First - Yes/No	Score
Heartland Counseling - PSH					N/A		
Center For Siouxland - Bridges West TH					N/A		
Sioux City - HMIS	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Sioux City - Coordinated Entry	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SCEH Quarterly Report/Response Submission Scoring

Reports/Responses - complete and on time, every quarter = 5 pts.

Reports/Responses - complete and on time, 2+ quarters = 3 pts.

Reports/Responses - incomplete and/or late, 3+ quarters = 0 pts.

Applicant/Project	1st Quarter - complete, on time	2nd Quarter - complete, on time	3rd Quarter - complete, on time	4th Quarter - complete, on time	Score
Heartland Counseling - PSH				N/A	
Center For Siouxland - Bridges West TH				N/A	
Sioux City - HMIS				N/A	
Sioux City - CE				N/A	

Application/Report Submission Scoring

Application and Materials Complete and submitted by 5:00 p.m., Wednesday, August 31, 2022 = 5 pts.

Application and/or Materials Incomplete or Late = 0 pts.; application rejected by SCEH

Applicant/Project	Application submitted in eSnaps by 8/31/22	Addl. Materials submitted to SCEH by 8/31/22	HUD Correspondense, if applicable	Score
Heartland Counseling - PSH				
SafePlace - RRH				
Center For Siouxland - Bridges West TH				
Sioux City - HMIS				
Sioux City - Coordinated Entry				

All Projects

Project Scoring Summary

Performance/Scoring Measure (Max. Pts.)	Heartland Counseling - PSH	Center For Siouxland - Bridges West TH	
Housing Stability (5 pts.)	5	5	
Earned Income (5 pts.)	5	5	
Other Cash Income Source (5 pts.)	3	0	
Gained or Increased Income (5 pts.)	5	5	
Housing First Focus (5 pts.)	5	5	
Data Quality/Completeness (5 pts.)	5	5	
Data Entry Timeliness (5 pts.)	5	5	
Quarterly Report Submission Timeliness (5 pts.)	3	5	
Program Management/Spending (5 pts.)	5	5	
Application/Report Submission Timeliness (5 pts.)	5	5	

TOTAL COMBINED SCORE (50 pts.)
TOTAL COMBINED SCORE - PERCENTAGE

46	45	
0.92	0.90	

Performance/Scoring Measure (Max. Pts.)	City of Sioux City - HMIS
Training (10 pts.)	
Data Collection (10 pts.)	
Reporting (10 pts.)	
360 Agency Review (5 pts.)	
Quarterly Report Submission Timeliness (5 pts.)	
Program Management/Spending (5 pts.)	
Application/Report Submission Timeliness (5 pts.)	

1st year renewal - Per CoC Project Review, Score, and Rank Policy, the project will be ranked in same position as the FY 21 Competition. Project is ranked in the number 1 position of the CoC's Project Pirority Listing. TOTAL COMBINED SCORE (50 pts.)
TOTAL COMBINED SCORE - PERCENTAGE

0
0.00

Performance/Scoring Measure (Max. Pts.)	City of Sioux City - Coordinated Entry
Access and Assessment (15 pts.)	
Prioritization and Referral (15 pt.s)	
360 Agency Review (5 pts.)	
Quarterly Report Submission Timeliness (5 pts.)	
Program Management/Spending (5 pts.)	
Application/Report Submission Timeliness (5 pts.)	

1st year renewal - Per CoC Project Review, Score, and Rank Policy, the project will be ranked in same position as the FY 21 Competition. Project is ranked in the number 2 position of the CoC's Project Priority Listing.

TOTAL COMBINED SCORE (50 pts.)
TOTAL COMBINED SCORE - PERCENTAGE

C
0.00

Transitional and Permanent Housing Projects

Increase Housing Stability. (Goal: 80%+ remaining in PH or exiting to PH)

Note: Calculations based on most recent SCEH Quarterly Reporting Data

For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PH - PSH/RRH Scoring:

(maintain/exit to PH)

80% or higher = 3 pts.

65% - 79% = 2 pts.

less than 65% = 0 pts.

PH - PSH/RRH Scoring:

(Avg. Length of Time to Housing)

90 days or less = 2 pts.

91-120 days = 1 pt.

more than 120 days = 0 pts.

ress than 0570 opts.		more th	un 120 u	uyb op	10.		
			Exits to				
			Other	Total			
			PH	stayers	Percentage of participants		
	Total		(Q23A.	and PH	who either remained in PH	Avg. length of time to	
Permanent Housing Projects	participants	Stavers	()	exits	or exited to PH.	housing	Score
Tomanom riodomg riojotto	ранионранио			O.A.I.O	0. 0		Score
Heartland Counseling - PSH	20	18	0	18	90%	7 days or less	5
Totals	20	18	0	18	90%		
Iolais	20	10	J	10	90%		

TH Scoring

80% or higher = 5 pts.

65% - 79% = 3 pts.

less than 65% = 0 pts.

Transitional Housing Projects	Total participants	Stayers	PH (Q23A, 23B)	Total leavers	Percentage of participants who exited to PH.	Score
Center For Siouxland - Bridges West	37	13	18	21	86%	5
Totals	37	13	18	0	#DIV/0!	

All Projects (Excluding HMIS)

Sources of cash income. (PSH Goals: 15%+ obtain employment/earned income; 50%+ obtain other cash income;

RRH/TH Goals: 50%+ obtain employment/earned income; 30%+ obtain other cash income)

Note: Calculations based on most recent SCEH Quarterly Reporting Data For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Earned Income Scoring: PSH Projects

15% or higher = 5 pts.

10% - 14% - 3 pts.

less than 10% = 0 pts.

Other Cash Income Scoring: PSH Projects

50% or higher = 5 pts.

30% - 49% = 3 pts.

less than 30% = 0 pts.

Project	Cash Income Sources	# of Adult Leavers w/ income source (18)	Total Adult Leavers (5a)	% of Adults w/ earned income	% of Adults w/ other cash income		% of Adults w/ no cash income
Heartland	Earned Income	6	20	30%			
Counseling -	Other Cash Income Sources:	8	20		40%		
PSH	Both Earned and Other Income Sources:	0				0%	
	No Cash Income Sources:	6	20				30%

Earned Income Scoring: RRH/TH Projects

50% or higher = 5 pts.

30% - 49% = 3 pts.

less than 30% = 0 pts.

Other Cash Income Scoring: RRH/TH Projects

30% or higher = 5 pts.

10% - 29% = 3 pts.

less than 10% = 0 pts.

Project	Cash Income Sources	# of Adult Leavers w/ income source (18)	Total Adult Leavers (5a)	% of Adults w/ earned income	% of		% of Adults w/ no cash income
CFS - Bridges	Earned Income	9	12	75%			
West	Other Cash Income Sources:	0	12		0%		
AAGSI	Both Earned and Other Income Sources:	1	12			8%	

Score	
5	
0	

Score

No Cash Income Sources:	2	12		17%	

All Projects (Excluding HMIS)

Obtain or increase project participants income (from employment and from other sources).

(Goal: PSH/RRH/TH - 40%+ gain or increase income from employment and other sources)

Note: Calculations based on most recent SCEH Quarterly Reporting Data

For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Gained or Increased Income Scoring:

40% or higher = 5 pts.

20% - 39% - 3 pts.

less than 20% = 0 pts.

Applicant/Draiget		Adult Leavers who maintained income (19a2, row 6, column	Percentage of Total Adults who maintained		Percentage of Adult Leavers who gained or increased income (E/B)	2
Applicant/Project	Leavers (5a6)	4)	income (C/B)	5+6)	,	Score
Heartland Counseling - PSH	20	0	0%	13	65%	5
Center For Siouxland - Bridges West	12	0	0%	9	75%	5

32	0	0%	22	69%

IA-500 SCEH CoC FY 2022 Renewal Applicants Performance Charts All Projects (Excluding HMIS)

Data Quality, Timeliness (Goals: <5% null/missing data in all categories;

100% of entry/exit data entered in <6 days)

Note: Calculations based on most recent SCEH Quarterly Reporting Data For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Data Quality/Completeness Scoring:	Data Entry Timeliness Scoring:
95-100% complete in all categories = 5 pts.	100% in $ days = 5 pts.$
85-94% complete in any category = 3 pts.	95-99% in $< = 6$ days = 3 pts.
less than 85% complete in any category = 0 pts.	less than 95% in \leq 6 days = 0 pts.

Project	Data Element	% of Error Rate		Score
	Name (6a)	0		
	SSN (6a)	0		
	Date of Birth (6a)	0		
	Race (6a)	0		
	Ethnicity (6a)	0		
	Gender (6a)	0		
	Veteran Status (6b)	0		
	Relationship to HoH (6b)	0		
	Client Location (6b)	0		
Heartland - PSH	Disabling Condition (6b))	0		
	Destination (Exit) (6c)	0		
	Income and Sources (Entry) (6c)	0		
	Income and Sources (Annual Assess) (6c)	0		
	Income and Sources (Exit) (6c)	0		
	of Times/# of Months Homeless in Past 3 years)	0		
	Domestic Violence (14a)	0		
	Fleeing Domestic Violence (14b)	0		

	Residence Prior to Project Entry (15)	0			
	Non-Cash Benefit Received (20b)	0			
	Covered by Health Insurance (21)	0			
	Data Quality/Completeness Score				5
Project	Data Entry Timeliness	Total # of Entry/Exit Records	# of Records entered in <6 days	% entered in <6 days	Score
Heartland - PSH	Data Entry Timeliness	5	5	100%	5
		% of Error			
Project	Data Element	Rate			Score
	Name (6a)	0			
	SSN (6a)	3			
	Date of Birth (6a)	0			
	Race (6a)	0			
	Ethnicity (6a)	0			
	Gender (6a)	0			
	Veteran Status (6b)	0			
	Relationship to HoH (6b)	0			
	Client Location (6b)	0			
	Disabling Condition (6b))	0			
CFS - Bridges	Destination (Exit) (6c)	4			
West	Income and Sources (Entry) (6c)	0			
	Income and Sources (Annual Assess) (6c)	0			
	Income and Sources (Exit) (6c)	0			
	Chronic Homelessness (Approx Date Started, #				
	of Times/# of Months Homeless in Past 3 years)				
	(6d)	0			
	Domestic Violence (14a)	0			
	Fleeing Domestic Violence (14b)	0			
	Residence Prior to Project Entry (15)	0			

Tab 4 - 3A Obj 4 - All

	Non-Cash Benefit Received (20b)	0			
	Covered by Health Insurance (21)	0			
	Data Quality/Completeness Score				5
			# of Records entered in <6		
Project	Data Entry Timeliness	Records	days	days	
CFS - Bridges					
West	Data Entry Timeliness	43	43	100%	5

All Projects

Financial Management, Program Capacity/Shelter Utilization, Housing First, Quarterly Reporting, Application Submission

(Goals: 100% funds expended; Housing First focus)

Note: Financial Calculations based on Most Recently Completed Grant Year/APR Report

For all performance charts, please review all numbers from your APR and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Recaputred Funds Scoring

100% expended = 5 pts.

1% - 5% recaptured = 2 pts.

6% - 10% recaptured = -2 pts.

>10% recaptured = -5 pts.

Applicant/Project	Total Budget	Total Funds Expended	% of Funds Expended	Score
Heartland Counseling - PSH	\$ 227,403.00	\$ 227,403.00	100%	5
Center For Siouxland - Bridges West TH	\$ 130,609.00	\$ 130,609.00	100%	5
Sioux City - HMIS			#DIV/0!	
Sioux City - Coordinated Entry			#DIV/0!	

173010 \$ 54,393.00

Shelter Capacity/Utilization Scoring

Not Scored

Housing First Focus

Yes = 5 pts.

No = 0 pts.

Applicant/Project	# of Beds/Units available per 2022 HIC	# Beds/Units occupied as of 12/31/2021	# Beds/Units occupied as of 3/31/2022	# Beds/Units occupied as of 6/30/2022	# Beds/Units occupied as of 9/30/2022	Housing First - Yes/No	Score
Heartland Counseling - PSH	22	23	22	22	N/A	Yes	5
Center For Siouxland - Bridges West TH	55	12	12	13	N/A	Yes	5
Sioux City - HMIS	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Sioux City - Coordinated Entry	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SCEH Quarterly Report/Response Submission Scoring

Reports/Responses - complete and on time, every quarter = 5 pts.

Reports/Responses - complete and on time, 2+ quarters = 3 pts.

Reports/Responses - incomplete and/or late, 3+ quarters = 0 pts.

Applicant/Project	1st Quarter - complete, on time	2nd Quarter - complete, on time	3rd Quarter - complete, on time	4th Quarter - complete, on time	Score	
Heartland Counseling - PSH	Yes	Yes	No	N/A	3	3 F
Center For Siouxland - Bridges West TH	Yes	Yes	Yes	N/A	Ţ	5
Sioux City - HMIS	N/A	N/A	N/A	N/A	N/A	
Sioux City - CE	N/A	N/A	N/A	N/A	N/A	

Financial Mgmt Wksht

Application/Report Submission Scoring

Application and Materials Complete and submitted by 5:00 p.m., Wednesday, August 31, 2022 = 5 pts.

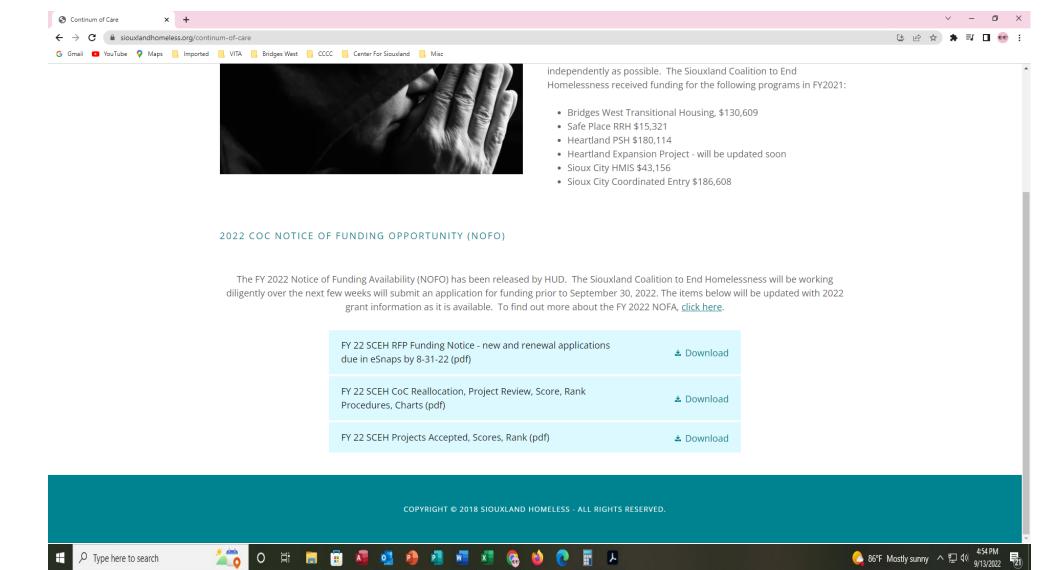
Application and/or Materials Incomplete or Late = 0 pts.; application rejected by SCEH

Applicant/Project	Application submitted in eSnaps by 8/31/22	Addl. Materials submitted to SCEH by 8/31/22	HUD Correspondense, if applicable	Score	
Heartland Counseling - PSH	Yes	N/A	N/A	5	
SafePlace - RRH	No				Reallocate
Center For Siouxland - Bridges West TH	Yes	N/A	N/A	5	
Sioux City - HMIS	N/A	N/A	N/A	N/A	
Sioux City - Coordinated Entry	N/A	N/A	N/A	N/A	

IA-500

1E-5. Projects Rejected/Reduced – Notification Outside of *e-snaps*

Our CoC did not reject or reduce any projects during our CoC's FY 2022 local competition.



From: Wendy L. Jackson
To: Jonette Spurlock

Cc: Amy Keairns (akeairns@sioux-city.org)

Subject: Project Priority Update

Congratulations! Your project has been accepted by the SCEH to be included in the Project Priority Listing of the CoC's Consolidated Application. A listing of projects along with their score, rank, and accepted status is now available on the SCEH website at

https://siouxlandhomeless.godaddysites.com/continum-of-care. Please direct any additional questions to the SCEH Project Monitoring and Development Committee Chair, Wendy Jackson at wiackson@1fbusa.com.

Wendy Jackson Loan Officer NMLS #488052

PH 605-232-6743 331 Dakota Dunes Blvd

1st Financial Bank USA

Dakota Dunes SD 57049

From: Wendy L. Jackson

To: <u>Jennifer Jackson (jennifer@heartlandcounselingservices.com)</u>

Cc: Amy Keairns (akeairns@sioux-city.org)

Subject: Project Priority Update

Congratulations! Your project has been accepted by the SCEH to be included in the Project Priority Listing of the CoC's Consolidated Application. A listing of projects along with their score, rank, and accepted status is now available on the SCEH website at

https://siouxlandhomeless.godaddysites.com/continum-of-care. Please direct any additional questions to the SCEH Project Monitoring and Development Committee Chair, Wendy Jackson at wiackson@1fbusa.com.

Wendy Jackson Loan Officer NMLS #488052

1st Financial Bank USA

PH 605-232-6743 331 Dakota Dunes Blvd Dakota Dunes SD 57049

From: Wendy L. Jackson < <u>WJackson@1fbusa.com</u>>

Sent: Tuesday, September 13, 2022 4:57 PM

To: Stephanie Pickinpaugh - ICA (safeplacesiouxland.org)

<stephanie@safeplacesiouxland.org>

Cc: Amy Keairns (akeairns@sioux-city.org) akeairns@sioux-city.org

Subject: Project Priority Update

Congratulations! Your project has been accepted by the SCEH to be included in the Project Priority Listing of the CoC's Consolidated Application. A listing of projects along with their score, rank, and accepted status is now available on the SCEH website at

https://siouxlandhomeless.godaddysites.com/continum-of-care. Please direct any additional questions to the SCEH Project Monitoring and Development Committee Chair, Wendy Jackson at wjackson@1fbusa.com.

Wendy Jackson
Loan Officer NMLS #488052

1st Financial Bank USA

PH 605-232-6743 331 Dakota Dunes Blvd Dakota Dunes SD 57049

From: Wendy L. Jackson

Sent: Tuesday, September 13, 2022 5:11 PM

To: Amy Keairns (akeairns@sioux-city.org) <akeairns@sioux-city.org> **Cc:** Amy Keairns (akeairns@sioux-city.org) <akeairns@sioux-city.org>

Subject: Project Priority Update

Congratulations! Your projects have been accepted by the SCEH to be included in the Project Priority Listing of the CoC's Consolidated Application. A listing of projects along with their score, rank, and accepted status is now available on the SCEH website at

https://siouxlandhomeless.godaddysites.com/continum-of-care. Please direct any additional questions to the SCEH Project Monitoring and Development Committee Chair, Wendy Jackson at wjackson@1fbusa.com.

Wendy Jackson Loan Officer NMLS #488052

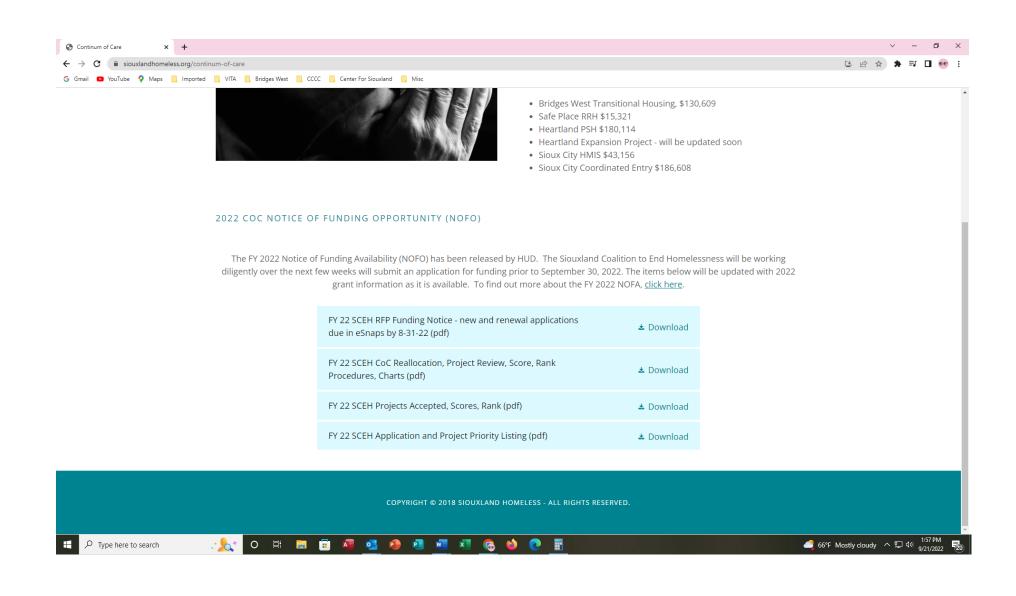
1st Financial Bank USA

PH 605-232-6743 331 Dakota Dunes Blvd Dakota Dunes SD 57049

IA 500 1E-5b. Local Competition Selection Results - Scores for All Projects

Applicant Name	Project Name	Project Score	Project Rank	Award Amount		Project Accepted/Rejected Status	
City of Sioux City	Sioux City HMIS Project	N/A*	1	\$	43,156	Accepted	
City of Sioux City	Sioux City Coordinated Entry	N/A*	2	\$	186,608	Accepted	
Heartland Counseling Services	Heartland Counseling PSH	46/50	3	\$	388,718	Accepted	
Center For Siouxland	Bridges West Transitional Housing	45/50	4	\$	130,609	Accepted	
SafePlace	SafePlace RRH	41/50	5	\$	110,855	Accepted	
City of Sioux City	SCEH Planning Project	N/A	N/A	\$	44,383	Accepted	

^{*}Per CoC Project Review, Score, and Rank Policy, as the HMIS and CE Projects are 1st year renewal projects and have not yet begun operations, the projects will be ranked in same positions as the FY 21 Competition.



From: **Amy Keairns**

Frank Tenuta; Wendy Jackson (wjackson@1fbusa.com); Jessica Barnes; Amy Bloch; Kristine Bornholtz To:

(Kristinewa@siouxlan.net); Taylor Deckert; Kayla Johnson; Alison Justice; Amy Munderloh

(amunderloh@nencap.org); Connie Noreen; Stephanie Pickinpaugh; Nate Probasco; Tim Wilson; Susan McGuire;

CENTER; Alison Justice; Allison Larson (alli.larson412@gmail.com); Amanda Eldridge; Amy Bloch (abloch@cathchar.com); Amy Munderloh (amunderloh@nencap.org); Amy Tooley; Anderson, Sara; Antoinette

Green; Becky Mathis; Bill Flynn (wflynn@caasiouxland.org); Brad Johnson (bjohnson@poncatribe-ne.org); Caroline Druilhet (cdruilhet@gmail.com); "Chris Kuchta (ckuchta@connectionsaaa.org)"; Clara Coly; Cynthia "Urbie" Urbanos - CAAS Crossroads Shelter (cisqardenstudio@gmail.com); Danielle Dempster; Dawn Kimmel

(MobilityManager@simpco.org); Debbie Goettsch (debbieg@havenhousefsc.org); Denise Palmer

(dpalmer@siouxlandmentalhealth.com); dennis.brockhaus@materdeisc.org; Erika Worrell

(eworrell@siouxlandmentalhealth.com); Gabby Valdovinos (gvaldovinos@cathchar.com); Gary Wickering; Grant

Beckwith; Glen Houts Jr.; Gloria Kennedy; Goodman, Lorelei B.; Jackie Littlegeorge

(mashu ska winga@hotmail.com); Jackie Stellish (Stellish.Jackie@jobcorps.org); Jean Logan - CAAS (jlogan@caasiouxland.org); Jennifer Jackson (jennifer@heartlandcounselingservices.com); Jeremy McClure; Jessica Barnes; Jacob Harlan; Joe Twidwell (jtwidwell@snbonline.com); John McCalley; Julie Albright; Julie Schaap (jschaap@siouxlandmentalhealth.com); Karen Mackey, Kashe Utesch (kashe.utesch@iowa.gov), Katie Roberts (katie@siouxlandcommunityfoundation.org); Kayla Johnson; Kim Grieve; Kris Dam, Shesler Hall; Kristi Walz; Kristine Bornholtz (Kristinewa@siouxlan.net); Lorelei Thomas (thomas.lorelei@yahoo.com); Marcia Carlson (mcarlson@siouxlandmentalhealth.com); Maria (maria@safeplacesiouxland.org); Marit Westrich; Mary Jordan (Mary.Jordan7@va.gov); Mcelmuray Dundee, Angela R.; Michelle Haukap; Nate Probasco; Nicole Lidman; Nikki Peirce; Noreen, Connie; Peregoy, Kassandra; Rhodes, Kari; Robin McGinty; Robyn Deacon - Dismas Charities, Inc. (jdeacon@dismas.com); Sara DeLuna; Sarah Hughes; Shelby Marsden; Stacy Schenk (NE DHS); Stephanie Pickinpaugh; Stephanie Pospisil (spospisil@poncatribe-ne.org); Tami Doyle-Tieck (ttieck@slandchc.com); Tanya German; Theresa Jochum; Terry Inserra (terry I. inserra@hud.gov); Tessa Shanks; Tim Wilson; Valerie Uken; Wendy Jackson (wjackson@1fbusa.com); Becky Mathis; stephanie@safeplacesiouxland.org; Taylor Deckert;

Connie Noreen; Lewis, Alexa K.; Darrell Mayo; Sierra Cowing

Subject: FY 2022 CoC Approved Consolidated Application and Project Priority Listing

Date: Wednesday, September 21, 2022 1:34:10 PM

Good afternoon!

The FY 2022 CoC-Approved Consolidated Application and Project Priority Listing have been posted to the SCEH website (https://siouxlandhomeless.org/continum-of-care). The Consolidated Application and Project Priority listing will be submitted to HUD on Tuesday, September 27, 2022. Please let Susan McGuire or Amy Keairns know if you have any guestions or comments regarding the CoC Consolidated Application.

Thanks!

Amy Keairns

Neighborhood Services Outreach Supervisor City of Sioux City 521 Nebraska Street 712-279-6255