

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 HUD's funding determination.

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

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) 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: PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

1A-2. Collaborative Applicant Name: County of Delaware

1A-3. CoC Designation: CA

1A-4. HMIS Lead: County of Delaware

1B. Coordination and Engagement–Inclusive Structure and Participation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.	
	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	No	No
6.	EMS/Crisis Response Team(s)	No	No	No
7.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
8.	Hospital(s)	Yes	No	Yes
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
10.	Law Enforcement	No	No	Yes
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	No	No	Yes
12.	LGBTQ+ Service Organizations	No	No	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

17.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	No	Yes
18.	Organizations led by and serving LGBTQ+ persons	No	No	Yes
19.	Organizations led by and serving people with disabilities	No	No	Yes
20.	Other homeless subpopulation advocates	Yes	Yes	Yes
21.	Public Housing Authorities	Yes	Yes	Yes
22.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
23.	State Domestic Violence Coalition	No	No	Yes
24.	State Sexual Assault Coalition	No	No	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	No	No	Yes
29.	Domestic Violence Advocates	Yes	Yes	Yes
30.	Other Victim Service Organizations	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	No	Yes
33.	Youth Service Providers	Yes	No	Yes
	Other: (limit 50 characters)			
34.	Aging	Yes	Yes	Yes
35.	Legal	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).

(limit 2,500 characters)

1. The CoC membership is always open to any community partner serving the homeless population. Meeting announcements are listed on the homeless website as well as through "invitation" by the sharing of the notice with an interested person. Recruitment is ongoing and additionally occurs when it is felt information is needed on a topic and a potential new person/entity is identified by a CoC/Homeless Services Coalition (HSC) member as community member sharing the same interest of serving the homeless and near homeless population. The HSC is the general CoC membership group. Additionally, as new employees are added to existing community organizations, supervisors are asked to notify the CoC so that we can add the new employee to the email distribution list. Members are always encouraged to extend the invitation to interested partners to attend the next meeting. The CoC invites new organizations and programs to attend meetings and educate CoC members about their programs. Meeting information is also posted in advance on our delchomelesservices.org website. The HSC group is made known in our contracts with providers, and included in CoC brochure that is shared at community partnership meetings. Anyone who is interested in supporting the homeless population, is welcome to become a "member" of the CoC.

2. The CoC provides meeting information via email and on our website, holds meetings virtually, and will provide interpretation services upon request. Materials can be provided via pdf so they can be interpreted by visually impaired individuals. The virtual meeting uses the TEAMS forum and subtitles can be activated by hearing impaired individuals. Additionally, the HSC can provide accommodations such as sharing hard copies of meeting minutes or resources through the US mail system.

3. Agencies who serve culturally specific communities experiencing homelessness are encouraged to attend and participate in the HSC meetings. Agencies such as Momobile, an agency who serves pregnant woman, and the Foundation of Delaware County, an agency who provides a multitude of services such as Cribs for Kids, Healthy Start, WIC, Nurse family Partnership, frequently provide services to persons of color.

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

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

(limit 2,500 characters)

1. The CoC solicits opinions at the Homeless Services Coalition (HSC) quarterly meetings and HSC subcommittees. Final HSC agendas are discussed as the Governance Board (GB) prior to the HSC meeting. HSC meetings are open-to-the public and include a broad array of stakeholders who are concerned with ending homelessness. Organizations such as the Foundation of Delaware County, the Lead Coalition, Delaware County Memorial Hospital Substance Abuse Program, Emergency Rent Assistance Program, Voice and Vision, Domestic Abuse Project and Human Trafficking are some of the information provided to the HSC. Committees such as the Outreach or Chronic group may bring topics they are seeing to the Governance Board and the decision is made to bring in a specific presenter. One example of this would be the sharing of Covid information.

2. Each HSC meeting is planned and conducted by the Governing Board (GB), has a standard agenda that includes CoC updates about funding, needs, gaps, trends, mainstream resources, etc. Educational speakers are planned for each meeting. The website provides a place where persons can reach out to Adult and Family Services to make suggestions. CoC members may also email a CoCAT(Advisory Team) member with any suggestions.

3. The HSC regularly polls the GB and the HSC to gauge areas in need of improvement and to identify new approaches to preventing and ending homelessness. GB and HSC participants are asked what tools they feel are needed to best serve their participants. Guest presenters are suggested by the GB and the HSC. Improvements and changes regarding the HMIS are also discussed at GB and HSC. Discussion following the presentation by Voice and Vision's review of the Coordinated Entry (CE) system resulted in a shortened more focused assessment.

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

(limit 2,500 characters)

1. The CoC is open and encourages project applications from organizations that have not previously been a CoC-funded project. Posted on public Homeless Service Coalition website is a document titled, Notice of New Project RFP's for 2022 CoC NOFO Competition. This document provides a wealth of information including: details on how a provider can submit proposal(s) for consideration of new projects; links to HUDs website that provides instructions about the application process, project types, budget line items. The CoC gives consideration to agencies that have not previously received CoC funding. If an applicant has questions CoC staff are available to answer questions.

2. The submission process of how project applicants are to submit their projects are detailed on our public Homeless Service Coalition website. The submission process is also explained in the new project RFP, which is posted on the COC website and sent out via email to COC membership. New project applicants were instructed to submit their applications online via a survey system called Alchemer by the due date. This survey system includes questions about the new project design, agency experience, a link to upload a budget as well as other application documents.

3. Our CoC determines which project applications are submitted to HUD for funding through a committee called the Funding Review Committee (FRC). The FRC consists of individuals from providers who do not have an application in for a project to be reviewed. This allows those individuals who participate on the FRC to be impartial to the project selection process. The FRC uses a standard scoring sheet with a series of criteria to review each proposal. All proposals submitted to the FRC go through the same process of redaction of any identifying information and are scored using a separate scorecard for each project. At the end of the review phrase, the FRC will discuss, score and rank the projects to determine which project will be submitted to HUD for funding.

4. Our CoC posts information on a regular basis to our Homeless Services Coalition website. This website provides people with disabilities accessibility through a computer or laptop to review. The CoC is able to receive telephone calls or e-mails to explain any parts of the application process to a person requesting accommodations for a disability.

1C. Coordination and Engagement

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

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

In the chart below:

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with 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	No
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)	No
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	No
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		Nonexistent
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

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

(limit 2,500 characters)

1. The Delaware County Office of Housing and Community Development (OHCD) is the only HUD entitlement jurisdiction in the CoC that is a recipient of ESG funds. OHCD is a Homeless Services Coalition (HSC) founder, serves on the GB, the CoC Advisory Team (CoCAT) and other HSC committees. Adult and Family Services (AFS), the HMIS lead and Collaborative Applicant, has a long-standing relationship with OHCD and meets bi-weekly to discuss all aspects of homeless services planning including ESG funded activities. At least annually, OHCD consults with the GB and the HSC regarding the allocation of ESG funds. The proposed use of ESG-CV funds was discussed at multiple CoCAT meetings. ESG-CV funds were targeted to the priorities identified by the CoC.

2. The CoCAT, includes staff from OHCD and AFS, evaluates the performance of ESG Program sub-recipients at CoCAT meetings. OHCD is responsible for reporting to HUD both ESG and CDBG accomplishments including the performance of our homeless service provider sub-recipients.

3. HIC, PIT, Performance Measures are shared with the HSC distribution list that includes persons in CP Jurisdictions.

4. The CoC HMIS provides data for all reports which OHCD uses to review performance and evaluate programs. This includes the PIT, HIC, Performance Measures and CAPER data. OHCD monitors ESG programs and consults with the CoCAT on findings, concerns and improvement of project performance. The CoC provides OHCD with all info regarding the homeless population, system gaps and priorities that are then incorporated into the CP including HIC and PIT data. The CP homeless strategies were developed in conjunction with the CoC GB, the HSC and the CoCAT and thus are aligned with the CoC Collaborative Plan to End Homelessness.

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

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

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

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)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

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

(limit 2,500 characters)

The CoC has a data sharing agreement and collaborates with the PA Department of Education's Region 8 Site Coordinator (R8-SC) for the Children and Youth Experiencing Homelessness Program. The R8-SC is required by the State Plan to inform school districts (SDs) of their responsibility to homeless children/youth to provide assurances that homeless students have equal access to education. The R8-SC coordinates the local network of School District homeless liaisons, is a voting member of the CoC Governance Board and attends quarterly HSC meetings. The R8-SC also provides trainings at the HSC meetings. Public notice of the educational rights of homelessness are shared in locations frequented by parents in a manner that they can understand which is often represented in pamphlets.

The CoC collaborates with the Office of Early Intervention (OEI) and together we have implemented a procedure to identify homeless children under the age of 3 and refer to OEI for an EI evaluation. OEI provides evidence-based supports and services to infants/toddlers and their families when children are experiencing a developmental delay or have a diagnosis that results in a developmental delay.

The CoC also has a partnership agreement with the Early Learning Resource Center (ELRC) that implements subsidized childcare programs under a homeless preference. The ELRC provides financial assistance to qualified families, caretakers, guardians or foster parents for childcare for their children from birth up to 13 years of age. A CoC provider has an agreement with the Delaware County Intermediate Unit (DCIU) for Head Start and Home Start to prioritize homeless children for enrollment through a homeless preference when there are classroom openings.

The HSC maintains a distribution list that includes all the School Districts homeless liaisons in the County and so they are made aware of all CoC happenings and often attend HSC meetings. This has developed into an informal relationship with the school districts in which they are aware of how our CoC works and the homeless liaisons contact us when there is a homeless youth in need.

1C-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.

(limit 2,500 characters)

The CoC Education Act for Homeless Children Policy was adopted in October of 2014 and updated in January of 2020 by the Delaware County CoC. The Policy states that COC Homeless Services Coalition (HSC) providers will publicly display the Educational Rights posters at their organizations and will distribute the summary of rights for homeless children to all families upon intake into the CoC. The policy includes the role of Coordinated Entry and the distribution of an educational pamphlet. The Policy states that CoC Coordinated Entry staff will complete an initial assessment of the educational needs of children utilizing the Homeless Management Information System (HMIS) and then inform the clients of their rights to receive education. CE staff provide the pamphlet to the Head of Household and review the content. The Recreational Therapist (RT) assesses all homeless children entering the CoC to ensure children are enrolled in school or EI programs (Head Start). The right to remain in their home school district is explained and transportation is arranged. The RT works collaboratively with parents, psychologists, early child education programs and schools to ensure the needs of the children are being met. Children under the age of 3 will be evaluated by the by the Office of Early Intervention or their designee. Children 3 – 5 will be evaluated by the Delaware County Intermediate Unit or their designee. The coordinated assessment system provides an opportunity to ensure that all children coming into Delaware County's CoC have up-to-date developmental and behavioral screenings. In addition, the CoC provides posters, pamphlets and educational materials to providers to distribute to families.

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

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 needs of survivors.	

(limit 2,500 characters)

1. The CoC has updated their Coordinated Entry policy in collaboration with The Domestic Abuse Project(DAP) to include requiring all onboarding direct service providers in the CoC to attend the trauma-informed/victim- centered training within 14 days of onboarding to their position at the provider agency. In the policy it states that once an DV survivor is identified at an non DV direct service provider, that CE representative or Direct Service Provider will take additional steps to ensure The Domestic Abuse Project is contacted for additional resources and services to assist the DV survivor with their needs in RRH.

2.The CoC coordinates with the Domestic Abuse Project (DAP) to provide an annual training to the Homeless Service Coalition. Also, the CoC requires all onboarding direct service providers in the CoC to attend the trauma-informed/victim- centered training within 14 days of onboarding to their position at the provider agency. DAP staff presents information to all levels of staff CE, CM and Management. The Trauma Informed Training Discussion includes the victim-centered safety planning that is very necessary for DV survivors. Staff are instructed to discuss with DV survivors on how to keep their location confidential, how to file for a protection from abuse order when they are ready. DV survivor's are also given the option to keep their identifying information confidential and obtain an unique identifier instead of their name and other identifying information. Staff safety, both physical and emotional is also discussed. Best practices include the most appropriate approach when working with all persons, since it is not always evident who might be a DV survivor. The CoC regularly shares Trauma-Informed Training opportunities information to HSC members in the CoC HSC quarterly meetings.

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).	

(limit 2,500 characters)

1. In our updated Coordinated Entry policy, the CoC will be requiring Direct Coordinated Entry staff as well as any other staff that may be assisting someone that maybe in need of a CE or anyone experiencing a housing crisis to complete the Trauma Informed/ Victim Centered Training. Staff are required to attend The Trauma Informed Training/ Victim- Centered within 14 days of onboarding to their position at their Provider Agency. The Trauma Informed / Victim- Centered Training will be completed annually.

2. Currently, Victim Service Providers also provide Safety Planning trainings with CE/DSP. CE/DSP staff are trained to inquire about the DV survivors safety and offer shelter according to their need. DV survivors are encouraged not contact friends and family members that may share their location with the abuser. An example of Safety Planning includes the CE/DSP staff inquires if the abuser is in prison, if the abuser is not in prison, the person is asked if they would prefer to not have their name entered into the system and if the emergency shelter room should be listed with a unique identifier. They are provided DAP's contact information for more intense DV resources. The CoC coordinates with the Domestic Abuse Project (DAP) to provide an annual training to the Homeless Service Coalition. DAP staff presents information to all levels of staff CE, CM and Management. The Trauma Informed Training Discussion includes the victim-centered safety planning that is very necessary for DV survivors. Staff are instructed to discuss with DV survivors how to keep their location confidential, how to file for a protection from abuse order when they are ready. Staff safety, both physical and emotional are also discussed. The CoC was awarded DV bonus funds in the FY21 CoC Competition to implement a DV specific coordinated entry project. This project will begin in fall 2022. This project will entail a more efficient and collaborative process with the Delaware County CoC in which DV survivors are provided the necessary resources and services to fit their needs along with remaining confidential.

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.	

(limit 2,500 characters)

1. The Domestic Abuse Project (DAP) provides de-identified data to Adult and Family Services monthly as part of their contract requirements. In addition, DAP provides de-identified data for the PIT each year. DAP utilizes the Efforts to Outcome (ETO) Information Management System and Empower Data Base. DAP uses ETO to collect de-identified data (using numbers) to collect PPI on persons served in the safe house, persons who access their legal services (Protection orders); hotline calls; DV RRH Program and relocation assistance programs. DAP provides an annual summary report with de-identified data on all services (client access to hotline, counseling, etc) provided and this report is compared to prior year reports to study changes in numbers served and trends. The Collaborative Applicant, via a contractual agreement for funding, requires DAP to submit monthly census data for the safe house which includes the universal and program level required data fields. This DAP data is de-identified by using code numbers and only DAP knows the real ID of the persons. The CoC continues to promote and build a data driven system and has enhanced data evaluation for victim service providers. The CoC analyzed Safe House exit destinations in an effort to measure positive housing outcomes.

2. Data is used to identify emerging trends, housing and service needs, system gaps so that the CoC can strategically target resources. Examples include: the number of DV survivors accessing CE; rate of ES admissions; the exit destinations from ES; the numbers of survivors with disabilities; survivors within priority populations such as chronic, veterans and/or TAY. The CoC tracks annual calls into the DAP hotline and requests for emergency housing annually to gauge the incidence of DV in the CoC. The CoC previously utilized this data to identify the need for application for the DAP RRH program funded in 2019 and the DV CE application in 2021.

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.	

(limit 2,500 characters)

1. The CoC has an Emergency Transfer Plan signed March 29, 2019, and each HUD participating housing program created, signed and submitted their Emergency Transfer Plan to the CoC. Each housing partner provides annual training to their staff and ensure that in the event a participant is the victim of DV, the participant's safety and housing are protected.

2. DAP currently will continue to conduct their CE's with the non-victim service provider CE sites within the CoC until they implement their CE system anticipated for 2022. As soon as DV survivor is identified, DAP is notified for shelter services. If nothing is available, the DV survivors safety is prioritized and mainstream resources such as shelter are offered. DV survivor's are referred to DAP for support services such as additional safety planning and legal services. Once sheltered, CAADC and DAP collaborate to provide CM, shelter, support services and housing opportunities. All CoC resources are available to DV survivors.

&nbsp;nbsp;

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.

(limit 2,500 characters)

All CE providers prioritize DV survivors once they are identified. If it has been determined that DAP shelter services are not available, the DV survivor's are prioritized and offered the CoC's shelter services until DAP Shelter Services become available. DV survivors also have access to DAP's RRH program. The CoC also designated 10 housing slots for Emergency Housing Vouchers for DV survivors. The CoC and DAP communicate on a weekly basis to ensure housing for the DV survivors. The DV survivors are still given resources for legal or other supportive services to fit their needs. The CE providers and or Shelter providers will continue to collaborate with DAP to identify all housing opportunities and supportive services for the DV survivor.

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.

(limit 2,500 characters)

1. According to the CoC policy, during the CE if a DV survivor is identified either through the assessment or self-disclosure by the individual. The assessor will ensure that a unique identifier is used if the individual does not want to share their personal information. The CE assessor communicates with a DV provider via phone to try to secure a bed at the DAP shelter, and if none are available DV shelters are looked for out of County if necessary. If there are no DV shelters available, the CE assessor will refer to a shelter that is most appropriate.

2. The CoC has policy around CE assessment and DV. The CoC has created a CE stakeholder committee to review the current CE policies using the HUD CE assessment tool focusing heavily on DV Survivors during CE. CE staff inquire about the DV survivor's safety and offer safe shelter options according to the need. DV survivors are encouraged to not contact friends and family members that may share their location with the abuser. They are asked if they prefer to have their name entered into the emergency shelter room listed with a pseudonym if possible. They are provided Domestic Abuse Project (DAP) contact information for more intense DV resources. Staff are instructed to discuss with survivors how to keep their location confidential, and how to file for a protection from abuse order when they are ready.

3. The CoC can use a unique identifier in the CE assessment to maintain a survivor's confidentiality. When a DV survivor is referred to the CoC by a DV provider they have their own Unique identifier for the individual due to using a different system to keep their data. The unique identifier will always be used unless the Survivor does not want it

The Domestic Abuse Project provides de-identified data to Adult and Family Services monthly as part of their contract requirements. The CoC previously utilized this data to identify the need for an application for an additional DAP RRH program originally funded in 2019 and the DV CE application in 2021. DAP utilizes the Efforts to Outcome (ETO) Information Management System and Empower Database. ETO collects de-identified data (using numbers) to collect PPI on persons served in the safe house, persons who access their legal services (Protection orders); hotline calls; DV RRH Program, and relocation assistance programs. DAP provides an annual summary report on all services (client access to hotline, counseling

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

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	No
	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)?	No

1C-6a.	Anti-Discrimination Policy—Updating Policies—Assisting Providers—Evaluating Compliance—Addressing Noncompliance.	
	NOFO Section VII.B.1.f.	

Describe in the field below:

1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
2.	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)

1. For this past year, there were no updates to a CoC wide anti-discrimination policy. As the CoC does understand the importance of such policy, the CoC-wide anti-discrimination policy will be reviewed in the upcoming year. To receive input and feedback, the policy will be reviewed and updated under the guidance of the Homeless Services Coalition and the Governing Board (GB). The GB is made up of agency directors, managers and other key decision makers from various homeless service providers in Delaware County.

2. In 2022, the CoC resumed on-site monitoring visits with providers. These visits were on hold due to the COVID-19 pandemic. During these monitoring visits, the CoC reviews agency policies, including antidiscrimination policies. CoC staff and provider staff also have opportunities to review agency policies to ensure compliance for local, state and federal regulations. Review of policies would include reviewing practices to determine if they are aligned with the CoC's anti-discrimination policies, among others."

3. As previously mentioned, in 2022, the CoC resumed on-site monitoring visits with providers. These visits were on hold due to the COVID-19 pandemic. CoC visits do include review of agency policies and procedures but since the monitoring process has just resumed, focus on evaluating for compliance with antidiscrimination policies has not been fully established. The CoC will be prioritizing the evaluation of antidiscrimination policies in the immediate months.

4. Provider agencies are required in their annual contracts for maintaining compliance of detailed contractual expectations. Providers not maintaining compliance of various contractual requirements including anti-discrimination policies are addressed on a case-by-case basis.

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:

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?
Delaware County Housing Authority	11%	Yes-HCV	Yes
Chester Housing Authority	11%	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)

1. The CoC has very a strong relationship with the two PHA's located in the geographic area. The Delaware County Housing Authority (DCHA) has been a CoC partner since 1994 when they were awarded the first S+C program in the County. The CoC has partnered with DCHA and Chester Housing Authority (CHA) to secure FUP, FYI, Mainstream and EHV vouchers. MOU's are in place for the EHV, FYI and FUP vouchers. DCHA continues to partner with the CoC and is the CoC grantee for two additional PSH programs. MOU's are in place with DCHA who administers two PSH grants for the County. The MOU supports information obtained by Delaware County from the Managed Care Organization to support the in kind match. DCHA's Administrative Plan includes a "move on" strategy to graduate households from PSH to HCV who no longer need such a high level of supportive services. DCHA has committed up to 15 graduate vouchers per year. DCHA also has an admission preference for Mainstream non-elderly persons with disabilities transitioning out of institutional and other segregate settings for persons at risk of institutionalization, homeless or at risk of homelessness. The CHA Administrative Plan establishes a local set aside to support local homeless service providers in obtaining permanent housing for their clients. One voucher is set aside for every seventh turnover in the tenant-based voucher program. When vouchers become available the CoC Lead Agency submits homeless applications directly to CHA for final eligibility determinations. Local service providers are responsible for case management and supportive services to ensure successful tenancies.

Coordination within the CoC with the Veterans Administration and DCHA enables Delaware County residents to access VASH vouchers to best serve our veterans.

Our CoC also coordinated with DCHA to utilize 46 EHV. A MOU was established between DAP, COC and DCHA to ensure all parties were aware of their roles in the assignment and execution of the vouchers.

2. Not Applicable

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

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

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

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section 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
2.	Family Unification Program (FUP)	Yes
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
		No

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	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)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	FYI

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

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

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

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
--	--	-----

	If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.
--	---

PHA
Delaware County H...
Chester Housing A...

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

Name of PHA: Delaware County Housing Authority

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

Name of PHA: Chester Housing Authority

1D. Coordination and Engagement Cont'd

1D-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 not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

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

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition.	19
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition that have adopted the Housing First approach.	19
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.	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—to determine if they are actually using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1.CoC Applicants are scored for the annual evaluation process (HUD Score Card) on their use of following the Housing First model.

2.At evaluation, our CoC looks at how many clients have been initially denied by an organization and the reasons they were denied. In addition, the evaluation includes the reason clients are discharged from the program to ensure clients are not initially being accepted but then terminated for lack of compliance.

3.Our CoC monitors to ensure that projects operate on a Housing First model from the initial housing assignment. Clients are assigned to a program from the Permanent Housing Clearing House (PHC). Once the assignment is received by a housing provider, they are expected to accept the referral within 48 hours and complete an intake with the client within seven (7) days. A program cannot deny a person due to their mental health or drug and alcohol concerns. If they attempt to deny housing to a client, the CoC has put a review procedure in place. The provider must notify Adult and Family Services (AFS) within 48 hours of the denial and state the reason that they feel they cannot accept the client into their program. Then the provider must contact the client within 24 hours to schedule a meeting to discuss the concerns. This meeting needs to include the provider, a representative from AFS, the client and if the client has another case manager, they are welcome to attend as well. The goal of this meeting is to determine what extra supports need to be put in place to ensure the client is able to be successful in the program. However, the goal is that the program will engage the client, and eventually the client will accept services or at least work on harm reduction with the client.

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.	

(limit 2,500 characters)

1. The Delaware County CoC Outreach Team (OT) operates three shifts with two staff each. The shifts are 8 am-4 pm, 4 pm-12 am and 12 am-8 am, five days a week. The OT also has a 24 Hour on-call phone which has been distributed throughout our CoC. The OT has created working relationships with SEPTA Police, Philadelphia (PHL) Airport officials, Township Police Officers, and Community stakeholders who know or have relationships with our unsheltered homeless population to assist with the identification of individuals that may be unknown or hard to engage. The CoC AFS created a Joint Delco/Phila Outreach Committee to identify individuals that are vulnerable and possibly resistant to engagement. This committee meets bi-weekly and is organized by AFS Staff. The stakeholders include AFS, Delco OT team, Officials from SEPTA, SEPTA Transit PD, Officials from PHL Airport, Phila OT, Project Home, Phila Office of Emergency Services, D&A (ODAAT), Merakey (MH) and DHS D&A representative. This has been an asset in ensuring that all persons experiencing unsheltered homelessness are identified and engaged as quickly as possible. Engaged persons from our CoC are entered into the HMIS system to assist with creating individual history. Persons not willing to engage are documented for future follow-up. Services are open to all eligible persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status, or disability.

2. The OT covers 100% of the CoC's geographic area including the PHL Airport which encompasses part of Delaware County. The OT travels to all areas in the CoC's geographical area. Each shift focuses heavily on where our most vulnerable and difficult-to-engage homeless population gather.

3. The OT currently conducts street outreach five days a week and is on-call on the weekends. This is due to current staffing issues. When fully staffed they conduct street outreach 7 days a week.

4. Each shift focuses heavily where our most difficult-to-engage homeless population congregate. Our OT is staffed with experienced staff with knowledge of people with MH, D&A, and other disabilities. Persons willing to engage are provided with resources and assisted with obtaining and maintaining housing. Persons not willing to engage are documented and the OT continues to engage for possible acceptance of services. The OT engages these individuals each time they are seen to attempt to build a rapport.

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

The CoC has bi-weekly outreach meetings with provider agencies and law enforcement officials to identify homeless individuals that may be in danger of breaking the law. The CoC provides other solutions and alternatives to prevent criminalization if possible.

Yes

No

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.”	201	228

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:

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI—Supplemental Security Income	Yes
3.	TANF—Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	

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.

(limit 2,500 characters)

1.The CoC utilizes an email distribution list of persons who attend the Homeless Services Coalition Meetings. This list encompasses over 150 persons, both HUD funded providers, as well as Community Partners. Updates such as Pandemic EBT benefits, application for SNAPs benefits, substance abuse treatment opportunities are shared through this email distribution list.

2.The CoC collaborates with our local Delaware County Health Department to educate about community health concerns. The Home At Last (HAL) program through Crozer Health System provides blended Case Management Services to our street and recently housed homeless population. HAL is able to connect the homeless population to mental health, substance abuse treatment and medical treatment.

3. Homeless persons who do not have steady income due to a disability are encouraged to apply for SSI/SSDI benefits. The CM can assist with the completion of the SSI/SSDI application and support the applicant through the appeal process. The SOAR program ended in Delaware County in June 2021, however, some staff remain who participated in the SOAR training. When available, homeless persons are referred to legal assistance for the completion of their application for benefits.

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.

(limit 2,500 characters)

During the pandemic additional funding was available to support our homeless population in non-congregate shelter, motel. This was particularly helpful for our senior and vulnerable population. Due to limited funding, non-congregate shelter is very difficult to locate and fund.

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.

(limit 2,500 characters)

1. The county in which the CoC operates is Delaware County, PA, which has a new Health Department as of April 2, 2022 that provides services to Delaware County residents and the homeless. Prior to this year, the county had not had a public countywide health department. As a result of this new health department, the CoC is working directly with Health Department staff on how to best address health needs of the county's homeless population. The CoC is now working to establish effective health related policies with support from the new health department. Prior to the establishment of this new health department, Delaware County Government contracted with the health department of neighboring Chester County to provide COVID oversight and service activities for Delaware County. As the pandemic spread, Chester County Health Department created and issued various policies and procedures to best mediate the spread of COVID-

19. These policies and procedures provided a wealth of information for the new Delaware County Health Department to learn from and incorporate as determined the need for Delaware County.

2. As stated in question 1 above, Delaware County, PA, where the CoC is located, has a new County Health Department which started April 2, 2022. Due to the COVID-19 outbreak the health department does have a focus on preventing disease outbreaks among the general county population. The CoC is working in partnership with health department staff on what are the best approaches to prevent disease outbreaks among people experiencing homelessness. The new health department has been relying heavily on policies and procedures from the US Center for Disease Control to formulate how best to mediate the spread of COVID-19 as well as treatment options for those who contract the disease.

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.	

(limit 2,500 characters)

1. The CoC has had opportunities to share information related to public health measures and homelessness specifically through our Homeless Service Coalition website. This website serves as a central hub for both the general public and county services providers to access information about homeless services and resources. Included in these resources on the home page of the website is a section dedicated to COVID-19 and the homeless. Information within this section contains links to the CDC concerning congregate shelters, vaccinations among the homeless and specific ways which shelters can mitigate the spread of COVID-19.

2. The new Delaware County Health Department has broadened the ability of the CoC to facilitate communication with homeless service providers as well as ensuring street outreach providers, shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants. This sharing or transfer of knowledge from the Health Department to providers occurs in a variety of ways including: outreach by the Health Department directly with homeless services providers; the Health Department posting regular preventative measures on their website and the CoC e-mailing providers about the availability of the Health Department, their staff and materials.

1D-9.	Centralized or Coordinated Entry System—Assessment Process.	
	NOFO Section VII.B.1.p.	

	Describe in the field below how your CoC's coordinated entry system:
1.	covers 100 percent of your CoC's geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

1. The CoC's Coordinated Entry System currently has three physical sites to access CE. One in Upper Darby, one in Boothwyn, and one in Chester City. Anyone needing to access a CE can physically go to one of these sites and they will be assessed. Person who are not close to one of these sites or going to the site has barriers, such as transportation or disability can have a CE assessment via phone from one of these sites. The CoC also has a mobile Team that can travel to all parts of the CoC's geographical area which ranges from Radnor to Chester to conduct CE assessments, and connect the individual to needed services. The mobile team can also conduct assessments on individuals that going to a physical site has barriers.

2. Everyone who comes to CE has the same needs assessment completed which asks housing needs, income needs, DV, as well as other assistance needs. At the end of the assessment a needs assessment and score is automatically created by the HMIS system by the answers given by the individual. This score is used to prioritize individuals for services. Once the person enters a shelter the SPDAT is completed and is used to prioritize the individual for housing. The CoC prioritizes DV, Chronically Homeless, Veterans, and Youth first. The CoC is currently reviewing all the assessment sites and created a CE Stakeholder committee to ensure that all policies are the same at each agency and that the same process is followed no matter where an individual obtains their CE.

3. The CE process is being reviewed by the CE Stakeholder Committee, which is inclusive of CE staff, Agency Supervisors, Agency Directors, and Non- CoC funded agencies. We are currently trying to recruit an individual that has gone through the CE process. This committee will continue after all CE policies and procedures are complete and ongoing CE training will be held regularly.

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)

The CoC CE system is advertised on the DHS website as well as through brochures, verbally with communication to Police Departments, the Health Department, and other Public Service Departments. This assists to get information out as a resource for persons who may not otherwise access homeless assistance. When advertised we discuss the mobile CE assessment team as well as the OT which can assist with transportation for persons with disabilities.

2. During the CE a set of questions are asked which creates a needs assessment and assists the CE staff in identifying people in the most need of assistance. Certain populations such as DV are automatically prioritized. If a person chooses not to go to shelter but is homeless the CE assessor can manually send a referral to the Permanent Housing Clearing House (PHC), which is where the CoC assigns homeless individuals to housing programs to ensure that priority populations are served expeditiously

3. After the CE is complete and a person enters the shelter, or a manual referral is completed to the PHC a SPDAT is completed which prioritizes the people in the most need of assistance. The SPDAT is designed to help prioritize which clients should receive what type of housing assistance intervention and assist in determining the intensity of case management services, prioritize the sequence of clients receiving those services. SPDAT domain components include: mental health & wellness & cognitive functioning, physical health & wellness, medication management, substance use, experience of abuse and/or trauma, risk of harm to self or others, involvement in high risk and/or exploitive situations, interaction with emergency services, legal involvement, managing tenancy, socialization and daily functioning, personal administration & money management, social relationships & networks, self-care & daily living skills, meaningful daily activities, history of housing & homelessness

4. Steps to reduce the burden of people using the Coordinated Entry include but aren't limited to completing the CE over the phone, having the mobile team go to the person or persons in need of a CE, and providing an alternative to give verbal consent to enter information into HMIS and collect data until a signed release can be obtained. The CoC also had Voice and Vision conduct interviews with persons that have accessed the CoC's CE assessment which has assisted in reducing the length of the assessment process.

1D-10.	Promoting Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section VII.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	No
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	

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:

1.	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)

1. The CoC does not yet have a specific, defined and targeted method for analyzing whether racial disparities are present in the outcomes of homeless assistance. Although basic racial and housing placement data can be obtained through our HMIS, further data collection methods are needed to make the data meaningful and useful for implementing change that can impact short and long-term strategies to address racial disparities within the CoC.

2. Specific racial disparities that our CoC has identified through data collection from our HMIS indicate that African Americans within our CoC have a much higher percentage of heart disease, high blood pressure and diabetes when compared to the white population within our CoC. With this knowledge, homeless service providers can target their efforts on addressing these racial disparities.

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.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	No
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	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.	No
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	No
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	No
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	No
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	No
	Other:(limit 500 characters)	
12.		

1D-10c.	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)

Steps taken to improve racial equity based on our disparity assessment completed 4 years ago include: providers training their staff on issues of racial equity; training through online webinars; attendance at training events and study of reading materials from both governmental and private agencies. In addition, the CoC has an e-mail distribution list of over 200 people. This list is made up of community members and services providers who have participated or expressed an interest in the provision of homeless services in the County. When the CoC is made aware of any training or events on the topic, this information is forwarded through this 200-e-mail distribution list. These training opportunities and events are often offered free of charge or have a minimal cost. The CoC also holds quarterly meetings through the Delaware County Homeless Services Coalition (HSC) which is another venue to offer Countywide trainings on a variety of subject matter including presentations of data research regarding racial inequities. In the coming year, the CoC plans to emphasize the identification of racial inequities and strategies on how to reduce their occurrence.

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

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 measures that our CoC has to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance, is being collected through our HMIS. Through HMIS data collection, there are valuable data points available to identify the existence of racial disparities to develop strategies to address them. In addition, HUD has downloadable tools which help identify disparities. The CoC also has access to Stella which provides valuable data collection with output reports in the form of graphs, pie charts and other ways to display data in a user friendly way.

1D-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)

Identifying and engaging individuals with lived experience of homelessness has been an area of challenge for the CoC. Although there is a desire within the CoC of having individuals with lived experience in leadership roles, our reality is that we have had limited success in identifying such people. Such attempts include discussions with provider staff and during provider meetings. Our current number of persons with lived experience is one. A goal in the upcoming year is for the CoC to make specific attempts of identifying persons with lived experience and invite them into positions of leadership within the CoC. One of the primary decision-making committees the CoC has is the Governing Board (GB) of the Homeless Services Coalition. The GB consists of leaders from county agencies that provide guidance and make decisions affecting the CoC. The CoC welcomes individuals with lived experience on the GB and as such there is currently no established limit for the number of individuals that can serve on the GB.

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.	1	0
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	1	0
3.	Participate on CoC committees, subcommittees, or workgroups.	1	0
4.	Included in the decisionmaking processes related to addressing homelessness.	1	0
5.	Included in the development or revision of your CoC's local competition rating factors.	1	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)

Each provider within our CoC has a different point of focus when it comes to providing various services to individuals with lived experience. Of particular note, within the CoC we have a provider that has a residential construction branch that those with lived experience who are skilled enough can apply for a position. Another provider offers computer availability to access the internet for job related searches. Of particular note, within the County, two CareerLink offices are available for any individual with lived experience or not can take advantage of skill building in person trainings. These CareerLink offices receive state funding and as a result they have multiple levels of assistance that they can provide someone with homeless lived experiences, such as computer training, resume writing, interview training and practice and job postings just to name a few.

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)

1. Our CoC gathers feedback from people experiencing homelessness and assistance in two particular ways: A) The CoC sought the services of Voice & Vision, Inc., (V&V) an agency that offers people the opportunity to be more informed about community services and connecting them to resources. Of their many services, one is designing participant surveys to measure the satisfaction (or not) of services individual are receiving. The CoC utilized V&V services to conduct a survey of participant satisfaction for homeless individuals who received Coordinated Entry (CE) services. The results of this survey were shared with providers of CE services so that the provider can improve their services which hopefully in turn will improve participant satisfaction outcomes. B) Another way in which feedback is received is that many homeless service providers will survey their own program participants asking questions about the services they are receiving. The results of the surveys are used within the agency to target areas where they can improve upon their delivery of services.

2. The steps our CoC has taken to address challenges raised by people with lived experience of homelessness is primarily through face-to-face encounters with agency case managers and/or other program staff. The most consistent and ongoing challenge raised by individuals with service providers is the lack of affordable housing available and accessible in the area. The CoC is fully aware of this challenge of finding affordable housing but is challenged in today's increased rental rates to access such housing. This challenge will most likely continue into the foreseeable future and one which the CoC and individual services providers are trying to address.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	
	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 following:	
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1. "The Housing Taskforce" is being developed on a local level in our CoC, and is led by the "Office of Housing and Community Development" (OHCD). This office will engage community partners to create additional affordable housing within the CoC. Utilizing the State bills passed below this Taskforce will meet with developers, banks, local stakeholders, and County officials to reform zoning and land use policies to permit more housing development and reduce regulatory barriers to housing development.

2. Act 58 (House Bill 581) was signed into law July 11, 2022, granting more powers to municipalities to approve tax abatements and other incentives for affordable-housing projects. This will allow more opportunities to increase the CoC's affordable housing supply.

a. The effort is part of an approach to allow counties to respond to their housing needs, rather than the state government taking the lead.

b. Townships, boroughs, or cities could grant 10-year tax exemptions on multi-unit buildings where 30% of units qualify as affordable housing or when a project repairs a blighted property.

c. The law also gives local governments the authority to forgive or refund the property tax liability to low-income families due to property tax or assessment changes.

House Bill 2209, sponsored by Rep. Abby Major (R-Armstrong/Butler/Indiana), would allow a land bank board to establish a virtual quorum via an internet platform to conduct a board meeting. The bill was amended in committee to exempt land banks from state and local realty transfer tax and to expand the powers of land banks to partner with the private sector to find solutions to address housing for the homeless populations.

oThird consideration and final passage, April 26, 2022 (185-18)

In the Senate

oReferred to URBAN AFFAIRS AND HOUSING, May 3, 2022

oReported as committed, June 15, 2022

oFirst consideration, June 15, 2022

oSecond consideration, June 22, 2022

oRe-referred to APPROPRIATIONS, June 22, 2022

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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

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

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC's local competition.	08/16/2022
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1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

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

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

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

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.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	200
2.	How many renewal projects did your CoC submit?	25
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section VII.B.2.d.	

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)

1. Our CoC collects and analyzes data for projects that have successfully housed participants in Permanent Housing (PH) by reviewing selected data points collected in our HMIS. With these data points, we create and run reports specific to each program. In turn, these reports allow for comparison between programs while identifying strengths and weaknesses within each program as it relates to successfully housing participants in PH.

2. Through data collected in our HMIS, we create reports detailing how long it takes to house people in Permanent Housing (PH). The resulting data allows for comparison of different PH programs to each other. In turn, this report data can help identify how long it takes to relocate an individual into PH.

3. The method our CoC used to consider the specific severity of needs and vulnerability experienced by program participants in our CoC ranking process, was to ask providers if they serve any of these subpopulations: (A) behavioral health issues; (B) fleeing DV; (C) LGBTQ+; (D) non accompanied youth; (E) families w/children; (F) people w/disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS. Providers that served any of these subpopulations were able to accrue points toward their total point accumulation on their scorecard. These point totals contributed toward a providers overall total score, which in turn, determined the ranking of the program compared to other programs within the CoC.

4. The considerations our CoC gave to projects that provide housing and services to the hardest to serve populations included the opportunity to earn points on their scorecard based upon the agency providing training in any of the following subpopulations: (A) behavioral health issues; (B) fleeing DV; (C) LGBTQ+; (D) unaccompanied youth; (E) families w/children; (F) people w/disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.

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.	

(limit 2,500 characters)

1. Obtaining input from persons of different races, particularly of those over represented in the local homeless population when determining factors used to review project applications, is inherent in our rating process. Members of our Homeless Services Coalition, Governing Board (GB) have historically included members from various races and ethnicities within the board. This cross-section of different people provides an opportunity to view tasks, challenges and needed actions from multiple viewpoints. From these viewpoints collective decisions can be made on how to approach items, task and situations which come before the GB.

2. Of particular note is one Governing Board member who is the Director of Housing Opportunities Program for Equity (HOPE) of The Foundation for Delaware County. This individual identifies as a black person whose input is valued in the decision-making processes as it relates to our application and other matters that come about through the year. The foundation where this individual works is a leader in the community and their reach touches many lives in the Delaware County many of which have benefited from the direct work this individual.

3. Governing Board (GB) members, who are a diverse cross section of races and ethnicities, meet 4 to 6 times a year. Within this diverse group, all have equal input into the ranking process no matter what their identification is.

4. Projects within our CoC were primarily ranked according to scores. Those with higher scores were ranked higher than those with lower scores. As this was the primary method for ranking, we did not this year have the opportunity to rank projects based on their ability to identify and address barriers to participation faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population when it comes to their projects.. In the upcoming year, the CoC will make efforts to incorporate a projects ability to overcome barriers into our scorecard.

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)

1. Current projects are reviewed and considered for reallocation if they consistently are low performing, not cost effective or no longer viewed as a high priority to the CoC. Ongoing program assessment looks at utilization, spending and effectiveness. If a program is found to be underutilized, ineffective or not cost effective, the program will be notified, and a plan will need to be created to current the deficiency. If the program is unable to meet the needs of the CoC, notification will be given to the provider that their project is being considered for allocation.
2. No projects were identified for reallocation.
3. No projects were reallocated this year.
4. We plan to look more closely at low performing projects in preparation of the CoC Application for the upcoming year; in preparation, provide any low performing programs a specified time period to raise performance and if at application next year their performance remains low, present them for potential reallocation.

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

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

1.	Did your CoC reject or reduce any project application(s)?	No
2.	Did your CoC inform applicants why their projects were rejected or reduced?	No
3.	If you selected Yes for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/09/2022
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1E-5b.	Local Competition Selection Results—Scores for All Projects.	
	NOFO Section VII.B.2.g.	
	You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank—if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes
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1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/16/2022
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application has been posted on the CoC's website or partner's website.	
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You must enter a date in question 1E-5d.

2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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

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

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

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

	Enter the date your CoC submitted its 2022 HIC data into HDX.	04/26/2022
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2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section VII.B.3.b.	

	In the field below:
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in databases that meet HUD's comparable database requirements; and
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.

(limit 2,500 characters)

1. Domestic Abuse Project (DAP) is the CoC funded DV Provider, and it is evaluated as part of the annual renewal scoring process. As part of the process DAP must submit an APR from their comparable database. Through this process the CoC can ensure that the APR is collecting all the required data elements. The database that is used by DAP is called ETO. The data it collects is the same as any other questions identified in the APR. This includes identifying information, demographics, enrollment date, move-in date, exit dates, income at entry and exit as well as annually, and all household members' information. The database also includes a history of mental health, disability, substance abuse, veteran status, domestic violence history etc. It is created specifically for the unique needs of victim service organizations. The data is encrypted with a key that only the VSP knows and can read. It also generates any funding reports that are needed.

2. This database is compliant with the 2022 HMIS data standards as well as the CoC's HMIS data collection system

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	273	35	273	114.71%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	79	0	69	87.34%
4. Rapid Re-Housing (RRH) beds	228	30	198	100.00%
5. Permanent Supportive Housing	432	0	432	100.00%
6. Other Permanent Housing (OPH)	80	0	80	100.00%

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

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

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

(limit 2,500 characters)

Not Applicable.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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	

	Enter the date your CoC conducted its 2022 PIT count.	02/22/2022
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2B-2.	PIT Count Data—HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	02/25/2022
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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)

1. The Delaware County CoC collaborated with Catholic Social Services, Horizon House Outreach Team and Community Action Agency to coordinate efforts to engage youth experiencing homelessness for the 2022 PIT Count. These agencies were selected due to their most consistent contact with the youth experiencing homeless before the PIT count.
2. There were no youth involved in the actual planning or implementation of the PIT count in 2022 but the CoC will be developing a plan to incorporate the youth into the planning and or implementation of the future PIT counts.
3. The CoC along with the other provider agencies selected The Coffee Club which is governed by Catholic Social Services as the location to be assigned to coordinate with the youth experiencing homelessness for the PIT count. This location was already frequented by the youth experiencing homelessness in the past.

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)

1. No changes were made in regards to methodology with sheltered PIT count between 2021 and 2022.
2. In the 2022 unsheltered PIT count, the Delaware County CoC Adult and Family Services Department coordinated with the Delaware County Sustainability Office to provide the opportunity for all the provider staff involved with the PIT count to receive a secure cellular phone to assist with retrieving pertinent information for the PIT count along with providing real time location results. This method was a significant change between 2021 and 2022 in which paper forms were used in 2021.
3. The results were computed immediately resulting in a more effective strategy to document the location and number of homeless persons for our data for HUD. This process assured that possible duplicated names were removed immediately for more accurate results.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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)

1. HMIS driven data and information from CE staff is analyzed to determine trends in who is first time homeless.
2. Beyond connecting households to community supports or mainstream resources, the CoC has implemented strategies to prevent families at risk for the first time:
 - a. Diversion-CE system has built in diversion questions and requests all households provide the names of three support persons where alternative housing arrangements could be negotiated to prevent them from entering Emergency Shelter (ES).
 - b. Financial Support- The CE process connects households with financial assistance (ESG and other eviction prevention funds for first, last and security to relocate) to resolve their housing crisis whenever possible.
 - c. Landlord Mediation and Housing Counseling- For those who are ineligible for financial assistance. These activities include developing repayment plans to keep people housed when arrears are a factor.
 - d. CE Staff Training- The CoC continues to provide resources to the CE staff for a more effective CE experience. In addition, CoC Action Team (CoCAT) is evaluating the continuing changing needs of the homeless population and developing a list of training programs pertinent to meeting the needs presented at CE. The training opportunities would be mandated and offered throughout the year for all staff.
3. The CoCAT is responsible for overseeing 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)

1. The CoC continues to strengthen the housing-focused practiced through implementation of the following strategies to reduce the LOTH; previous reallocation of TH programs to create RRH; regular allocation of ESG funding for RRH activities; EHV and Mainstream Vouchers to house individuals quickly or free up CoC funded resources such as RRH or PSH. Also, by continuing to promote housing focused case management for ES programs resulting in immediate discharge planning and quicker exits from shelter; continuing to utilize the Permanent Housing Clearinghouse (PHC), a web-based prioritization and assignment system, eliminating paper applications and quicker housing program assignments. The CoC has two Housing Locators (HL) which are in two separate CoC providers. One HL is for all individuals entering CoC PSH programs including Mainstream Vouchers, and one HL is specific for persons entering CoC RRH programs. As soon as a person is assigned to a housing program either RRH or PSH an automatic referral goes from the HMIS system to the appropriate Housing Navigator. Housing Navigators play an integral part in locating housing and matching available housing to persons assigned to housing programs. To increase landlord participation, the County continues to offer a Landlord Relief Fund to assist with past due rents and damages not covered by another resource, as well as funding to hold units for one month, while the CM navigates the housing quality inspection and any needed repairs.
2. A CoC staff person is tasked to identify all CH persons to ensure rapid placement into housing. A weekly meeting with CoC providers inclusive of ES, OT, PSH and RRH review a weekly name-by-name list from HMIS that identifies possible CH, and other individuals that may not be CH. Shelter staff as well as OT work with individuals to assist in either obtaining disability verification, homeless verification, income verification (if they have income) for CH housing placement or RRH placement. Documents that are missing are requested by the CoC staff person to case manager to obtain and upload for verification for housing placement. OT identifies and engages unsheltered to identify and move these individuals into housing. All non-chronic individuals are assigned housing through the PHC, which is monitored on a regular basis to place persons without a disability into RRH expeditiously.
3. The Adult and Family Services is the lead agency responsible for overseeing this strategy

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)

1. The CoC has a good working relationship with our local Housing Authorities which have provided additional resources for individuals inclusive of DV to exit to permanent housing. We have received mainstream vouchers from both Delaware County Housing Authority (DCHA) as well as Chester Housing Authority (CHA), and EHV vouchers from DCHA. The CoC also assigns individuals from ES, RRH, TH to PSH programs when available, and the client meets the criteria to ensure long term housing stability. Individuals in RRH are reviewed monthly by the provider to assess their longer-term housing needs. The CoC meets on a weekly basis to discuss clients in the shelter and determine if there is a program that may be a long-term solution to their housing instability. All CoC funded PSH and RRH programs offer regular case management to support persons in the program. This case management entails; encourage behavioral health treatment when applicable, ensure participants have applied for and continue to update applications for mainstream housing vouchers through the Housing Authorities. It is also, as well as applications for SSI/SSDI if appropriate, assisting individuals in obtaining affordable housing so they can remain stably housed once RRH ends, referring to employment and mainstream benefit programs to increase income, assisting with applications for low-income childcare. This case management is essential for our individuals to obtain and retain housing as it can include landlord mediation, budgeting, paying rent on time, being a good tenant and addressing behavioral health need that may otherwise impede their ability to maintain stable housing. When needed a Landlord Relief Fund was developed and is available to assist with financial assistance for excessive damage, one-month move-in costs to hold a unit or new landlord incentive. If a person in PSH or RRH is evicted, the CM can assist with locating a new unit and assist with move-in costs.

3. Adult and Family Service is responsible to oversee the CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

2C-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)

1. The CoC runs a report yearly to identify individuals that have returned to homelessness either after exit from shelter, RRH, PSH and TH. This data is reviewed by CoC staff and the HMIS team to complete an analysis and to determine the percentage of persons returning into homelessness. This information is shared and discussed with the CoC's Governance Board. The HMIS system also identifies returning households at CE Intake as well. When the individual is entered into the HMIS system at CE a homeless episode screen appears that tells the assessor if the individual has ever been in one of our CoC funded homeless programs. If the individual has been in one of these programs the CE assessor would discuss the barriers that led them back into homelessness.

2. The CoC's strategy to reduce the rate of additional returns to homelessness include an analysis of detailed data and CE data. This data identified common characteristics among the households who returned to homelessness. The CoC found the households who returned were mainly single adults who exited ES or households who exited RRH and were evicted for non-payment of rent. Successful strategies to prevent homelessness include the following: identify affordable housing units so households don't need to relocate. CoC housing providers (ES, RRH, TH and PSH) provide housing-focused services that promote housing stability. CMs were previously trained and have been provided the Prepared Renters Education Program, a curriculum that provides the tools to obtain rental housing, maintaining housing and instruction on how to avoid pitfalls that could cause eviction. RRH CMs utilize a Critical Time Intervention CM model, an evidence-based model, that promotes housing stability to participants for the first nine months in housing. At CE, prioritize returning households who present with rental arrears to receive financial assistance. When needed, use housing counseling, landlord mediation and Landlord Relief Funds to keep people housed; develop repayment plans where arrears are a factor in impending homelessness. Allocate prevention resources (CoC/ESG/State) to fund financial assistance to prevent reentries into homelessness. CM's conduct post-discharge follow-up contact at 3, 6, 9 and 12 months when individuals allow to check on housing stability and to ensure community supports are in place.

3. The Governing Board is responsible for overseeing this strategy to reduce returns to homelessness.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO 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)

1. The CoC strategy is to maximize economic stability to the highest level possible by encouraging and supporting participants to engage in Careerlink's employment services. Additionally, Community Action Agency of Delaware County (CAADC) previously coordinated a pharmacy technician program and currently a medical assistant program to encourage participants to engage in training leading to increased income.
2. Careerlink offers assessment, job placement and limited training dollars. Collaboration with Careerlink provides a monthly calendar of workshops and job preparation opportunities as well as current job opportunities. Educational Data Systems, Inc (EDSI) is also a Homeless Services Coalition (HSC) participant and regularly shares opportunities for persons with criminal histories, often impeding employment opportunities. Community expungement clinic information is shared with participants as the events occur. Information is subsequently provided to the HSC through an email distribution list and the delchomelesservices.org website for sharing with participants in shelter and housing programs.
3. Adult and Family Services is responsible for implementing 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)

1. The CoC strategy is to maximize economic security to the highest level possible by increasing all cash income including non-employment cash. To promote increases, CoC providers prioritize connecting people to mainstream cash resources such as; TANF, SSI/SSDI, VA benefits, pensions, child support, Child Tax Credits, etc. The CoC implemented an HMIS eligibility assessment to determine what sources of non-employment cash income people are receiving, are under application for or should be referred to, and transfers that information in to the HMIS-generated immediate needs plan. Coordinated Entry assessments identify households with no or low income and CE specialists conduct initial referrals to County Assistance Offices for cash assistance applications. The CoC requires ES, PSH, and RRH CMs to follow up and refer clients to eligible cash benefits immediately and or check the status of existing pending applications.- CMs use the PA state COMPASS system to check for TANF eligibility.
 - The CoC has a SNAP/Food Stamp Participation Project which assists families with enrollment for the SNAP and to TANF cash assistance.
 - The CoC Provided information to shelters and housing programs regarding eligibility for Child Tax Credits and how to apply for those credits.
 - The CoC has 3 Volunteer Income Tax Assistance (VITA) programs to encourage participants to complete their taxes at sites to maximize their returns without exorbitant cost.
2. Adult and Family Services is responsible for implementing this strategy.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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

3A-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.	

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
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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 Type
This list contains no items			

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) 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 your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

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

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

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

(limit 2,500 characters)

Not Applicable

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

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

- Notice of Funding Opportunity (NOFO) 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.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	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:

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

(limit 2,500 characters)

not applicable

4A. DV Bonus Project Applicants

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

4A-1.	New DV Bonus Project Applications.	
	NOFO Section II.B.11.e.	

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

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

4A-3.	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)	

1.	Enter the number of survivors that need housing or services:	262
2.	Enter the number of survivors your CoC is currently serving:	20
3.	Unmet Need:	242

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)

1.The total number of DV survivors needing housing or services is calculated as: a) # of survivors served by Domestic Abuse Project (DAP) from 7/1/21-6/30/22 that have either been denied shelter services or those that were in shelter but DAP was unable to offer RRH services due to lack of funds (219), and b) total heads of household assessed through Coordinated Entry from 7/1/21 to 6/30/22 who identified as fleeing domestic violence (23), and c) survivors CoC is currently serving (20). These numbers are combined to get the total numbers. Due to DV survivor data confidentiality, these numbers cannot be deduplicated. The total number of survivors your CoC is currently serving is calculated as: a) # of DV survivors served by DAP in CoC-funded RRH program in July 2022 (15) and b) # of heads of household served in CoC-funded projects in July 2022 who identified as fleeing DV (5). These numbers are combined to get the total numbers.

2.The data sources for # of survivors that need housing or services are a) ETO (DV database used by DAP to track shelter enrollments and b) HMIS. The data sources for # of survivors the CoC is currently serving are: a) EmpowerDV (DV comparable database used when a household is enrolled in RRH), and b) HMIS

3.The CoC is unable to meet the needs of all survivors due to insufficient housing resources, including permanent housing resources. The CoC currently only has 15 DV-dedicated RRH resources. While DV survivors can access other resources within the CoC, DAP provides DV-specific services and resources and often survivors may be accessing other resources through DAP. DAP has been able to work with survivors on alternative housing plans such as living with relatives but this option is often short term and does not address long term housing stability plans. The shelter case managers work closely with families in devising exit plans in order to survivors to stay safe and to be able to eventually obtain stable housing, however expanding the RRH resource for domestic violence victims in Delaware county would be key to supporting the safety needs of victims.

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)	

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

Applicant Name
Domestic Abuse Pr...

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	Domestic Abuse Project of Delaware County, Inc.
2.	Project Name	DAP RRH FY22 Expansion
3.	Project Rank on the Priority Listing	25
4.	Unique Entity Identifier (UEI)	K9BNNED2HRL1
5.	Amount Requested	\$322,571
6.	Rate of Housing Placement of DV Survivors-Percentage	83%
7.	Rate of Housing Retention of DV Survivors-Percentage	79%

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;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1. In 2021 86 families entered the safe house and 72 families entered permanent housing upon discharge, which is calculated as a rate of 83% housing placement. DAP provides follow-up to all households exiting the safe house and tracks housing status for 3 months. Housing retention is calculated by confirming the number of families who remain housed 3 months post discharge.

2. These rates account for exits to safe housing destinations.

3. The HMIS comparable database used is Social Solutions' Efforts to Outcomes.

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)

1. Participants and case manager (CM) begin housing search immediately following intake. The case manager completes a housing barrier form and preference form. This gives the participant autonomy in deciding where to move and what they feel is best for their family and prioritizes their safety as well as ensuring affordability. While participants ultimately chose their housing unit, CM support the participant in developing housing plans and budgeting as they identify best fit and make decisions for their short and long-term housing goals, including relocating to a more affordable unit during their participation in the Rapid Re-housing project. Safety is the priority in selecting housing.

2. CM completes comprehensive evaluations to identify those in most need of RRH programming. DAP CM refers to CE for an assessment and exit plans can be created in collaboration with other CoC programs, such as Public Housing, other Rapid Re-housing programs, or transitional housing. Once clients are enrolled in programming DAP has a policy that including landlords sign a leased addendum protecting the survivor in accordance with the Violence Against Women Act. The participant is also provided with documentation explaining the CoC's emergency transfer plan.

3. CM completes an intake and family needs assessment to identify and assess areas of needs and refers participants to resources. Family Service plans are routinely revisited during each visit to assess progress and determine any additional needs.

4. The ongoing need of case management and advocacy is a crucial part of safety, healing, and support for survivors. Participants are referred internally for DV specific support including: Child/ Adult Counseling Services, Support Groups, Legal Representation and court accompaniment; Financial Empowerment Services. DAP works closely with external resources to ensure connections including: Drug and Alcohol Treatment; Utility Support; Transportation; Childcare; Employment; etc.

5. CM assists participants in making an informed choice with the goal that the participant will be able to maintain housing after program exit. While enrolled in RRH CM work with clients to create a plan to ensure ability to maintain rent once the subsidy ends. This includes helping on job searches to obtain employment, enter job training programs, apply for SSI or disability and/or other benefits, or build a resume. DAP has also been able to work to obtain housing vouchers for some families.

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 confidentiality policies and practices; and	
	5. taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

1.DAP's main office space is equipped with private counseling spaces. DAP has a Safe House that was renovated in 2018 with separate rooms for intake that include white noise machines for confidentiality. Anyone who enters any of DAP spaces is required to sign a confidentiality statement. DAP does not conduct intakes with partners and conducts interviews separately to ensure safety and reduce any risk of potential coercion.

2.DAP currently provides services using a domestic violence Housing First philosophy. The program is low-barrier, flexible, tailored to each household's needs, using trauma-informed, victim-centered approaches. CM's help participants identify safe areas, help them identify prefer housing type and amenities. CM works with the participant on a safety plan that includes location, schools, transportation, and other safety measures such as a Protection from Abuse Order.

3.DAP does not publish the location of the shelter and has a designated location to enter which decreases the public's view of the building entrance. DAP works with participants in identifying safe methods to disclose address as appropriate. All client files are kept in confidential spaces with locked cabinets. DAP utilizes the DB Empower data base as a HMIS comparable database. Empower DB is the only cloud-based database that offers zero knowledge encryption - the data is encrypted in servers with a key that only the provider knows and even the system cannot read the information saved.

4.All staff are required to complete a 45-hour domestic violence training for onboarding that focuses on the impact of DV as well as safety planning, confidentiality, and policies and procedures in all situations. All staff receive 5 hours of training on confidentiality and the Violence Against Women Act. The training outlines the strict confidentiality laws in place. Staff are not permitted to begin work with clients until training is completed. A total of 10 hours are delivered on skill development practices, including best practices to safety planning with victims.

5.DAP adheres to strict confidentiality practices, as required under the Violence Against Women Act, and keeps the identity of clients confidential as well as where any housing is located, including our shelter site. All of our office sites have security protocols that allows us to monitor who comes in and out and works in close collaboration with local police departments to respond if assistance is needed.

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)

1. Safety remains paramount to all aspects of our service delivery models. DAPs CM assess and check in about safety during every home visit. Home visits are conducted weekly and CM reviews with clients their safety plans as well as discusses any newly identified needs as it pertains to the survivors DV history. Safety plans and their follow up are documented. All participants have access to DAP's 24/7 crisis hotline if they need to get in contact with staff. DAP has been able to relocate survivors as needed once their safety is at risk due to DV. CM also works closely with other DAP programs and has made appropriate referrals as needed once their safety becomes a concern. For example, a survivor can be referred to our legal department to assist with obtaining a Protection From Abuse Order or receive ongoing counseling services from a licensed clinician. DAP follows up three months post discharge from RRH. CM reach out to participants to check in on housing stability as well as safety planning as needed. These post-discharge follow ups allow DAP to support the ongoing safety of the survivor, allow for additional updates to a safety plan, and evaluate longer-term support needs. DAP does review post follow up data to evaluate outcomes for survivors related to ongoing safety and housing stability. DAP's housing stability rate is currently 79%. DAP holds monthly team meetings to provide ongoing evaluation of outcomes for survivors related to safety and housing stability. DAP has not found any needed improvements around safety during the course of the project.

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;
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.
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(limit 5,000 characters)

1)DAP provides our housing service utilizing a Housing First Approach, which is driven by client choice. and focuses on getting survivors of DV into stable housing as quickly as possible while providing the needed support to rebuild their lives. The housing first model incorporate mobile advocacy, community engagement, and flexible financial assistance that promotes housing choice, safety planning, and rapid placement into housing.

2)The Safe House has replaced ineffective, restrictive rules with “Best Practices” to reduce punitive methods. Best Practices are framed with positive language, are introduced at intake and posted throughout the safe house to remind participants of their behavioral expectations. The agency has developed a set of “Core Values” that guide staff and participant interactions. The values include: Safety, Inclusion, Dignity, Growth, Collaboration, and Hope.

3)DAP works from an empowerment-based, trauma informed approach which acknowledges the individual experience of trauma impact. We believe in the client’s right to self-determination and work to provide tools for healing and fostering resiliency. All staff, during the onboarding process complete a 45-hour domestic violence training that focuses on a trauma informed client centered approach. Staff also have access to ongoing quality trauma training, through Lakeside, which offers several levels of trauma courses. DAP facilitates several support groups for survivors of domestic violence throughout the year. Support groups are held virtually and person and are all based on trauma principals and educate participants on the impact of trauma. Parents are also offered parenting support groups to support their roles in supporting children impacted by the trauma of family violence.

4)DAP works to provide a healthy environment that supports helping survivors understand the impact of trauma on their own development and enlist them in the process of change. This is done through a strengths-based approach that embraces the resiliency participants carry with them. From intake to discharge, program design is tailored to ensure a strength based approach that includes worker from a client centered approach that respects the goals and aspirations of the individual. All service plans are created to build off the individual strengths the participants have.

5)This past year, DAP Implemented its first prevention project that focused on systemic oppression and DV. This project comprised of trainings and social media campaigns that addressed systemic oppression and its connection to DV. In November 2020, DAP commenced this one-year project that informed board members, staff, and community members about systems and policies that create oppression and their close ties to DV. In early 2021, all staff participated in a two-part training series titled “Let’s Talk Oppression and Hold Each Other Accountable”. This training covered topics including the history of systematic racism, white supremacy culture, identifying and interrupting microaggressions, and giving/receiving feedback. Internally, DAP has used staff meetings to discuss the value of inclusion and brainstorm ways to incorporate it into practice at DAP. The organization has created new partnerships including the Welcoming Center in Upper Darby – an organization that focuses on welcoming the immigrant community to Delaware county. This partnership will allow DAP to serve a higher number of immigrant survivors and provide needed DV education to this group. Changing the client intake packet and asking for pronouns on the 24/7 hotline has begun to change the culture of the organization and normalize serving clients of diverse gender identities, which we anticipate will result in a higher number of LGBTQ+ survivors seeking services. Since March 2022, the org has participated in a systems of oppression training with an outside consultant to help train staff on intersectionality.

6)DAP facilitates several support groups for survivors of domestic violence

throughout the year. Support groups are held virtually as well as in person and are all based on trauma principals and educate participants on the impact of trauma. Parents are also offered parenting support groups to support their roles in supporting children impacted by the trauma of family violence. Groups are held virtually as well as in person to reduce barriers of participation and increase connections amongst survivors. Several program participants also serve as agency volunteers to help with outreach and awareness, other agency activities.

7)DAP facilitates several cohorts of parenting support groups throughout the year. Groups are held both virtually and in person and focus on trauma informed approaches to parenting after violence. Many of the parents need custody support for their children and DAP is able to refer to other legal aid service that can provide free representation for parents.

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)

DAP Case managers (CM) will work with program participants to develop a written, trauma informed, strengths based, consumer-driven and measurable housing stability plan to help them achieve permanent housing stability. The plan may include goals related to childcare, employment, family reunification, financial stability, health, housing, legal issues, and other concerns as appropriate. The plan will include a goal to sustain housing following the end of program assistance, including either goals to increase income, reduce debt and/or decrease household expenses. The plan will be monitored and updated at regular intervals. A copy of the current plan will be given to the participant and kept in their file. The housing stability plan will always have goals that are measurable. DAP CM will help participants to identify and select among various permanent housing options based on their unique needs, preferences, and financial resource, including but not limited to: addressing issues that may impede access to housing, such as credit history, arrears, and legal issues; helping to negotiate manageable and appropriate lease agreements with landlords; making appropriate and time-limited services and supports available to families and individuals to allow them to stabilize quickly in permanent housing; providing or assisting the household with connections to resources that help them improve their safety, health and well-being and achieve their long-term goals, ensuring that services provided are client driven and are voluntary. DAP provides a wide variety of support services to participants. Some of DAP's internal supportive services include: case management, financial education and employment readiness programming, positive discipline and parenting education which includes the effect of DV on children, stress management, and connections to additional community resources to increase protective factors and ongoing resilience. The RRH Program will also make referrals to appropriate community and mainstream resources, including, but not limited to: income supplements/benefits such as physical, mental, and behavioral health services; vocational/employment opportunities; services to meet their unique needs such as those specific to youth, veterans, DV survivors, LGBTQIA populations, etc.; Temporary Assistance for Needy Families (TANF) or Supplemental Nutrition Assistance Program (SNAP); legal assistance; and credit counseling. However, a participant may choose not to follow up on or participate in any referred services or programs. All RRH staff must understand and inform program participants with school-age \-Vento Act and Every Student Succeeds Act (ESSA). Case managers must have strong working relationships with local school district McKinney-Vento Act homeless liaisons and a Memorandum of Understanding (MOU) with local school districts and publicly funded Pre-K/early learning programs to ensure streamlined and prioritized access to educational programs for children experiencing homelessness. DAP will work with designated educational liaisons within school districts that ensure that children are enrolled in school, connected to appropriate services in the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney Vento education services. DAP works closely with external partners for referral connections including: Delaware County Victim Assistance Center; Family Support Line; CASA Youth Advocates; Clarify; Workforce Development Programs, including EARN centers; Mirmont Treatment Center, Delaware County Children and Youth and others. DAP will connect participants with this variety of internal and external supportive services, all while supporting the participant to move quickly into housing. Housing and services go hand in hand within our program model. At every stage of the engagement process, safety is at the forefront and is incorporated into all discussions about services and housing needs.

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:

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)

1.DAP will provide our housing service utilizing a Housing First Approach, which will be driven by a client choice approach. This will also focus on getting survivors of domestic violence into stable housing as quickly as possible while providing the needed support to rebuild their lives. The housing first model incorporate mobile advocacy, community engagement, and flexible financial assistance that promotes housing choice, safety planning, and rapid placement into housing. A trauma informed approach that is client centered is paramount throughout the delivery of services.

2.The Safe House have replaced ineffective, restrictive rules with “Best Practices” to reduce punitive methods. Best Practices are framed with positive language, are introduced at intake and posted throughout the safe house to remind participants of their behavioral expectations. The agency has recently developed a set of “Core Values” that determine how we guide both staff and participant interactions. The values include: Safety, Inclusion, Dignity, Growth, Collaboration, and Hope.

3.DAP will work from an empowerment-based, trauma informed approach which acknowledges the individual experience of trauma impact. We believe in the client’s right to self-determination and will work to provide tools for healing and fostering resiliency. All staff, during the onboarding process complete a 45-hour domestic violence training that focuses on a trauma informed client centered approach. Staff also have access to ongoing quality trauma training, through Lakeside, which offers several levels of trauma courses specifically for those working in the helping fields. DAP will work to facilitate several support groups for survivors of domestic violence throughout the year. Support groups will be held virtually as well as in person and will all be based on trauma principals and educate participants on the impact of trauma. Parents will also be offered

4.DAP will work to provide a healthy environment that supports helping survivors understand the impact of trauma on their own development and enlist them in the process of change. This will be done through a strength-based approach that embraces the resiliency participants carry with them. From intake to discharge, the program will be designed and tailored to ensure a strength-based approach that includes worker from a client centered approach that respects the goals and aspirations of the individual. All service plans are created to build off the individual strengths the participants have.

5.This past year, DAP Implemented its first Pennsylvania Coalition Against Domestic Violence funded local prevention project that focused on systemic oppression and domestic violence. This project will be comprised of trainings and social media campaigns at the organizational and community level that addressed systemic oppression and its connection to domestic violence. In November 2020, DAP commenced this one-year project that informed board members, staff, and community members about the systems and policies that create oppression and their close ties to the experience of domestic violence. In February and March of 2021, all staff participated in a two-part training series titled “Let’s Talk Oppression and Hold Each Other Accountable”. This training covered topics including the history of systematic racism, white supremacy culture, identifying and interrupting microaggressions, and giving/receiving feedback. Since March 2022, the organization has participated in a systems of oppression training with an outside consultant to help train staff on intersectionality and how we interact with these systems every day in our work. Training sessions, conferences, and other opportunities to learn and grow will continue to happen to ensure that all clients and staff are safe and respected at DAP.

6.DAP will facilitate several support groups for survivors of domestic violence throughout the year. Support groups will be held virtually as well as in person

and are all based on trauma principals and educate participants on the impact of trauma. Parents will be offered parenting support groups to support their roles in supporting children impacted by the trauma of family violence. Groups will be held virtually as well as in person to reduce barriers of participation and increase connections amongst survivors. Several program participants will serve as agency volunteers to help with outreach and awareness, other agency activities.

7.DAP will facilitate several cohorts of parenting support groups throughout the year. Groups are held both virtually and in person and focus on trauma informed approaches to parenting after violence. Many of the parents need custody support for their children and DAP is able to refer to other legal aid service that can provide free representation for parents.

4A-3h.	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)

DAP's Board of Directors includes a number of survivors, including past DAP program participants. The Board of Directors are directly involved in the short-term and long-term success of the organization. They oversee operations, fundraising and strategic planning of the organization. Having survivors on our Board of Directors is important to ensure that the survivor-lens is included in all major decisions for the organization. Focus groups are periodically facilitated to gain client feedback. Additionally DAP uses the Empowerment and Strength Based Questionnaire tool (ESQ) to engage survivors who are enrolled in services to gain additional feedback on their experience accessing services as well as ways we can improve and expand our support services. DAP is working to create a Delaware County Domestic Violence Task Force in collaboration with county leaders and has the commitment of former participants/survivors to be a part of this important team to influence service delivery and collaboration within systems for survivors. DAP will work to create an advisory group comprised of past participants to support the ongoing program development and design. DAP will continue to conduct ESQ feedback surveys with all RRH client, which will then be reviewed by the advisory group. The advisory group's role would be to then use the feedback to provide recommendations for ongoing program enhancement. Furthermore, DAP is undertaking a strategic planning process to explore and execute ways the organization can fold survivors or past clients into our work. Strategies explored include: a survivor led advisory team, recruitment of survivors for staffing and volunteering needs, recruitment of more survivors on the board of directors, and more. These strategies will help DAP develop the project's operation with a real-world, lived experience lens.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	1C-7. PHA Homeles...	09/28/2022
1C-7. PHA Moving On Preference	No	1C-7. PHA Moving ...	09/28/2022
1E-1. Local Competition Deadline	Yes	1E-1. Local Compe...	09/28/2022
1E-2. Local Competition Scoring Tool	Yes	1E-2. Local Compe...	09/28/2022
1E-2a. Scored Renewal Project Application	Yes	1E-2a. Scored For...	09/28/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	1E-5. Notificatio...	09/28/2022
1E-5a. Notification of Projects Accepted	Yes	1E-5a. Notificatio...	09/28/2022
1E-5b. Final Project Scores for All Projects	Yes	1E-5b. Final Proj...	09/28/2022
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		

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

Attachment Details

Document Description: 1C-7. PHA Homeless Preference

Attachment Details

Document Description: 1C-7. PHA Moving on Preference

Attachment Details

Document Description: 1E-1. Local Competition Deadline

Attachment Details

Document Description: 1E-2. Local Competition Scoring Tool

Attachment Details

Document Description: 1E-2a. Scored Forms for One Project

Attachment Details

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:

Attachment Details

Document Description:

Attachment Details

Document Description:

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Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/20/2022
1B. Inclusive Structure	09/28/2022
1C. Coordination and Engagement	09/28/2022
1D. Coordination and Engagement Cont'd	09/28/2022
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/28/2022
2B. Point-in-Time (PIT) Count	09/28/2022
2C. System Performance	09/28/2022
3A. Coordination with Housing and Healthcare	09/20/2022
3B. Rehabilitation/New Construction Costs	09/20/2022
3C. Serving Homeless Under Other Federal Statutes	09/20/2022

4A. DV Bonus Project Applicants	09/28/2022
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

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1C-7a. PHA Homeless Preference

Attached documents include:

- **Excerpt from Chester Housing Admin Plan – Homeless Preference**

Housing Choice Voucher Program Administrative Plan Chester Housing Authority

This administrative plan has been prepared by the Chester Housing Authority (CHA) in conformance with the requirements of 24 CFR 982.54.

The plan sets forth CHA's discretionary policies for the administration of its Housing Choice Voucher program, in accordance with the requirements of the U. S. Department of Housing and Urban Development (HUD). Basic requirements for the administration of the program, as follows, are incorporated by reference:

24 CFR 5	Definition of Income, Income Limits, Rent and Reexamination of Family Income for the Section 8 Housing Assistance Payments Programs; Restrictions on Assistance to Non-Citizens; One Strike Screening and Eviction for Drug Abuse
24 CFR 888	Fair Market Rents and Contract Rent Annual Adjustment Factors
24 CFR 982	Housing Choice Voucher Program
24 CFR 984	Section 8 and Public Housing Family Self-Sufficiency Program

Additionally, all program activities are subject to the following civil rights laws and regulations:

24 CFR 1	Implementing Title VI of the Civil Rights Act of 1964
24 CFR 8	Nondiscrimination Based on Handicap in Federally Assisted programs and Activities
24 CFR 14	Equal Access to Justice in Administrative Proceedings

1. Applicant Outreach and Selection

Upon opening and reopening the waiting list, the CHA will place a notice in the Delaware County Daily Times, the Chester Spirit, and post notices in the CHA administrative and site offices. The waiting list opening will be for a period of not less than ten days. Prior to opening the waiting list, the CHA will hold information sessions on the application process for other community service providers to broaden outreach efforts thereby affirmatively furthering fair housing and expanding affordable housing opportunities.

Applicants must complete an online application form during the application period, and will be assigned a place on the waiting list based on preference and lottery ranking. Applicants without access to the internet may file an online application at the neighborhood network centers located at the Booker T. Washington Community Center, Ruth Bennett Homes, and William Penn Homes. Applicants requiring other accommodations in completing an online application may send a written request to the HCVP Compliance Department. Preferences are verified when the

applicant is selected from the waiting list. For households requiring an ADA-modified unit, applications may be filed at any time during business hours. Applicants shall provide verification from a social services or health care provider with their application.

Applicant selection will be determined by the following factors:

- **Family status:** All applicant households that qualify as families or elderly families will be offered assistance before applicant households consisting of a single person who is not elderly or disabled.

Families may consist of

- i. Two or more persons related by blood, marriage, or operation of law, or
- ii. two or more unrelated persons who can present evidence of a stable relationship that has lasted over a period of time, in which the resources of the parties are available for the needs of the household.

Elderly families may consist of one or more persons. The head of the household, spouse of the head, or sole member must be an elderly person (62 years or older) or a person with disabilities.

- **Preference(s):** CHA gives admission preference to HOPE VI relocatees, veterans, persons who have completed homebuyer education, have credit and mortgage approval and wish to purchase a home under the Housing Choice Voucher Homeownership option, persons in the witness protection program, and employed head of households and residents of the City of Chester.
- Disabled/elderly head of households have equal preference to employed head of households.
- To earn an employment preference, persons must be verified employed for a period of not less than 90 days prior to the selection from the waiting list for at least 20 hours per week.
- To earn a homebuyer preference, the person must have completed homebuyer education within the last two years and be able to obtain a mortgage commitment from a mortgage company or financial institution within 60 days from notification of eligibility.

CHA is required to ensure that at least 75 percent of the households admitted to the Housing Choice Voucher program annually are extremely low income households – with income at or below 30 percent of the area median. This may require CHA to skip over a very low-income household – with income between 31 and 50 percent of the area median – in favor of an extremely low-income household. If this happens, the applicant will remain on the list until CHA has met its income targeting requirements and can select the very low-income household.

Applicants are responsible for providing accurate addresses to CHA, and for updating their addresses as necessary. Applicants whose correspondence from CHA is returned “Forwarding Order Expired” or “Addressee Unknown” will be dropped from the waiting list. Applicants who do not respond to appointment letters or other correspondence concerning their applications will also be dropped from the list.

Repayment of Amounts Due to CHA

CHA requires any applicant who owes money to CHA as a result of prior participation in the Public Housing or Section 8 program to enter into a repayment agreement before receiving a Housing Choice Voucher. The applicant will be required to pay 1/3 of the amount down, and the balance in agreed-upon monthly installments over a 12-24 month period. If the family leases a unit with voucher assistance, and subsequently fails to make three successive payments, the family's housing assistance will be subject to termination.

2. Special Purpose Funding

When HUD awards Housing Choice Voucher funding to CHA that is targeted to a specific purpose, specific families, or specific categories of families, CHA will modify its selection procedures to comply with the requirements of the program.

In keeping with national housing goals, the CHA has established a local set-aside to support local homeless service providers in obtaining permanent housing for their clients. Provided sustained funding levels, one voucher will be set aside for every seventh turnover in the tenant-based voucher program. When vouchers become available, the lead agency submits homeless applications directly to the CHA for final eligibility determinations. The local service provider is responsible for case management and supportive services to ensure successful tenancies.

3. Issuing or Denying Vouchers

Vouchers are issued for an initial term of 60 days.

If, at the end of 60 days, the voucher holder has not submitted a Request for Tenancy Approval, the voucher will expire unless the family has requested and received approval for an extension. Extensions will be approved for good cause, including, but not limited to

- Illness or hospitalization during the initial 60 days, or

- Difficulty in locating units suitable for large families, units that will accommodate special needs of the family, and units in areas with low concentrations of poverty and minorities.

Extensions are given for an additional 60 days. Further extensions may be given in instances of severe hardship.

CHA will provide a full 120 days for applicants with disabilities to utilize their vouchers to find suitable housing. Further extensions may be given in instances of severe hardship.

CHA suspends the term of the voucher upon receipt of the Request for Tenancy Approval (Tolling).

Applicants who were former housing program participants that have an unsatisfied judgement of more than \$2000 for misuse or neglect of a previously assisted property or for other money

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1C-7b. PHA Moving On Preference

Attached documents include:

- **Excerpt from Delaware County Housing Authority
Admin Plan – Moving On Preference**

DELAWARE COUNTY HOUSING AUTHORITY

ADMINISTRATIVE PLAN

FOR THE

HOUSING CHOICE VOUCHER PROGRAM

APRIL 1, 2022

Approved by DCHA Board of Commissioners

Revised

must be based on local housing needs and priorities that can be documented by generally accepted data sources.

DCHA Policy

DCHA uses the following Local Preference system

Residency preferences for families who live, work, or have been hired to work in DCHA's jurisdiction.

Families who have at least one adult that is employed and has been employed for 3 months and works a minimum of 20 hours per week. This preference is extended equally to . The working preference shall also be available to a family if the head, spouse or sole member is 62 years old or disabled.

DCHA will provide admission preference (non-preference point) for (Mainstream)-non-elderly persons with disabilities transitioning out of instructional and other segregate settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless.

A family that is a victim of domestic abuse that is referred to DCHA by a recognized Domestic Abuse Shelter. The victim must present to DCHA a documented Protection from Abuse Order and a written referral from the shelter.

A family whose head or spouse is a veteran.

Selection of a domestic abuse family or veteran family will be processed using a ration 1 selection for every 10th admission. This ratio is discretionary and will be reviewed at least annually to determine its effects on issuance of vouchers. Based on recommendations from staff, the Executive Director may authorize a change in this ratio or suspend the processing of this selection.

Delaware County Housing Authority (DCHA)– Moving Up Set Aside Strategy (Graduates) **Moving Up Strategy for Homeless Households in Permanent Supportive Housing Programs**

Purpose: Over time, many homeless households who are participants in a Permanent Supportive Housing Program (PSHP), find that they no longer need the level of supportive services that are provided under Permanent Supportive Housing programs (PSH), but they continue to need housing assistance.

A “Move-On” strategy allows CoC communities to free up existing PSHP inventory for individuals with the high service needs, those who have been homeless for the longest time, and/or those with the greatest vulnerabilities. By issuing HCV to participants in PSHP, the CoC can identify individuals and families that no longer need intensive support services and offer vouchers to these households allowing them to continue receiving assistance and freeing up new slots for newly homeless.

The DCHA commits up to 15 graduate vouchers/year, dependent upon available funding.

Goal: Over a 12 month period, the DCHA will “graduate” up to 15 PSHP participating households from the following programs:

Program Name	Partner Agency	Grant Capacity
Shelter + Care 2345	Adult and Family Services	54 – 60 Households
PSH for Chronic Substance Abusers	Holcomb	9 -15 Households
Delco PSH for Adults with Mental Illness	Horizon House	7 -12 Households
Supportive Housing Program for homeless households with disabilities	Family and Community Services	6 – 9 Households

Process: The Division of Adult and Family Services, via the Homeless Permanent Housing Clearinghouse, will identify households who are ready to graduate from a program. At the same time, they will identify a new family to be placed in the “graduate” slots.

Conditions: All newly referred households must be on the DCHA waiting list.

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans.

In accordance with the annual plan DCHA ensures equal opportunity and affirmatively furthers fair housing. In order to accomplish this goal DCHA has executed a Memorandum of Understanding with county agencies that represent the “Special Needs”

Consumers which will address the case management to be provided to their clients who are participating in assisted housing programs. The Memorandum of Understanding sets aside 25 vouchers to be used by families who are referred to the “special needs” program.

4 vouchers per year will be set aside for the Path Housing clients. This is in addition to the “special needs” program. Path Housing clients are chronic homeless individuals.

DCHA will identify Voucher eligible applicants and provide preference for issuance of Vouchers to Continuum of Care Program and Supportive Housing Program graduates.

Treatment of Single applicants: All families with children and families who include An elderly person or a person with disability shall be given a selection priority over all other applicants.

DCHA in collaboration with Pennsylvania Housing Finance Agency has executed a letter of agreement to assist persons transitioning from institutions the opportunity to participate in the Housing Choice Voucher Program.

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 DCHA’s fiscal year. ELI families are those with annual

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COC # - PA-502
Continuum of Care

1E-1 Local Competition Deadline


Attached documents include:

- **Local Competition Deadline**

1. 8/16/22, **website screenshot**, Notice of New Project RFP's for 2022 NOFO competition with deadline details within
2. 8/16/22, **e-mail announcement**, Notice of New Project RFP's for 2022 NOFO competition with deadline details within.
3. 8/22/22, **website screenshot** (screen shot captured late), Notice of Renewal Project RFP's for 2022 NOFO competition with deadline details within
4. 8/16/22, **e-mail announcement**, Notice of Renewal Project RFP's for 2022 NOFO competition with deadline details within

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Notice of New Project RFP's for 2022 CoC NOFO Competition

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Subject: Delaware County CoC RFP to solicit new projects as part of the FY22 CoC Competition

The Delaware County Continuum of Care is releasing three Requests for Proposals (RFPs) to solicit new projects as part of the FY22 CoC Competition:

- (1) New Permanent Housing Project RFP
- (2) Domestic Violence Rapid Re-Housing (RRH) or Joint Component Transitional Housing Rapid Rehousing (TH-RRH) Project RFP

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80°F 1:35 PM 8/16/2022

Posting date on screen shot dated 8/16/22

Feldman, Robert S.

Subject:

FW: Notice of New Project RFP's for 2022 CoC NOFO Competition

Attachments:

Delco New Project RFP Email Text 08_16 2022 final.pdf

From: Fink, Jessica L <FinkJ@delcohsa.org>

Sent: Tuesday, August 16, 2022 9:33 AM

To: A McGregor <amcgregor@dapdc.org>; Abigail Hoffsommer <ahoffsommer@carelinkservices.org>; Akesha Gainer <Akesha.Gainer@ckcommunityfoundation.org>; Akua Ajarko <akuaa@voiceandvisioninc.org>; Amber Caldwell <ACaldwell@carelinkservices.org>; Andrea Haugh <Andrea.Haugh@crozer.org>; Angel Barrios <angel.barrios@use.salvationarmy.org>; Anissa Kennedy <aek197243@gmail.com>; Anna Bonilla <annabonillacps@gmail.com>; ANSELIM NJOKA <ANSELIM.NJOKA@hhinc.org>; Antionette Holmes <aholmes@caadc.org>; April McNeal <amcneal@maternitycarecoalition.org>; Aretha Allen <aallen@state.pa.us>; Ashlynn Wittmann <awittmann@delcofoundation.org>; Aubrey <ASmyser@dapdc.org>; Austin, Emmanuel <emmanuel.austin@uhsinc.com>; Autumn Walsh <autumn_walsh@elwyn.org>; Downs, Beth <DownsB@delcohsa.org>; LAURA BLACKBURN <lblackburn@dcha1.org>; Blake <raysongrrl@yahoo.com>; brigid Risko <brisko@mothershome.org>; Brown, Faith D. <BrownF@delcohsa.org>; Bruce Egan <bruce.egan@crozer.org>; Buie, Serrita M. <BuieS@delcohsa.org>; Camille Crane <cacrane@CHS-ADPHILA.ORG>; Candice L <clinehan@delcowar.org>; Carmen Williams <cwilliams@caadc.org>; CATHLEEN MURPHY <CATHLEEN.MURPHY@hhinc.org>; Ceire Evans <ceire.evans@rtsd.org>; Chaplain Rev Leonard Carroll <RevLRCarroll@yahoo.com>; Charles Pringle <Charles.Pringle@hhinc.org>; Chavon R. Hodges <Chavon_Hodges@elwyn.org>; Christina Burton <cburton@dapdc.org>; Christine <rosenzweigchristieo@gmail.com>; Christine Lenhardt <clenhardt@mckee-group.net>; Christine Hofmann <christine.hofmann@rtsd.org>; Christopher Bernard <cbernard@valleyyouthhouse.org>; Christopher Breitfeller <christopher.breitfeller@va.gov>; Christopher Pugliese <cpugliese@upperdarysdc.org>; Cindi Clark <cclark@caadc.org>; Hill, Clara <hillc@delcohsa.org>; Crystal Harrison <educator4lyfe@yahoo.com>; Daniel Nesbitt <dnesbitt@caadc.org>; Danielle Caldwell <danielle.caldwell@hhinc.org>; Danita Miller <dmiller@caadc.org>; Darlene Williams <darlene.williams@redcross.org>; Lucas, Dawn <LucasD@delcohsa.org>; Dean Trajkov <dtrajkov@fcsdc.org>; Debbie Hennie <deborah.hennie@hhinc.org>; Debbie T <dtempleton@scs-delco.org>; Delco Promise <fpdelcodirector@gmail.com>; Demar Briggs <demar.briggs@hhinc.org>; Denice Wilson <dwilson@caadc.org>; dinah boykin <dboykin@caadc.org>; Donna Bobo Carter <bobo-carterd@elwyn.org>; ekemske <ekemske@caadc.org>; Eileen Somers <esomers@helpmlp.org>; Elizabeth A. Schneider <eschneider@seniorlawcenter.org>; Elizabeth Calcagni <Elizabeth.Calcagni@hhinc.org>; Eric Androschick <eandroschick@caadc.org>; Erica Reiter <EReiter@actionwellness.org>; Erica Stubbles <Erica.Stubbles@use.salvationarmy.org>; Erin P <epilot@valleyyouthhouse.org>; Fagan, Danielle N. <FaganD@delcohsa.org>; Feldman, Robert S. <FeldmanR@delcohsa.org>; Fournier, Kristi R. <FournierK@delcohsa.org>; Redden-Revell, Aleasha <redden-revella@delcohsa.org>; Gail McCoach <Gtmcc3@aol.com>; Gale Schwarz <gale@housingalliancepa.org>; Gerry Gonzalez <ggonzalez@cgrc.org>; Gloria Caine <gloria.caine@hhinc.org>; gwomack@caadc.org; HARRIET ALLEN <Harriet.Allen@hhinc.org>; Ileana Berrios (IBerrios@MaternityCareCoalition.org) <IBerrios@MaternityCareCoalition.org>; Imani Hall <halli@co.delaware.pa.us>; james wearing <james.wearing@hhinc.org>; Jamie Battista <jamie.battista@crozer.org>; Jennifer Hertler <jhertler@nhsonline.org>; Jessica Stringer <jstringer@dapdc.org>; Jessica Tropea <jessica.tropea@hhinc.org>; joann Ruark <jar@ceda.cc>; Joaquin Calvo <Joaquin.Calvo@USE.SALVATIONARMY.ORG>; John Johnson <cicinc@gmail.com>; Jordan Casey <JCasey@delcofoundation.org>; Joe Simpkins <Joseph.Simpkins@crozer.org>; Joy Medori <joyrose.rebuild@gmail.com>; Joyce Rasin <jrasin@widener.edu>; Joycelynn Denson <Joycelynn.Denson@use.salvationarmy.org>; Julie Avalos <javalos@dapdc.org>; Kahley McKenney <kmckenney@caadc.org>; Karen <Jesusloveskaren7@gmail.com>; Karen I <kareni@voiceandvisioninc.org>; Karen Kispert <khkispert@delcowar.org>; Kate Korte <km_korte@knights.neumann.edu>; Kathleen Bevenour <kbevenour@CHS-ADPHILA.ORG>; Kathleen Calvo <Kathleen.Calvo@USE.SalvationArmy.Org>; kkenyon@delcofoundation.org; katieg <katieg@voiceandvisioninc.org>; Kelli Noyes <knoyes@mhphope.org>; Kelly

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Cc: Smith, Janet E. <SmithJE@delcohsa.org>; Jessica Sones <jessica@dma-housing.com>

Subject: Notice of New Project RFP's for 2022 CoC NOFO Competition

Good morning

We have two new funding opportunities to consider this competition.

Please see attached instructions.

Subject: Delaware County CoC RFP to solicit new projects as part of the FY22 CoC Competition

The Delaware County Continuum of Care is releasing three Requests for Proposals (RFPs) to solicit new projects as part of the FY22 CoC Competition:

(1) New Permanent Housing Project RFP

(2) Domestic Violence Rapid Re-Housing (RRH) or Joint Component Transitional Housing Rapid Rehousing (TH-RRH) Project RFP

The Delaware County CoC is soliciting Preliminary Applications from agencies interested in applying for new projects as part of the FY22 CoC Competition.

- [New Permanent Housing Project RFP](#). This includes:
 - Permanent Supportive Housing projects, either chronic-dedicated or Dedicated PLUS
 - Rapid Re-Housing projects
 - Joint Transitional Housing – Rapid Re-Housing Component
 - Expansion of existing projects
 - Transition Grants
- Domestic Violence Bonus Rapid Rehousing or Joint Component Transitional Housing Rapid Rehousing (TH-RRH) Project RFP

The projects selected through these RFP's will be submitted to HUD as part of the Delaware County CoC's FY2022 Continuum of Care Application. Organizations may apply to any of the RFP's.

To apply, a **Preliminary Application and a Proposed Budget must be submitted via Alchemer (online survey system) by Noon (12pm) on Tuesday, August 30th**. Application materials and Alchemer links can be found below. The materials will also be posted on the Homeless Services Coalition (HSC) website: (<https://delcohomelesssservices.org/>).

- **New Permanent Housing Project Preliminary Application Alchemer Link:**
<https://survey.alchemer.com/s3/6983332/FY2022-Delco-New-Permanent-Housing-App>
 - [Budget Template for New Permanent Housing Project](#) (completed template will be uploaded in Alchemer)
 - [A copy of the New Permanent Housing Project Preliminary Application](#), provided reference.
- **Domestic Violence Rapid Rehousing or Joint Component Transitional Housing Rapid Rehousing (TH-RRH) Project Preliminary Application Alchemer Link:**
<https://survey.alchemer.com/s3/6983361/Delco-FY2022-DV-Bonus-App-RRH-THRRH>
 - [Budget Template for Domestic Violence Rapid Rehousing or Joint Component Transitional Housing Rapid Rehousing \(TH-RRH\) Project](#) (completed template will be uploaded in Alchemer)
 - [A copy of the Domestic Violence Rapid Rehousing or Joint Component Transitional Housing Rapid Rehousing \(TH-RRH\) Project Preliminary Application](#), provided for reference.

Please help the CoC reach stakeholders in your community by forwarding this email to organizations that may be interested in applying for funding through the Delaware County CoC. Thank you!

Take care.

Jessica Fink

Adult and Family Services Administrator

Delaware County Department of Human Services

Adult and Family Services

20 South 69th Street, 3rd Floor

Upper Darby, PA 19082

Office: (610) 713-2365 | Cell: (484) 683-5007

Fax: (610) 713-2378

E-mail: finkj@delcohsa.org



"It is not our differences that divide us. It is our inability to recognize, accept and celebrate those differences." Audre Lorde

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2022 Renewal Project Instructions for CoC grantees

Download PDF ▸

Dear Delaware County Continuum of Care funded Grantees-

Please read this important message about submission of Renewal Project Applications for the FY2022 CoC NOFO Competition.

As part of the Delaware County CoC's Consolidated Application for the 2022 CoC Competition, on behalf of the CoC, DMA (CoC Consultant) will review all renewal project applications prior to the submission of these applications into the e-snaps system by grantees. ***E-snaps is now open, so grantees can access their renewal applications.*** Instructions for submitting this information are provided below.

- **By August 30th at 5pm:** All agencies with renewal project applications are being asked

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Screenshot dated 8/22/22, was posted on 8/16/22 but screenshot not captured.

Feldman, Robert S.

From: DelCo Continuum of Care <pa502coc@gmail.com>
Sent: Tuesday, August 16, 2022 3:33 PM
To: sgrasty; Daniel Nesbitt; Julie Avalos; cacrane@chs-adphila.org; kbevenour@chs-adphila.org; DCHA RESUMES; Ron Powers; CATHLEEN MURPHY; JOHN REICHERT; vsantiful@mhphope.org; ypate@mhphope.org; Joaquin Calvo; Kathleen Calvo; farea graybill
Cc: Fink, Jessica L; Feldman, Robert S.; Loughin, Linda L.; Thomas, Chae
Subject: IMPORTANT Renewal Project Instructions for CoC grantees
Attachments: 2022 CoC NOFO Webinar_Delaware County CoC_8_16_22.pdf; FY22CoCNOFO_ProjectApp and Esnaps_Tips & Troubleshooting.pdf

Dear Delaware County Continuum of Care funded Grantees-

Please read this important message about submission of Renewal Project Applications for the FY2022 CoC NOFO Competition.

As part of the Delaware County CoC's Consolidated Application for the 2022 CoC Competition, on behalf of the CoC, DMA (CoC Consultant) will review all renewal project applications prior to the submission of these applications into the e-snaps system by grantees. ***E-snaps is now open, so grantees can access their renewal applications.*** Instructions for submitting this information are provided below.

- **By August 30th at 5pm:** All agencies with renewal project applications are being asked to provide a PDF of your completed Renewal Project Application(s) exported from e-snaps.
- The PDF of your Renewal Project Application should be submitted via email to pa502coc@gmail.com.
- **Please DO NOT SUBMIT your Renewal Project Application(s) in e-snaps.** If you accidentally submit the application, please contact us at pa502coc@gmail.com and we will release the application back to you.
 - The PDF file name should be: 2022 Renewal App – Agency Name – Project Name
 - Prior to submitting your application, check the Submission Summary to make sure ALL sections have been completed.
- **By September 9th:** You will receive a project review form with required corrections.
- **By September 15th or within 5 working days of receipt of your review:** You must make corrections and submit your final application(s) in e-snaps.

DOCUMENTS ATTACHED TO THIS EMAIL - The following documents are attached to this email to assist with completing the above steps:

- **Slides providing a brief overview of the 2022 CoC NOFO**
- **CoC Project Applications & e-snaps: 2022 Tips and Troubleshooting Guide** - We are releasing this guide because e-snaps is open and we are all short on time. If we notice any changes once HUD's detailed instructions are out, we will send an updated version.
- **NOTE:** HUD has not yet provided the Actual Rents report. If we receive that information from HUD, we will forward it to any grantee who uses actual rent, to assist in entering the updated rent amounts in e-snaps.

CONSOLIDATION - If you are considering consolidating projects:

- Please let us know.
- Please follow the instructions above to submit the individual applications in e-snaps for each renewal project that you would like to consolidate. Be sure to make no substantive changes to the budget or units, beds or households served.

If you have questions regarding completing your renewal project application(s), please first review the attached document "CoC Project Applications & e-snaps: 2022 Tips and Troubleshooting Guide" and the HUD instructions/guides referenced within the document.

After reviewing these resources, if you are still unable to resolve your issue, send DMA an email at pa502coc@gmail.com. We will work to assist you as quickly as possible.

Thank you for your continued participation in the CoC application process and the work you and your agencies do to end homelessness every day!

Delco CoC Team & DMA Staff (CoC Consultant)

--

DMA - Diana T. Myers & Associates, Inc.

CoC NOFO Consultants for the Delaware County CoC (PA-502)

(215) 576-1558

pa502coc@gmail.com

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FY 2022
COC # - PA-502
Continuum of Care

1E-2 Local Competition Scoring Tool

Attached documents include:

Local Competition Scoring Tools

- Pages 2 – 3: Permanent Housing (PH) scorecard
- Pages 4 – 5: Transitional (TH) - Rapid Rehousing (RRH) scorecard
- Pages 6 – 7: Supportive Services Only (SSO) – Coordinated Entry (CE)
- Pages 8 – 9: Delaware County CoC: 2022 DV Bonus (RRH or TH-RRH) Project Scoring Sheet
- Pages 10 – 11: Delaware County CoC: 2022 Permanent Housing (PH) Project Scoring Sheet
- Page 12: PA-502 - COC Project Sheet with point total per question, per project

2022 Renewal Project Performance Scorecard

PA-502 : Upper Darby/Chester/Haverford

PH Scorecard

DATA SOURCE: All CoC projects please use the date range of: 4/01/21 to 3/31/22, unless indicate otherwise.

Agency Name:		Program Name:	
Grant number (from last submitted APR):			
Grant dollar amount (from last submitted APR):			
Grant expenditures (from last submitted APR):			
(A) Local CoC & HUD Priorities (85 points)		Provider Response	Scoring
1	EQUAL ACCESS: Is equal access practiced in accordance with the 2012 and 2016 Equal Access Rule, meaning any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity?	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points
2	BOARD OF DIRECTORS: Does the agency's Board of Directors or local advisory group/committee include a person with lived experience of homelessness, current or former.	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points
3	VAWA: Does the project have a written policy regarding the Violence Against Women Act (VAWA) Rule? (If yes please supply the policy on a separate document).	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points
4	ANTI-DISCRIMINATION: Does the project have in place an: Anti-discrimination policy that prevents discrimination under the Fair Housing Act and an Equal Access policy in regard to LGBTQ+? (If yes please supply the policy on a separate document).	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points
5	EQUITY: Does the program/agency have a plan for examining the impact of racial, ethnic, age and/or gender identity in program services or outcomes? (If yes please describe what the plan is, use a separate document for additional space)	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points
			SUBTOTAL =
			0
(B) Point in Time Count (5 points)		Provider Response	Scoring
6	2022 POINT IN TIME COUNT: Did anyone within the agency participate on the evening/next day Point In Time Count?	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points
			SUBTOTAL =
			0
(C) Project Effectiveness & Grant Management (30 points)		Provider Response	Scoring
7	FUND EXPENDITURES: The percentage of HUD funds expended during last completed HUD/APR? HOW TO CALCULATE: Expenditures (dollars spent) / Total grant dollar amount = % percentage of total allocation spent. Provide evidence of total expenditure.	[Insert response here and/or a separate document]	88% to 100% = 8 points 75% to 87% = 4 points 74% or less = 0 points
8	QUARTERLY DRAWDOWNS or QUARTERLY INVOICING for the last completed APR: (1) Number of quarterly draw downs of HUD funds. OR (2) Number of quarterly invoices submitted to the County. HOW TO CALCULATE: eLOCES statement or invoice dates and amounts. Provide copies of the statements or invoices from last completed APR.	[Insert response here and/or a separate document]	4 or more times per year = 8 points 3 times per year = 4 points 2 times or less per year = 0 points
9	HEALTH INSURANCE: % of persons with health insurance during the date range of 4/01/22 to 3/31/22? HOW TO CALCULATE: Q21	[Insert response here and/or a separate document]	80% to 100% = 8 points 74% to 79% = 4 points 73% or less = 0 points
10	PARTICIPANT ASSISTANCE: Are participants assisted in obtaining benefits of: mainstream health, social and employment programs for which they may be eligible?	[Insert response here and/or a separate document]	Yes = 6 points No = 0 points
			SUBTOTAL =
			0

(D) System Performance Measures (60 points)		Provider Response	Scoring	Score
11	DATA PERFORMANCE PROGRAM IMPROVEMENTS: Provide an example how the program used Performance Data to make improvements to program effectiveness.	[Insert response here and/or a separate document]	1 example = 12 points 0 examples = 6 points	0
12	EXITS/RETENTION TO PH: What percentage of exits were to a permanent housing destination or retention? HOW TO CALCULATE: [23c]	[Insert response here and/or a separate document]	80% to 100% = 12 points 1% to 79% = 6 points	0
13	INCOME: What percentage of adults gained or increased total earned cash income? HOW TO CALCULATE: [19a1/19a2]	[Insert response here and/or a separate document]	20% to 100% = 12 points 10% to 19% = 6 points 0 to 9% = 0 points	0
14	DATA QUALITY: What is the completion rate of data elements required by HUD and the CoC? HOW TO CALCULATE: Q06a, Q06b, Q06c (HUD/APR) Average of "% of Error Rate" data points. 100% minus error rate = completion rate	[Insert response here and/or a separate document]	99% to 100% = 12 points 97% to 98% = 6 points 96% or less = 0 points	0
15	UTILIZATION RATE: Average daily unit utilization rate during time period? HOW TO CALCULATE: average of Q8b/total number of funded units	[Insert response here and/or a separate document]	85% to 100% = 12 points 80% to 84% = 6 points 83% or less = 0 points	0
			SUBTOTAL =	0
(E) Severity of Need Populations (10 points)		Provider Response	Scoring	Score
16	SUBPOPULATIONS: Is the program serving any of these subpopulations? If so, which ones? (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	[Insert response here and/or a separate document]	1 point per example 3 point maximum	0
17	STAFF TRAINING FOR SUBPOPULATIONS: Have agency staff received any types of training relating to each of these subpopulations?: (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS. (If so provide topics taught and date(s) training took place. Use a separate page for additional space).	[Insert response here and/or a separate document]	1 point per example 3 point maximum	0
18	SUBPOPULATION NEEDS: Describe how the agency is addressing the needs of each of these subpopulations: (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	[Insert response here and/or a separate document]	1 point per example 2 point maximum	0
19	CHRONICALLY HOMELESS: What percentage of households served by the project were chronically homeless? HOW TO CALCULATE: [Q26a]	[Insert response here and/or a separate document]	75% to 100% = 2 points 50% to 74% = 1 points 0% to 49% = 0 points	0
			SUBTOTAL =	0
(F) Homeless Management Information System (10 points)		Provider Response	Scoring	Score
20	HMIS PARTICIPATION: (non-DV providers) Does the project actively participate in the usage of the CoC HMIS? (DV providers) Providers will provide APR data from a comparable database	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points	0
21	HMIS USER GROUP MEETINGS: (non-DV providers) Does the project have at least one staff person who attends on a regular basis monthly HMIS User Group meetings. (DV providers) Does the project have at least one staff person who receives ongoing training on the use of a comparable HMIS database?	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points	0
			SUBTOTAL =	0
(G) Bonus Questions (8 points)		Provider Response	Scoring	Score
22	CoC/HSC PARTICIPATION: Did the project have at least one representative attend each of the quarterly HSC meetings?	[Insert response here and/or a separate document]	4 meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	0
23	CoC GOVERNING BOARD (GB) MEETINGS: Did the project have at least one representative attend each of the quarterly CoC Governing Board meetings?	[Insert response here and/or a separate document]	4 or more meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	0
			SUBTOTAL =	0

(A) Local CoC & HUD Priorities	85 maximum points	0
(B) Point-in-Time Count	5 maximum points	0
(C) Project Effectiveness & Grant Management	30 maximum points	0
(D) System Performance Measures	60 maximum points	0
(E) Severity of Need Populations	10 maximum points	0
(F) HMIS	10 maximum points	0
	SUBTOTAL POINTS (200 max)	0
	% of 200 max points earned	0%
(G) Bonus Questions	(8 max) BONUS POINTS	0
	GRAND TOTAL w/bonus points	0
	FINAL % w/bonus points	0%

2022 Renewal Project Performance Scorecard

PA-502 : Upper Darby/Chester/Haverford

TH-RRH Scorecard			
DATA SOURCE: All CoC projects please use the date range of: 4/01/21 to 3/31/22, unless indicate otherwise.			
Agency Name:		Program Name:	
Grant number (from last submitted APR):			
Grant dollar amount (from last submitted APR):			
Grant expenditures (from last submitted APR):			
(A) Local CoC & HUD Priorities (85 points)		Provider Response	Scoring
1	EQUAL ACCESS: Is equal access practiced in accordance with the 2012 and 2016 Equal Access Rule, meaning any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity?	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points 0
2	BOARD OF DIRECTORS: Does the agency's Board of Directors or local advisory group/committee include a person with lived experience of homelessness, current or former.	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points 0
3	VAWA: Does the project have a written policy regarding the Violence Against Women Act (VAWA) Rule? (If yes please supply the policy on a separate document).	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points 0
4	ANTI-DISCRIMINATION: Does the project have in place an: Anti-discrimination policy that prevents discrimination under the Fair Housing Act and an Equal Access policy in regard to LGBTQ+? (If yes please supply the policy on a separate document).	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points 0
5	EQUITY: Does the program/agency have a plan for examining the impact of racial, ethnic, age and/or gender identity in program services or outcomes? (If yes please describe what the plan is, use a separate document for additional space)	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points 0
			SUBTOTAL = 0
(B) Point in Time Count (5 points)		Provider Response	Scoring
6	2022 POINT IN TIME COUNT: Did anyone within the agency participate on the evening/next day Point In Time Count?	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points 0
			SUBTOTAL = 0
(C) Project Effectiveness & Grant Management (30 points)		Provider Response	Scoring
7	FUND EXPENDITURES: The percentage of HUD funds expended during last completed HUD/APR? HOW TO CALCULATE: Expenditures (dollars spent) / Total grant dollar amount = % percentage of total allocation spent. Provide evidence of total expenditure.	[Insert response here and/or a separate document]	88% to 100% = 8 points 75% to 87% = 4 points 74% or less = 0 points 0
8	QUARTERLY DRAWDOWNS or QUARTERLY INVOICING for the last completed APR: (1) Number of quarterly draw downs of HUD funds. OR (2) Number of quarterly invoices submitted to the County. HOW TO CALCULATE: eLOCES statement or invoice dates and amounts. Provide copies of the statements or invoices from last completed APR.	[Insert response here and/or a separate document]	4 or more times per year = 8 points 3 times per year = 4 points 2 times or less per year = 0 points 0
9	HEALTH INSURANCE: % of persons with health insurance during the date range of 4/01/22 to 3/31/22? HOW TO CALCULATE: Q21	[Insert response here and/or a separate document]	80% to 100% = 8 points 74% to 79% = 4 points 73% or less = 0 points 0
10	PARTICIPANT ASSISTANCE: Are participants assisted in obtaining benefits of: mainstream health, social and employment programs for which they may be eligible?	[Insert response here and/or a separate document]	Yes = 6 points No = 0 points 0
			SUBTOTAL = 0

(D) System Performance Measures (60 points)		Provider Response	Scoring	Score
11	DATA PERFORMANCE PROGRAM IMPROVEMENTS: Provide an example how the program used Performance Data to make improvements to program effectiveness.	[Insert response here and/or a separate document]	1 example = 12 points 0 examples = 0 points	0
12	EXITS/RETENTION TO PH: What percentage of exits were to a permanent housing destination or retention? HOW TO CALCULATE: [23c]	[Insert response here and/or a separate document]	80% to 100% = 12 points 1% to 79% = 6 points	0
13	EXITS TO PH: What percentage of exits were to a known destination? HOW TO CALCULATE: [23a/23b]	[Insert response here and/or a separate document]	80% to 100% = 12 points 70% to 79% = 6 points 0 to 69% = 0 points	0
14	DATA QUALITY: What is the completion rate of data elements required by HUD and the CoC? HOW TO CALCULATE: Q06a, Q06b, Q06c (HUD/APR) Average of "% of Error Rate" data points. 100% minus error rate = completion rate	[Insert response here and/or a separate document]	99% to 100% = 12 points 97% to 98% = 6 points 96% or less = 0 points	0
15	UTILIZATION RATE: Average daily unit utilization rate during time period? HOW TO CALCULATE: average of Q8b/total number of funded units.	[Insert response here and/or a separate document]	85% to 100% = 12 points 80% to 84% = 6 points 83% or less = 0 points	0
				0
(E) Severity of Need Populations (10 points)		Provider Response	Scoring	Score
16	SUBPOPULATIONS: Is the program serving any of these subpopulations? If so, which ones? (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	[Insert response here and/or a separate document]	1 point per example 3 point maximum	0
17	STAFF TRAINING FOR SUBPOPULATIONS: Have agency staff received any types of training relating to each of these subpopulations?: (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS. (If so provide topics taught and date(s) training took place. Use a separate page for additional space).	[Insert response here and/or a separate document]	1 point per example 3 point maximum	0
18	SUBPOPULATION NEEDS: Describe how the agency is addressing the needs of each of these subpopulations: (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	[Insert response here and/or a separate document]	1 point per example 2 point maximum	0
19	CHRONICALLY HOMELESS: What percentage of households served by the project were chronically homeless? HOW TO CALCULATE: [Q26a]/Q26b]	[Insert response here and/or a separate document]	75% to 100% = 2 points 50% to 74% = 1 points 0% to 49% = 0 points	0
				0
(F) Homeless Management Information System (10 points)		Provider Response	Scoring	Score
20	HMIS PARTICIPATION: (non-DV providers) Does the project actively participate in the usage of the CoC HMIS? (DV providers) Providers will provide APR data from a comparable database	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points	0
21	HMIS USER GROUP MEETINGS: (non-DV providers) Does the project have at least one staff person who attends on a regular basis monthly HMIS User Group meetings. (DV providers) Does the project have at least one staff person who receives ongoing training on the use of a comparable HMIS database?	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points	0
			SUBTOTAL =	0
(G) Bonus Questions (8 points)		Provider Response	Scoring	Score
22	CoC/HSC PARTICIPATION: Did the project have at least one representative attend each of the quarterly HSC meetings?	[Insert response here and/or a separate document]	4 meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	0
23	CoC GOVERNING BOARD (GB) MEETINGS: Did the project have at least one representative attend each of the quarterly CoC Governing Board meetings?	[Insert response here and/or a separate document]	4 or more meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	0
			SUBTOTAL =	0

(A) Local CoC & HUD Priorities	85 maximum points	0
(B) Point-in-Time Count	5 maximum points	0
(C) Project Effectiveness & Grant Management	30 maximum points	0
(D) System Performance Measures	60 maximum points	0
(E) Severity of Need Populations	10 maximum points	0
(F) HMIS	10 maximum points	0
	SUBTOTAL POINTS (200 max)	0
	% of 200 max points earned	0%
(G) Bonus Questions	(8 max) BONUS POINTS	0
	GRAND TOTAL w/bonus points	0
	FINAL % w/bonus points	0%

2022 Renewal Project Performance Scorecard

PA-502 : Upper Darby/Chester/Haverford

SSO-CE Scorecard

DATA SOURCE: All CoC projects please use the date range of: 4/01/21 to 3/31/22, unless indicate otherwise.

Agency Name:		Program Name:	
Grant number (from last submitted APR):			
Grant dollar amount (from last submitted APR):			
Grant expenditures (from last submitted APR):			
(A) Local CoC & HUD Priorities (85 points)		Provider Response	Scoring
1	EQUAL ACCESS: Is equal access practiced in accordance with the 2012 and 2016 Equal Access Rule, meaning any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity?	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points <div style="text-align: right; font-weight: bold;">0</div>
2	BOARD OF DIRECTORS: Does the agency's Board of Directors or local advisory group/committee include a person with lived experience of homelessness, current or former.	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points <div style="text-align: right; font-weight: bold;">0</div>
3	VAWA: Does the project have a written policy regarding the Violence Against Women Act (VAWA) Rule? (If yes please supply the policy on a separate document).	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points <div style="text-align: right; font-weight: bold;">0</div>
4	ANTI-DISCRIMINATION: Does the project have in place an: Anti-discrimination policy that prevents discrimination under the Fair Housing Act and an Equal Access policy in regard to LGBTQ+? (If yes please supply the policy on a separate document).	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points <div style="text-align: right; font-weight: bold;">0</div>
5	EQUITY: Does the program/agency have a plan for examining the impact of racial, ethnic, age and/or gender identity in program services or outcomes? (If yes please describe what the plan is, use a separate document for additional space)	[Insert response here and/or a separate document]	Yes = 17 points No = 0 points <div style="text-align: right; font-weight: bold;">0</div>
			SUBTOTAL = 0
(B) Point in Time Count (5 points)		Provider Response	Scoring
6	2022 POINT IN TIME COUNT: Did anyone within the agency participate on the evening/next day Point In Time Count?	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points <div style="text-align: right; font-weight: bold;">0</div>
			SUBTOTAL = 0
(C) Project Effectiveness & Grant Management (30 points)		Provider Response	Scoring
7	FUND EXPENDITURES: The percentage of HUD funds expended during last completed HUD/APR? HOW TO CALCULATE: Expenditures (dollars spent) / Total grant dollar amount = % percentage of total allocation spent. Provide evidence of total expenditure.	[Insert response here and/or a separate document]	88% to 100% = 15 points 75% to 87% = 7 points 74% or less = 0 points <div style="text-align: right; font-weight: bold;">0</div>
8	QUARTERLY DRAWDOWNS or QUARTERLY INVOICING for the last completed APR: (1) Number of quarterly draw downs of HUD funds. OR (2) Number of quarterly invoices submitted to the County. HOW TO CALCULATE: eLOCCS statement or invoice dates and amounts. Provide copies of the statements or invoices from last completed APR.	[Insert response here and/or a separate document]	4 or more times per year = 15 points 3 times per year = 7 points 2 times or less per year = 0 points <div style="text-align: right; font-weight: bold;">0</div>
			SUBTOTAL = 0
(D) System Performance Measures (20 points)		Provider Response	Scoring
9	DATA PERFORMANCE PROGRAM IMPROVEMENTS: Provide an example how the program used Performance Data to make improvements to program effectiveness.	[Insert response here and/or a separate document]	1 example = 20 points 0 examples = 0 points <div style="text-align: right; font-weight: bold;">0</div>
			SUBTOTAL = 0

(E) Severity of Need Populations (10 points)		Provider Response	Scoring	Score
10	SUBPOPULATIONS: Is the program serving any of these subpopulations? If so, which ones? (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	[Insert response here and/or a separate document]	1 point per example 4 point maximum	0
11	STAFF TRAINING FOR SUBPOPULATIONS: Have agency staff received any types of training relating to each of these subpopulations?: (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS. (If so provide topics taught and date(s) training took place. Use a separate page for additional space).	[Insert response here and/or a separate document]	1 point per example 4 point maximum	0
12	SUBPOPULATION NEEDS: Describe how the agency is addressing the needs of each of these subpopulations: (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	[Insert response here and/or a separate document]	1 point per example 2 point maximum	0
			SUBTOTAL =	0
(F) Homeless Management Information System (10 points)		Provider Response	Scoring	Score
13	HMIS PARTICIPATION: (non-DV providers) Does the project actively participate in the usage of the CoC HMIS? (DV providers) Providers will provide APR data from a comparable database	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points	0
14	HMIS USER GROUP MEETINGS: (non-DV providers) Does the project have at least one staff person who attends on a regular basis monthly HMIS User Group meetings. (DV providers) Does the project have at least one staff person who receives ongoing training on the use of a comparable HMIS database?	[Insert response here and/or a separate document]	Yes = 5 points No = 0 points	0
			SUBTOTAL =	0
(G) Bonus Questions (8 points)		Provider Response	Scoring	Score
15	CoC/HSC PARTICIPATION: Did the project have at least one representative attend each of the quarterly HSC meetings?	[Insert response here and/or a separate document]	4 meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	0
16	CoC GOVERNING BOARD (GB) MEETINGS: Did the project have at least one representative attend each of the quarterly CoC Governing Board meetings?	[Insert response here and/or a separate document]	4 or more meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	0
			SUBTOTAL =	0

(A) Local CoC & HUD Priorities	85 maximum points	0
(B) Point-in-Time Count	5 maximum points	0
(C) Project Effectiveness & Grant Management	30 maximum points	0
(D) System Performance Measures	20 maximum points	0
(E) Severity of Need Populations	10 maximum points	0
(F) HMIS	10 maximum points	0
	SUBTOTAL POINTS (160 max)	0
	% of 160 max points earned	0%
(G) Bonus Questions	(8 max) BONUS POINTS	0
GRAND TOTAL w/bonus points		0
FINAL % w/bonus points		0%

Delaware County CoC: 2022 DV Bonus (RRH or TH-RRH) Project Scoring Sheet

Reviewer Name: _____

Agency Name: _____

Project Type: ☐ TH/RRH ☐ RRH

Total Budget Request: _____

-
- **Experience providing housing to individuals and families fleeing domestic violence = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience_____

 - **Clear and compelling description of how project will meet community need = 2 points**
 - 0 points if need not described
 - 1 point if narrative but no data, or data does not support the need for this project
 - 2 points if applicant describes need and provides supporting data_____

 - **Relationships with landlords (per project description) = 2 points**
 - 0 points if organization does not have relationship with landlords or viable plan to provide scattered site housing
 - 1 point if organization has some landlord connections, but connections are minimal
 - 2 points if organization has the needed relationships with landlords (directly or through partnerships) in order to quickly connect households to housing opportunities_____

 - **Capacity to administer the program, including ensure eligibility and documentation requirements, administering rental assistance, tracking documentation, data entry, and providing tenancy supports = 2 points**
 - 0 points if capacity is limited
 - 1 point if some capacity, but there appear to be gaps in capacity
 - 2 points if reviewer believes the applicant has needed experience and capacity_____

 - **Experience supporting households with moving to safe affordable housing and connecting survivors to supportive services = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience_____

 - **Experience with ensuring the safety of DV survivors experiencing homelessness = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if applicant demonstrates strong experience_____

- **Experience utilizing trauma-informed, victim-centered approaches to meet the needs of DV survivors = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if applicant demonstrates strong experience

- **Experience assisting DV survivors to meet service needs= 2 points**
 - 0 points if no experience described
 - 1 point if limited experience described
 - 2 points if applicant demonstrates strong experience

- **Project design and delivery of services are designed to promote equity = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if clearly described and provides strong description of how design will promote equity

- **Experience serving and improving outcomes for communities that have historically been marginalized = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience

- **Experience managing federal and state grants = 2 points**
 - 0 points if no experience described
 - 1 point if limited experience described
 - 2 points if reviewer believes that applicant has sufficient experience managing grants to support success with CoC requirements

Total points available = 22

Total points awarded = _____

Do you recommend this project? ☐ yes ☐ no

Do you recommend any changes to the project design/scale/etc.?

Funding Committee Comments:

Delaware County CoC: 2022 Permanent Housing Project Scoring Sheet

Reviewer Name: _____

Agency Name: _____

Project Type: ☐ TH/RRH ☐ RRH ☐ PSH

Total Budget Request: _____ Specific subpopulation? If so, what? _____

Expansion Requests Only:

- Current Budget: _____
- Requested Budget: _____
- Expansion Request for: ☐ Additional units ☐ Supportive Services ☐ Other

Transition Requests Only:

- Current Project Type: _____
- New Project Type Requested: _____

-
- **Clear and compelling description of how project will meet community need = 2 points**
 - 0 points if need not described
 - 1 point if narrative but no data, or data does not support the need for this project
 - 2 points if applicant describes need and provides supporting data_____
 - **Experience serving households experiencing homelessness = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience_____
 - **Experience supporting households with accessing permanent housing = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience_____
 - **Experience supporting households with employment outcomes/increasing income = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience_____
 - **Experience supporting households with accessing mainstream benefits = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience_____
 - **Experience with Housing First = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if applicant describes a clear understanding of Housing First model, and experience implementing the model_____

- **Experience managing federal and state grants = 2 points**
 - 0 points if no experience described
 - 1 point if limited experience described
 - 2 points if reviewer believes that applicant has sufficient experience managing grants to support success with CoC requirements _____

- **Relationship with landlords (if scattered site) = 2 points**
 - 0 points if organization does not have relationships or viable plan to provide scattered site housing
 - 2 points if organization has the needed relationships with landlords (directly or through partnerships with community partner) in order to quickly connect households to housing opportunities
 - Site-based projects: adequate resources allocated (CoC-funded and beyond) to ensure safe, well maintained housing is provided by the organization = 2 points _____

- **Project design and delivery of services are designed to promote equity = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if clearly described and provides strong description of how design will promote equity _____

- **Experience serving and improving outcomes for communities that have historically been marginalized = 2 points**
 - 0 points if not described
 - 1 point if somewhat described
 - 2 points if reviewer believes the applicant has needed experience _____

- **Non-COC Resources to cover housing costs = 5 points**
 - 5 bonus points if PSH or RRH project will housing subsidies or subsidized housing units for at least 25% of units/participants in the project _____

- **Non-COC Resources to cover healthcare costs = 5 points**
 - 5 bonus points if project will leverage 25% or more of the project's healthcare/service needs through community partnerships _____

Total points available = 30

Total points awarded = _____

Do you recommend this project? ☐ yes ☐ no

Do you recommend any changes to the project design/scale/etc.?

Comments:

PA-502 NOFO FINAL SCORES: 1) points per question; 2) total points earned; 3) total available points

[illegible]

FY 2022
COC # - PA-502
Continuum of Care

1E-2a. Scored Forms for One Project

Attached documents include:

- **Scored Forms for One Project**

SCORED - SCORED - 2022 Renewal Project Performance Scorecard - SCORED - SCORED				
PA-502 : Upper Darby/Chester/Haverford				
PH Scorecard				
DATA SOURCE: All CoC projects please use the date range of: 4/01/21 to 3/31/22, unless indicate otherwise.				
Agency Name: Family and Community Service of Delaware County		Program Name: FCS PSH CHT2		
Grant number (from last submitted APR): PA0684L3T021906		FCSDC is subrecipient - Grantee is Delaware County		
Grant dollar amount (from last submitted APR): \$225,308				
Grant expenditures (from last submitted APR): \$179,921				
(A) Local CoC & HUD Priorities (85 points)		P+F39+C9:D13+C9:D16+F+C9:D36	Scoring	Score
1	EQUAL ACCESS: Is equal access practiced in accordance with the 2012 and 2016 Equal Access Rule, meaning any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity?	The program does not discriminate for any reason including, but not limited to sexual orientation, marital status, or gender identity.	Yes = 17 points No = 0 points	17
2	BOARD OF DIRECTORS: Does the agency's Board of Directors or local advisory group/committee include a person with lived experience of homelessness, current or former.	FCSDC's Board of Directors does not include a person with lived experience of homelessness.	Yes = 17 points No = 0 points	0
3	VAWA: Does the project have a written policy regarding the Violence Against Women Act (VAWA) Rule? (If yes please supply the policy on a separate document).	FCSDC has a written VAWA policy, a copy of which is included in each client chart.	Yes = 17 points No = 0 points AFS Note: per the statement in the question, (If yes please supply the policy on a separate document). Please provide to revise the score.	17
4	ANTI-DISCRIMINATION: Does the project have in place an: Anti-discrimination policy that prevents discrimination under the Fair Housing Act and an Equal Access policy in regard to LGBTQ+? (If yes please supply the policy on a separate document).	FCSDC has an Anti-Discrimination policy in our agency Personnel Manual as well as in the Program Guidelines/Client Handbook. LGBTQ are included in the policies as a protected class.	Yes = 17 points No = 0 points AFS Note: per the statement in the question, (If yes please supply the policy on a separate document). Please provide to revise the score.	17
5	EQUITY: Does the program/agency have a plan for examining the impact of racial, ethnic, age and/or gender identity in program services or outcomes? (If yes please describe what the plan is, use a separate document for additional space)	FCSDC Executive Director participates in an Delco Executive Director working group that meets on a monthly basis. The group, in coordination with Foundation for Delaware County, is exploring DEI issues and strategies.	Yes = 17 points No = 0 points AFS Note: per the statement in the question, (If yes please supply the policy on a separate document). Please provide to revise the score.	0
			SUBTOTAL =	51
(B) Point in Time Count (5 points)		Provider Response	Scoring	Score
6	2022 POINT IN TIME COUNT: Did anyone within the agency participate on the evening/next day Point In Time Count?	FCSDC Director of Housing Programs, Dean Trajkov, participated in the Point in Time Count.	Yes = 5 points No = 0 points	5
			SUBTOTAL =	5
(C) Project Effectiveness & Grant Management (30 points)		Provider Response	Scoring	Score
7	FUND EXPENDITURES: The percentage of HUD funds expended during last completed HUD/APR? HOW TO CALCULATE: Expenditures (dollars spent) / Total grant dollar amount = % percentage of total allocation spent. Provide evidence of total expenditure.	The program expended 80% of HUD funds during the last completed APR cycle. \$179,921 / \$225,308 = 79.86%	88% to 100% = 8 points 75% to 87% = 4 points 74% or less = 0 points AFS Note: per the statement in the question, (Provide evidence of total expenditure) Please provide to revise the score.	4
8	QUARTERLY DRAWDOWNS or QUARTERLY INVOICING for the last completed APR: (1) Number of quarterly draw downs of HUD funds. OR (2) Number of quarterly invoices submitted to the County. HOW TO CALCULATE: eLOCES statement or invoice dates and amounts. Provide copies of the statements or invoices from last completed APR.	FCSDC submits invoicing for program expenses to Delaware County Adult and Family Services on a monthly basis.	4 or more times per year = 8 points 3 times per year = 4 points 2 times or less per year = 0 points AFS Note: per the statement in the question, (Provide copies of the invoices . . .) Please provide to revise the score.	8
9	HEALTH INSURANCE: % of persons with health insurance during the date range of 4/01/22 to 3/31/22? HOW TO CALCULATE: Q21	According to APR data for this time period, 100% of program participants have health insurance.	80% to 100% = 8 points 74% to 79% = 4 points 73% or less = 0 points	8
10	PARTICIPANT ASSISTANCE: Are participants assisted in obtaining benefits of: mainstream health, social and employment programs for which they may be eligible?	Yes, all program participants receive case management services that assist with accessing public benefits, healthcare, and other needed resources.	Yes = 6 points No = 0 points	6
			SUBTOTAL =	26

(D) System Performance Measures (60 points)		Provider Response	Scoring	Score
11	DATA PERFORMANCE PROGRAM IMPROVEMENTS: Provide an example how the program used Performance Data to make improvements to program effectiveness.	FCSDC monitors APR data in HMIS to ensure that aggregate and individual program goals are being met. If performance indicators are lacking, individual follow up is done.	1 example = 12 points 0 examples = 6 points	12
12	EXITS/RETENTION TO PH: What percentage of exits were to a permanent housing destination or retention? HOW TO CALCULATE: [23c]	During this APR cycle, there were 7 discharges/exits; 5 to permanent housing and 2 deceased. The 2 deaths are not included in the calculation therefore 5 (100%) were to permanent housing.	80% to 100% = 12 points 1% to 79% = 6 points	12
13	INCOME: What percentage of adults gained or increased total earned cash income? HOW TO CALCULATE: [19a1/19a2]	According to APR data for this time period, 33% of program participants gained or had an increase in income.	20% to 100% = 12 points 10% to 19% = 6 points 0 to 9% = 0 points	12
14	DATA QUALITY: What is the completion rate of data elements required by HUD and the CoC? HOW TO CALCULATE: Q06a, Q06b, Q06c (HUD/APR) Average of % of Error Rate" data points. 100% minus error rate = completion rate	According to APR data for this time period, the completion rate is 100% (no errors)	99% to 100% = 12 points 97% to 98% = 6 points 96% or less = 0 points	12
15	UTILIZATION RATE: Average daily unit utilization rate during time period? HOW TO CALCULATE: average of Q8b/total number of funded units	According to APR data for this time period, the average daily unit utilization rate was 90%	85% to 100% = 12 points 80% to 84% = 6 points 83% or less = 0 points	12
			SUBTOTAL =	60
(E) Severity of Need Populations (10 points)		Provider Response	Scoring	Score
16	SUBPOPULATIONS: Is the program serving any of these subpopulations? If so, which ones? (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	All participants in the FCS PSH CH2 program have a primary mental health diagnosis (A). In addition, one or more program participants are in the subpopulations B, C, E, F, G, H listed in the column to the left.	1 point per example 3 point maximum	3
17	STAFF TRAINING FOR SUBPOPULATIONS: Have agency staff received any types of training relating to each of these subpopulations? (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS. (If so provide topics taught and date(s) training took place. Use a separate page for additional space).	No specific trainings have been provided to staff on these subpopulations during this reporting period.	1 point per example 3 point maximum	0
18	SUBPOPULATION NEEDS: Describe how the agency is addressing the needs of each of these subpopulations: (A) behavioral health issues; (B) fleeing DV abuse; (C) LGBTQ+; (D) unaccompanied youth; (E) families with children; (F) people with disabilities; (G) history of drug abuse; (H) history of alcohol abuse; (I) criminal history; (J) veterans; (K) HIV/AIDS.	Staff assess each client's needs and refer to appropriate resources while considering (and accommodating when possible) the unique needs of subpopulations. Emphasis is placed on encouraging participation in mental health and/or substance abuse services given that these issues are frequently the primary barriers in maintaining stable housing.	1 point per example 2 point maximum	2
19	CHRONICALLY HOMELESS: What percentage of households served by the project were chronically homeless? HOW TO CALCULATE: [Q26a]	According to APR data for this time period 88% of participants in the FCS PSH CH2 meet the definition of "Chronically Homeless".	75% to 100% = 2 points 50% to 74% = 1 points 0% to 49% = 0 points	2
			SUBTOTAL =	7
(F) Homeless Management Information System (10 points)		Provider Response	Scoring	Score
20	HMIS PARTICIPATION: (non-DV providers) Does the project actively participate in the usage of the CoC HMIS? (DV providers) Providers will provide APR data from a comparable database	All of FCSDC housing programs utilize HMIS.	Yes = 5 points No = 0 points	5
21	HMIS USER GROUP MEETINGS: (non-DV providers) Does the project have at least one staff person who attends on a regular basis monthly HMIS User Group meetings. (DV providers) Does the project have at least one staff person who receives ongoing training on the use of a comparable HMIS database?	FCSDC is represented by Director of Housing Programs, Dean Trajkov, at the monthly HMIS User Group Meetings.	Yes = 5 points No = 0 points	5
			SUBTOTAL =	10
(G) Bonus Questions (8 points)		Provider Response	Scoring	Score
22	CoC/HSC PARTICIPATION: Did the project have at least one representative attend each of the quarterly HSC meetings?	FCSDC is represented by Executive Director, Ron Powers, and/or Director of Housing Programs, Dean Trajkov, at all CoC/HSC meetings.	4 meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	4
23	CoC GOVERNING BOARD (GB) MEETINGS: Did the project have at least one representative attend each of the quarterly CoC Governing Board meetings?	FCSDC Executive Director, Ron Powers, is co-chair of the CoC Governing Board and attends all meetings.	4 or more meetings = 4 points 3 meetings = 3 points 2 meetings = 2 points 1 meeting = 1 point 0 meetings = 0 points	4
			SUBTOTAL =	8

(A) Local CoC & HUD Priorities	85 maximum points	51
(B) Point-in-Time Count	5 maximum points	5
(C) Project Effectiveness & Grant Management	30 maximum points	26
(D) System Performance Measures	60 maximum points	60
(E) Severity of Need Populations	10 maximum points	7
(F) HMIS	10 maximum points	10
	SUBTOTAL POINTS (200 max)	159
	% of 200 max points earned	80%
(G) Bonus Questions	(8 max) BONUS POINTS	8
	GRAND TOTAL w/bonus points	167
	FINAL % w/bonus points	84%

FY 2022
COC # - PA-502
Continuum of Care

**1E-5. Notification of Projects
Rejected / Reduced**

**No projects were rejected or reduced,
therefore no documents are attached.**




FY 2022
COC # - PA-502
Continuum of Care













1E-5a Notification of Projects Accepted


Attached documents include:

- **Notification of Projects Accepted**
 - Website screenshot posted dated 9/15/22 of Notification of Projects Accepted
 - E-mail notification sent 9/16/22
 - List of projects accepted

FY 2022 PA-502 Competition Scoring Document

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FY 2022 CoC NOFA Competition Scoring Document

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Dear Delaware County Continuum of Care grantees, members and stakeholders


The below is an important notice regarding the FY 2022 CoC NOFA Competition.

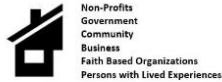
This email summarizes the list of projects that have been accepted by the CoC and will be included in the Delaware County CoC 2022 Project Priority List for funding. This includes renewal projects and new projects that will be submitted.

RENEWAL PROJECTS

The following renewal projects have been accepted by the CoC and will be ranked on the Renewal Priority Listing submitted to HUD. Each of these projects will be submitted at the full Annual Renewal Amount, as indicated on the CoC's 2022 Grant Inventory Worksheet:

AGENCY NAME	PROGRAM	BUDGET	SCORE	RANK
The Salvation Army - New York Corporation	The Salvation Army Stepping Stone Program	\$98,806	105.00%	1

Windows Taskbar: Type here to search |  | 75°F | 4:10 PM 9/15/2022



County of Delaware	HMIS 19	\$200,000	not scored - CoC infrastructure	20
Delaware County Housing Authority	DCHA FCS SHP	\$119,123	75.00%	21
County of Delaware	CoC Coordinated Entry - SA	\$30,630		
Horizon House	Coordinated Entry - Horizon House	\$57,292	105.00%	22
County of Delaware	HMIS - Expansion	\$173,223	95.63%	23
Domestic Abuse Project of Delaware County, Inc.	DV RRH - Expansion	\$288,460	not scored - CoC infrastructure	24
		\$576,920	90%	25

The CoC did not partially reallocate any projects in the 2022 CoC NOFA Competition.

The CoC did not fully reallocate any projects in the 2022 CoC NOFA Competition.

The CoC has no projects being voluntarily reallocated in the 2022 CoC NOFA Competition.

NEW PROJECTS

The CoC received one new project request for HMIS expansion. This project request was reviewed by the Homeless Services Coalition, Funding Committee and recommended for submission. The CoC had a total of \$288,460 in funding to award from the CoC Bonus and \$576,920 in funding to award from the DV Bonus.

(Continued)



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FY 2022 CoC NOFA Competition Scoring Document

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The following new projects have been accepted for inclusion on the Project Priority List for DV Bonus funding:

Domestic Abuse Project of Delaware County, Inc.	DV RRH - Expansion	\$576,920
---	--------------------	-----------

The CoC did not reject any preliminary applications submitted in the 2022 CoC NOFA Competition.

If you have any questions, please contact Jessica Fink at: finkj@delcohsa.org

Thank you for your participation in the Delaware County CoC and your ongoing commitment and efforts to end homelessness.

Sincerely,
Jessica Fink
Adult and Family Services Administrator
Delaware County CoC Lead

From: Smith, Janet E. <SmithJE@delcohsa.org>

Sent: Friday, September 16, 2022 7:19 AM

To: A McGregor <amcgregor@dapdc.org>; Abigail Hoffsommer <ahoffsommer@carelinkservices.org>; Akesha Gainer <Akesha.Gainer@ckcommunityfoundation.org>; Akua Ajarko <akuaa@voiceandvisioninc.org>; Amber Caldwell <ACaldwell@carelinkservices.org>; Andrea Haugh <Andrea.Haugh@crozer.org>; Angel Barrios <angel.barrios@use.salvationarmy.org>; Anissa Kennedy <aek197243@gmail.com>; Anna Bonilla <annabonillacps@gmail.com>; ANSELIM NJOKA <ANSELIM.NJOKA@hhinc.org>; Antionette Holmes <aholmes@caadc.org>; April McNeal <amcneal@maternitycarecoalition.org>; Aretha Allen <aallen@state.pa.us>; Ashlynn Wittmann <awittmann@delcofoundation.org>; Aubrey <ASmyser@dapdc.org>; Austin, Emmanuel <emmanuel.austin@uhsinc.com>; Autumn Walsh <autumn_walsh@elwyn.org>; Downs, Beth <DownsB@delcohsa.org>; LAURA BLACKBURN <ldblackburn@dcha1.org>; Blake <raysongrrl@yahoo.com>; brigid Risko <brisko@mothershome.org>; Brown, Faith D. <BrownF@delcohsa.org>; Bruce Egan <bruce.egan@crozer.org>; Buie, Serrita M. <BuieS@delcohsa.org>; Camille Crane <cacrane@CHS-ADPHILA.ORG>; Candice L <clinehan@delcowar.org>; CATHLEEN MURPHY <CATHLEEN.MURPHY@hhinc.org>; Ceire Evans <ceire.evans@rtsd.org>; Chaplain Rev Leonard Carroll <RevLRCarroll@yahoo.com>; Charles Pringle <Charles.Pringle@hhinc.org>; Chavon R. Hodges <Chavon_Hodges@elwyn.org>; Christina Burton <cburton@dapdc.org>; Christine <rosenzweigchristieo@gmail.com>; Christine Lenhardt <clenhardt@mckeeigroup.net>; Christine Hofmann <christine.hofmann@rtsd.org>; Christopher Bernard <cbernard@valleyyouthhouse.org>; Christopher Breitfeller <christopher.breitfeller@va.gov>; Christopher Pugliese <cpugliese@upperdarbysd.org>; Cindi Clark <cclark@cades.org>; Hill, Clara <hillc@delcohsa.org>; Crystal Harrison <educator4lyfe@yahoo.com>; Daniel Nesbitt <dnesbitt@caadc.org>; Danielle Caldwell <danielle.caldwell@hhinc.org>; Danita Miller <dmiller@caadc.org>; Darlene Williams <darlene.williams@redcross.org>; Lucas, Dawn <LucasD@delcohsa.org>; Dean Trajkov <dtrajkov@fcsdc.org>; Debbie Hennie <deborah.hennie@hhinc.org>; Debbie T <dtempleton@scs-delco.org>; Delco Promise <fpdelcodirector@gmail.com>; Demar Briggs <demar.briggs@hhinc.org>; Denice Wilson <dwilson@caadc.org>; dinah boykin <dboykin@caadc.org>; Donna Bobo Carter <bobo-carterd@elwyn.org>; ekemske <ekemske@caadc.org>; Eileen Somers <esomers@helpmlp.org>; Elizabeth A. Schneider <eschneider@seniorlawcenter.org>; Elizabeth Calcagni <Elizabeth.Calcagni@hhinc.org>; Eric Androshick <eandroshick@caadc.org>; Erica Reiter <EReiter@actionwellness.org>; Erica Stubbles <Erica.Stubbles@use.salvationarmy.org>; Erin P <epilot@valleyyouthhouse.org>; Fagan, Danielle N. <FaganD@delcohsa.org>; Feldman, Robert S. <FeldmanR@delcohsa.org>; Fink, Jessica L <FinkJ@delcohsa.org>; Fournier, Kristi R. <FournierK@delcohsa.org>; Redden-Revell, Aleasha <red-den-revella@delcohsa.org>; Gail McCoach <Gtmcc3@aol.com>; Gale Schwarz <gale@housingalliancepa.org>; Gerry Gonzalez <ggonzalez@cgrc.org>; Gloria Caine <gloria.caine@hhinc.org>; gwomack@caadc.org; Ileana Berrios (IBerrios@MaternityCareCoalition.org) <IBerrios@MaternityCareCoalition.org>; Imani Hall <halli@co.delaware.pa.us>; james wearing <james.wearing@hhinc.org>; Jamie Battista <jamie.battista@crozer.org>; Jennifer Hertler <jhertler@nhsonline.org>; Jessica Stringer <jstringer@dapdc.org>; Jessica Tropea <jessica.tropea@hhinc.org>; joann Ruark <jar@ceda.cc>; Joaquin Calvo <Joaquin.Calvo@USE.SALVATIONARMY.ORG>; John Johnson <cicinc@gmail.com>; Jordan Casey

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Subject: PA-502 Project Scores, Ranking, & Budgets

Importance: High

**sent on behalf of Jessica Fink, DHS, AFS Administrator*

Hello all,

Please review the attached document, that summarizes the list of projects that have been accepted by the CoC and will be included in the Delaware County CoC 2022 Project Priority List for funding. This includes renewal projects and new projects that will be submitted.

Thank you,

Janet E. Smith

Administrative Assistant 1

Department of Human Services

Adult & Family Services / Drug & Alcohol Services

20 S 69th Street, 3rd FL

Upper Darby, PA 19082

Office: 610-713-2365 | Fax: 610-713-2378

Email: smithje@delcohsa.org



Diversity: The act of learning how to positively understand, accept, & support both multiculturalism & individual differences working together – Ty Howard



FETAL ALCOHOL SPECTRUM
DISORDER IS 100% PREVENTABLE!
International FASD Awareness
Day is September 9th

PRIVILEGED AND CONFIDENTIAL COMMUNICATION

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Dear Delaware County Continuum of Care grantees, members and stakeholders

The below is an important notice regarding the FY 2022 CoC NOFA Competition.

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AGENCY NAME	PROGRAM	BUDGET	SCORE	RANK
The Salvation Army, a New York Corporation	The Salvation Army Stepping Stone Program	\$99,806	105.00%	1
County of Delaware	OBH-PSH-CH HH	\$166,664	104.00%	2
County of Delaware	S + C 67	\$227,730	104.00%	3
Horizon House	SHP Reallocation Project	\$94,713	103.50%	4
Delaware County Housing Authority	Del. Co. PSH for Homeless Adults with Mental Illness	\$474,386	103.00%	5
The Salvation Army, a New York Corporation	Salvation Army Chester Consolidated PSH	\$439,094	101.00%	6
Horizon House	Horizon House PSH CH	\$392,559	100.00%	7
Community Action Agency of Delaware County, Inc.	OBH RRH	\$682,445	95.45%	8
Domestic Abuse Project of Delaware County, Inc.	DAP RRH FY19	\$341,931	90.40%	9
Community Action Agency of Delaware County, Inc.	Rapid Re-Housing Program CAADC	\$159,147	89.39%	10
Community Action Agency of Delaware County, Inc.	RRH Expansion - Housing Locator	\$12,430	86.36%	11
Mental Health Partnerships	Connect to Rapid Rehousing FY2021	\$140,518	85.50%	12
Community Action Agency of Delaware County, Inc.	Rapid Re-Housing Program 3	\$133,606	82.80%	13
Catholic Social Services	PA0101 CSS HRCF Renewal	\$87,780	82.50%	14
County of Delaware	OBH-PSH CH T2 FC	\$238,592	82.50%	15
Delaware County Housing Authority	Shelter Plus Care 2345	\$368,394	82.00%	16
Family and Community Service of Delaware County	2021 Renewal App - FCSDC - Ralph Moses House Joint TH-RRH	\$300,328	79.50%	17
Community Action Agency of Delaware County, Inc.	Coordinated Entry - CAADC	\$177,263	73.75%	18
Domestic Abuse Project of Delaware County, Inc.	DAP CE FY21	\$105,252	not scored - project is too new to be scored	19
County of Delaware	HMIS 19	\$200,000	not scored - CoC infrastructure	20
Delaware County Housing Authority	DCHA FCS SHP	\$119,123 \$30,630	75.00%	21
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NEW PROJECTS

The CoC received one new project request for HMIS expansion. This project request was reviewed by the Homeless Services Coalition, Funding Committee and recommended for submission. The CoC had a total of \$288,460 in funding to award from the CoC Bonus and \$576,920 in funding to award from the DV Bonus.

(Continued)

The following new projects have been accepted for inclusion on the Project Priority List for DV Bonus funding:

Domestic Abuse Project of Delaware County, Inc.	DV RRH - Expansion	\$576,920
---	--------------------	-----------

The CoC did not reject any preliminary applications submitted in the 2022 CoC NOFA Competition.

If you have any questions, please contact Jessica Fink at: **finkj@delcohsa.org**

Thank you for your participation in the Delaware County CoC and your ongoing commitment and efforts to end homelessness.

Sincerely,
Jessica Fink
Adult and Family Services Administrator
Delaware County CoC Lead

FY 2022
COC # - PA-502
Continuum of Care

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

Attached documents include:

- **Final Project Scores for All Projects**

Dear Delaware County Continuum of Care grantees, members and stakeholders

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Domestic Abuse Project of Delaware County, Inc.	DAP RRH FY19	\$341,931	90.40%	9
Community Action Agency of Delaware County, Inc.	Rapid Re-Housing Program CAADC	\$159,147	89.39%	10
Community Action Agency of Delaware County, Inc.	RRH Expansion - Housing Locator	\$12,430	86.36%	11
Mental Health Partnerships	Connect to Rapid Rehousing FY2021	\$140,518	85.50%	12
Community Action Agency of Delaware County, Inc.	Rapid Re-Housing Program 3	\$133,606	82.80%	13
Catholic Social Services	PA0101 CSS HRCP Renewal	\$87,780	82.50%	14
County of Delaware	OBH-PSH CH T2 FC	\$238,592	82.50%	15
Delaware County Housing Authority	Shelter Plus Care 2345	\$368,394	82.00%	16
Family and Community Service of Delaware County	2021 Renewal App - FCSDC - Ralph Moses House Joint TH-RRH	\$300,328	79.50%	17
Community Action Agency of Delaware County, Inc.	Coordinated Entry - CAADC	\$177,263	73.75%	18
Domestic Abuse Project of Delaware County, Inc.	DAP CE FY21	\$105,252	not scored - project is too new to be scored	19
County of Delaware	HMIS 19	\$200,000	not scored - CoC infrastructure	20
Delaware County Housing Authority	DCHA FCS SHP	\$119,123 \$30,630	75.00%	21
County of Delaware	CoC Coordinated Entry - SA	\$57,292	105.00%	22
Horizon House	Coordinated Entry - Horizon House	\$173,223	95.63%	23
County of Delaware	HMIS - Expansion	\$288,460	not scored - CoC infrastructure	24
Domestic Abuse Project of Delaware County, Inc.	DV RRH - Expansion	\$576,920	90%	25

The CoC did not partially reallocate any projects in the 2022 CoC NOFA Competition.

The CoC did not fully reallocate any projects in the 2022 CoC NOFA Competition.

The CoC has no projects being voluntarily reallocated in the 2022 CoC NOFA Competition.

NEW PROJECTS

The CoC received one new project request for HMIS expansion. This project request was reviewed by the Homeless Services Coalition, Funding Committee and recommended for submission. The CoC had a total of \$288,460 in funding to award from the CoC Bonus and \$576,920 in funding to award from the DV Bonus.

(Continued)

The following new projects have been accepted for inclusion on the Project Priority List for DV Bonus funding:

Domestic Abuse Project of Delaware County, Inc.	DV RRH - Expansion	\$576,920
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The CoC did not reject any preliminary applications submitted in the 2022 CoC NOFA Competition.

If you have any questions, please contact Jessica Fink at: **finkj@delcohsa.org**

Thank you for your participation in the Delaware County CoC and your ongoing commitment and efforts to end homelessness.

Sincerely,
Jessica Fink
Adult and Family Services Administrator
Delaware County CoC Lead