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 2026 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2026 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 2026 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.

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; 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–Accountable Structure and Participation

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

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- Frequently Asked Questions

1B-1.	Accountable Structure and Participation.	

	In the chart below for the period from June 1, 2025 to May 31, 2026:
1.	select 'Yes' or 'No' in the chart below if the entity listed participated in CoC meetings or select 'Nonexistent' if the entity does not exist in your CoC's geographic area, and
2.	enter the number of persons on the board for each category where you answered 'Yes' in the Participated in CoC Meetings column.

You must click Save at the bottom of the form before entering the number of persons for each category where you answered 'Yes'.

	Entity	Participated in CoC Meetings	Number of Board Members
1.	Affordable Housing Developer(s)	Yes	1
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	7
3.	Certified Community Behavioral Health Clinic (CCBHC)	Nonexistent	
4.	Community Mental Health Center (CMHC)	Yes	1
5.	Disability Advocate(s)	Yes	1
6.	Disability Service Organization(s)	Yes	4
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	0
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	2
9.	Faith-based Organzation(s)	Yes	1
10.	Homeless or Formerly Homeless Person(s)	Yes	2
11.	Hospital(s)	No	
12.	Other Primary Healthcare Provider(s) (e.g., Federally Qualified Health Center, Healthcare for the Homeless)	Yes	1
13.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	
14.	Law Enforcement	No	
15.	Local Court Systems, Including Specialty Courts (e.g., Mental Health Court, Drug Court, Care Court)	Yes	1
16.	Local Government Staff/Official(s)	Yes	7

17.	State Government Staff/Official(s)	Yes	2
18.	State or Local Elected Public Official(s)	Yes	3
19.	Local Jail(s)	No	
20.	Mental Health Service Organization(s)	Yes	2
21.	Mental Illness Advocate(s)	Yes	1
22.	Organization(s) led by and serving people with disabilities	Yes	0
23.	Other homeless subpopulation advocate(s)	Yes	1
24.	Other nonprofit homeless assistance provider(s)	Yes	2
25.	Other social service provider(s)	Yes	1
26.	Public Housing Agencies	Yes	1
27.	Recovery Housing or Sober Living Provider(s)	Yes	1
28.	School Administrators/Homeless Liaison(s)	Yes	1
29.	School District(s)	Yes	0
30.	Street Outreach Team(s)	Yes	0
31.	Substance Abuse Advocate(s)	Yes	3
32.	Substance Abuse Service Organization(s)	Yes	1
33.	Universities	No	
34.	Veteran Serving Organization(s)	Yes	1
35.	Agencies Serving Survivors of Human Trafficking	Yes	0
36.	Victim Service Provider(s)	Yes	1
37.	Domestic Violence Advocate(s)	Yes	1
38.	Other Victim Service Organization(s)	Yes	0
39.	State Domestic Violence Coalition	No	
40.	State Sexual Assault Coalition	No	
41.	Youth Advocate(s)	Yes	1
42.	Youth Homeless Organization(s)	Yes	1
43.	Youth Service Provider(s)	Yes	1
44.	Other Homeless Assistance Provider(s)	Yes	1
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	1
	Other: (limit 50 characters)		
46.	Senior and Older Adult Advocate(s)	Yes	2
47.			

1B-2.	Open Invitation for New Members.	

Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to invite new members to join the CoC at least annually.

(limit 2,500 characters)

CoC membership is open to any community partner committed to ending homelessness in Delaware County. Known locally as the Homeless Services Coalition (HSC), the PA-502 CoC posts membership invitations and meeting notices on its website at www.DelcoHomelessServices.org. The CoC conducts targeted outreach to organizations and individuals representing a broad coalition of health, human, and social service advocates, funders, providers, and people with lived experience. An annual assessment of current CoC members determines outreach priorities to better serve the needs of people experiencing homelessness. Additionally, member organization lead points of contact are asked to notify the CoC when they hire new staff so the CoC can add them to its email distribution list. Members are encouraged to invite interested partners to attend meetings. The CoC invites new organizations and programs to attend meetings to educate CoC members about their programs. CoC membership is required under the Special Conditions section of the Collaborative Applicant's contracts and is included in the CoC brochure shared at community partnership meetings. Anyone interested in ending and preventing homelessness is welcome to become a CoC member.

1B-3.	CoC's Strategy to Solicit and Consider Opinions on Preventing and Ending Homelessness.	

Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to solicit and consider opinions regarding the CoC's general performance, strategies, and priority setting process from a broad array of individuals and organizations that have knowledge of homelessness or an interest in preventing or ending homelessness in the CoC's geographic area.

(limit 2,500 characters)

The CoC solicits feedback from a broad range of stakeholders on system performance, strategies, and priorities through its website, membership meetings, meetings with individual community partner organizations, and Governing Board meetings. The CoC website is regularly updated with news and information, including access to the Coordinated Entry System, housing and homeless services grants and volunteer opportunities, the PIT Count, and other system performance data. The website allows visitors to submit comments and suggestions, which are then shared with the Governing Board or an appropriate Board Committee. During quarterly CoC membership meetings, the Collaborative Applicant provides updates on system performance and priorities. In addition, CoC-funded providers report on their programs and offer suggestions for strengthening them. The Collaborative Applicant regularly meets with community partners, including law enforcement, the criminal justice system, healthcare providers, employers, housing developers, and faith-based organizations, to educate them about the CoC's priorities and gather feedback on how to better align those priorities with community needs. Finally, the CoC Governing Board, composed of more than thirty public, private, and nonprofit representatives from across the CoC region, meets quarterly to develop CoC strategies and refine future priorities.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	

Describe your CoC's transparent process to accept and consider proposals from organizations that have not previously received CoC Program funding including faith-based organizations.

(limit 2,500 characters)

At the start of every NOFO competition, the CoC invites, accepts, and considers proposals from organizations that have not previously received CoC Program funding, including faith-based organizations, by hosting a NOFO webinar open to any eligible applicant organization interested in delivering programs in the CoC service area. During the information session, the Collaborative Applicant presents data on the CoC's needs, system performance, gaps, and priorities. The Collaborative Applicant also answers questions from potential applicants and offers to meet with any new applicants individually upon request. The information session is recorded and posted on the CoC website. The CoC also announces the local competition through its dedicated email listserv, which is open to current or prospective CoC project applicants. The CoC posts all local competition information and guidance on a dedicated competition page on its website. The CoC's non-conflicted Project Review Committee is trained to review, score, accept, and rank all new projects, regardless of whether the applicant currently delivers programs in the CoC service area. Finally, the CoC identifies and conducts outreach to potential applicants in neighboring CoCs who might be willing to apply for a CoC grant in the local competition.

1B-5	Plan for Comprehensive Strategies for Reducing Homelessness.

Describe how your CoC will incorporate comprehensive strategies for reducing homelessness, including interventions in 42 U.S.C. 11386b(d) and other targeted projects for specific subpopulations, by providing a plan to address a gap in the CoC's current homelessness system.

(limit 2,500 characters)

The CoC has identified a critical gap in street outreach, behavioral health, and employment supports needed to help non-chronically homeless single adults exit unsheltered homelessness, obtain permanent housing, and achieve self-sufficiency.
This gap is supported by multiple data sources. FY2025 LSA data show that single adults have lower exits to permanent housing and higher returns to homelessness. The 2026 PIT Count found that 31% of adults with substance use disorders were unsheltered. FY2025 System Performance Measures show that only 5% of adult stayers and 16% of adult leavers increased earned income. Additionally, Governing Board planning sessions, following the recruitment of new members representing behavioral health, mental health advocacy, elected officials, and workforce development in January 2026, identified gaps in supportive services for RRH and PSH participants.

To address these gaps, the CoC will implement a coordinated strategy that strengthens connections between housing, treatment, and employment:
•Prioritize Transitional Housing with required supportive services as a pathway to self-sufficiency, including four new TH projects on the FY2026 CoC Priority Listing.
•Expand street outreach to engage unsheltered single adults more quickly and connect them to housing, mental health, and substance use treatment.
•Expand partnerships with municipal police departments, replicating the Upper Darby Police Department's collaborative approach to connecting individuals experiencing homelessness with services.
•Leverage Delaware County DHS's role as Collaborative Applicant to coordinate resources across its offices, including Mental Health, Drug and Alcohol Programs, and other human services.
•Partner with the Department of Drug and Alcohol Programs to embed Certified Recovery Specialists in TH and PSH projects.
•Strengthen partnerships with EDSI and PA CareerLink to establish employment and job-training pathways that increase earned income.

The CoC will also strengthen landlord engagement to expand housing opportunities and reduce the time needed to secure permanent housing. CoC and ESG resources will be redirected toward programs and partnerships supporting these strategies, supplemented by private funding opportunities.

Progress will be monitored through HMIS, with performance measures focused on increasing earned income and permanent housing exits while reducing the length of homelessness and returns to homelessness among si

1B-5a	Confirmation of Plan Coverage.

Select 'Yes' or 'No' in the chart below to indicate whether your narrative in question 1B-5 addresses the following aspects of your plan to address a gap in the CoC's current homelessness system.	
1. Identifies the gap, using data or stakeholder feedback	Yes
2. The strategy to address the needs of all relevant subpopulations	Yes
3. Sets quantifiable performance measures	Yes

4. Identifies timelines for the completion of specific tasks	Yes
5. Identifies specific funding sources for planned activities	Yes
6. An individual or body responsible for overseeing implementation of specific strategies	Yes

1C. Coordination and Engagement

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1C-1.	**Treatment and Recovery Services—On-site Substance Use Treatment Availability.**	
	You must upload the List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment attachment to the 4A. Attachments Screen.	
	What percent of your TH/RRH/PSH projects have substance use treatment available on site?	36%

If you are a rural CoC, describe what substance use treatment is available in your CoC and how people you serve access those services.

(limit 2,500 characters)

Not applicable.

1C-1a. Treatment and Recovery Services—Outpatient Treatment for Mental Health and Substance Use Disorders.

Describe how your CoC partners with, or has projects that provide, outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports.

(limit 2,500 characters)

The CoC seamlessly partners with outpatient mental health and substance use disorder providers as the CoC lead agency is the County Dept of Human Services where both the Office of Mental Health and the Office of Drug and Alcohol Programs (DAP) also reside. DAP serves as the Single County Authority (SCA) – the entity designated by the state to provide funding for county level drug and alcohol treatment services. County contracted behavioral health and substance use disorder (SUD) providers ensure individuals experiencing homelessness have access to a coordinated continuum of treatment through Coordinated Entry intakes and other means. Through the provider networks of both offices, individuals are screened, assessed referred to the clinically appropriate level of care, including outpatient (ASAM 1.0), intensive outpatient (2.1), partial hospitalization (2.5), and, when clinically indicated, higher levels of care such as withdrawal management and residential treatment. Screening is available 24/7, with procedures to address emergent withdrawal, psychiatric, prenatal, and other behavioral health needs.

The continuum incorporates evidence-based psychosocial interventions, individual and group counseling, care coordination, and recovery supports. Medication management and medication-assisted treatment (MAT) are considered across levels of care, including services for individuals with opioid and stimulant use disorders. Assessments also address co-occurring mental health needs, suicide risk, physical health, housing, transportation, family supports, and other barriers that may affect treatment engagement and retention. Individuals identified as needing emergent psychiatric or suicide-related intervention are referred for immediate care.

Access to outpatient and intensive outpatient services is coordinated with benefits eligibility requirements. Providers assist uninsured individuals with applying for Medical Assistance (MA) and must submit confirmation that an application was filed or documentation of denial with funding requests. Pending MA applications may qualify for county funding when the provider verifies the pending status through the required COMPASS documentation. When private insurance is primary, providers must document that the requested level of care is not covered, benefits have been exhausted, or coverage was denied and that the required grievance process has been initiated.

1C-1b. Treatment and Recovery Services—Peer Support and Recovery Navigation.

Describe how your CoC partners with, or has projects that provide access to, peer recovery specialists or other forms of peer support and recovery navigation.

(limit 2,500 characters)

The CoC seamlessly partners with peer support and recovery navigation providers as the CoC lead agency is the County Dept of Human Services where both the Office of Mental Health and the Office of Drug and Alcohol Programs (DAP) also reside. The CoC partners with the DAP and its contracted provider network including MVP Recovery and Mirmont Treatment Center to provide individuals experiencing homelessness with access to peer recovery specialists, mobile case management, recovery navigation, and recovery housing. Mental Health Partnerships – also the agency contracted to provide homeless street outreach – provides mobile peer support services to people experiencing homelessness with behavioral health and / or substance use disorders. These partnerships provide person-centered support throughout the recovery continuum and help individuals connect to treatment, housing, benefits, healthcare, and other community resources.

Recovery navigation is also supported through mobile Intensive Case Management provided by Merakey and Recovery Works PA. Case managers assist with treatment engagement, benefits and service coordination, housing stability, referrals, and transitions between levels of care. MVP Recovery provides targeted case management through its EMPOWERED program for pregnant women and mothers with SUD, addressing individualized recovery goals and family-related needs.

The CoC also connects individuals to recovery housing when clinically appropriate. DAP funded recovery house placements require screening and, when appropriate, a level-of-care assessment and referral from a DAP-contracted provider. Recovery houses provide a substance-free, supportive living environment while formal treatment is provided through community treatment providers. Funding and continued participation are coordinated, with providers responsible for monitoring changes in circumstances and coordinating transitions to employment, treatment, or other levels of care.

Peer and recovery navigation services are further strengthened through overdose prevention efforts. Together, these partnerships create multiple entry points to recovery and ensure individuals can access peer support, navigation, treatment, and housing supports.

1C-1c. Treatment and Recovery Services—Connecting Individuals Experiencing Serious Mental Illness with the Services Necessary to Promote Stability.

Describe how your CoC identifies individuals experiencing Serious Mental Illness and connects them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment.

(limit 2,500 characters)

The CoC lead agency is the County Dept of Human Services where the Office of Mental Health resides. Managed care in Pennsylvania is split into two programs – one for physical health and one for behavioral health and every county in the state chooses a behavioral health managed care organization to provide services to those eligible in the county. Our behavioral health managed care organization is called Community Care Behavioral Health Care and the liaison to the county sits on the CoC board.

The Office of Mental Health (OMH) and Community Care Behavioral Health Care (CCBHC) contracts with Elwyn to provide a Mobile Crisis Team and Horizon House for three Assertive Community Treatment teams to provide outreach and treatment to Delaware County residents.

Homeless service providers individually, Mental Health Partnerships who is contracted to provide street outreach, and Coordinated Entry staff identify individuals experiencing Serious Mental Illness and refer to OMH and CCBHC to refer to the providers.
In addition, individuals with serious mental illness are identified through evaluation before courts. If they are mandated to participate in treatment and services, they are identified through evaluation performed by the court. If they are mandated to the service, the County's Community Justice and Supports staff within the jail make the referral to ACT, FACT (forensic ACT), or PACT. Then CCBH approves and the referral is sent to a provider. Eligibility includes diagnosis of SMI and a history of needing in patient psychiatric care.

1C-1d. Treatment and Recovery Services—Coordination with Providers in Connection with Drug or Other Specialty Courts.

Identify at least one partnership the CoC has with a provider or entity providing services in connection with Drug Courts and other specialty courts serving individuals with mental and substance use disorders, Assisted Outpatient Treatment (AOT) programs, and inpatient civil commitment.

(limit 500 characters)

County Human Services and the Courts work collaboratively with service providers to facilitate a Mental Health, Drug & Alcohol and a Veterans Treatment Court weekly in Delaware County. An inpatient civil commitment mental health crises court is held two times per week.

Describe how your CoC coordinates with the provider or entity identified above to support housing stability and movement towards independence, including by leveraging court orders.

(limit 2,500 characters)

The Second Chance Court is a program that serves defendants aged 18 and older who have been arrested for possession of drugs or some other minor offense arising out of drug addiction, such as minor theft. The requirements for Second Chance Court are: (1) Delaware County resident, (2) with opioid and stimulant abuse/addiction, and (3) charged with a low-level, non-violent offense related to opioid and/or stimulant abuse/addiction. The Treatment Court is a program to help address addiction, make positive lifestyles changes, and avoid serving lengthy jail sentences. This is a fast-track court program with three tracks: Track I- Targets level 1 & 2 offenders with new charges and /or violation of probation/parole; Track II- Targets the Prison Alternative Drug and Alcohol Program (PADAP) also known as State Intermediate Punishment (SIP) level 3 & 4 offenders to undergo treatment and relapse prevention instead of incarceration. Offenders enter a guilty plea and are sentenced to a term of intermediate punishment, offering then the opportunity to be rehabilitated and avoid re-offending; Track III- Targets young adult offenders that are currently charged with a felony marijuana possession. The County Office of Drug and Alcohol Programs recently implemented a Police Diversion to Treatment Program to engage individuals in treatment and treatment related services rather than incarceration. There is also a Law Enforcement Treatment Initiative with the District Attorney's office and Attorney General's office to reduce illicit drug use.

The Delaware County Mental Health Court is a collaboration between the Court, Office of the Public Defender, Office of the District Attorney, Department of Human Services, the George W. Hill Correction Facility, Office of Adult Probation and Parole Services, and community based providers. The goal is to enhance public safety and reduce recidivism in those suffering from serious mental illness by connecting participants with community based treatment services and find appropriate dispositions to their criminal charges. Eligibility is limited to Delaware County residents who are 18 years of age or older with a serious mental illness (SMI) that contributed to their criminal behavior.

Representatives that work with both programs coordinate with the CoC and make referrals to Coordinated Entry for housing and shelter and other services.

1C-1e. Treatment and Recovery Services—Partnership with Local Crisis System of Care.

Identify at least one partnership the CoC has with the local crisis system of care including 988 and crisis contact centers, mobile crisis and outreach services, and crisis stabilization services.

(limit 500 characters)

The County's Office of Drug and Alcohol Programs and the Office of Mental Health support and fund a continuum of care that emphasizes rapid access, clinical coordination, and seamless linkage to treatment. The STAR (Stabilization, Triage, Assessment, and Referral) Program, a "crisis urgent care" model provides 24/7 support, including a psychiatric physician, to ensure individuals in crisis receive evaluation, stabilization, and connection to appropriate services. They are CoC Board members.

1C-1f.	Treatment and Recovery Services—Availability of Units for Persons Reporting Chronic Substance Use.	
	You must upload the List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment attachment to the 4A. Attachments Screen.	

Identify the number of CoC Program-funded units that require program participant engagement in substance abuse treatment services as a condition of continued participation in the program in accordance with 24 CFR 578.75.	59

1C-1g.	Treatment and Recovery Services—24/7 Access to Detox, Residential, or Inpatient Treatment.	

Is there 24/7 access to detox, residential, and inpatient behavioral health treatment within the geographic area of your CoC?	Yes

1C-1h. Treatment and Recovery Services—Formal Partnership with Behavioral and Mental Health Facilities.

Identify at least one formal partnership the CoC has with a Certified Community Behavioral Health Clinic (CCBHC), Community Mental Health Center (CMHC), SAMHSA Projects for Assistance in Transition from Homelessness (PATH) provider, Grants for the Benefit of Homeless Individuals (GBHI) provider, or a similar facility if none of the above are located in the geographic area.

(limit 500 characters)

The Executive Director of Merakey – the agency serving as a community behavioral health clinic – sits on the CoC board. The County Office of Mental Health serves as the clearinghouse for public mental health programs, case management, and outpatient clinic referrals contracting with Holcomb Behavioral Health Systems, Merakey, and Family & Community Service of Delaware County. The County Dept of Human Services also receives the PATH grant which is used for street outreach.

1C-1i. Treatment and Recovery Services—Sober Housing Availability.

Identify at least one new or existing CoC Program-funded project that operates sober housing in accordance with 24 CFR 578.93(b)(5).

(limit 500 characters)

The CoC partners with the Office of Drug and Alcohol Programs which contracts with three Recovery House providers offering 36 recovery houses and 231 beds. These sober housing programs require residents to participate in treatment services and/or self-help groups as a condition of residence, consistent with 24 CFR 578.93(b)(5).

1C-1j. Treatment and Recovery Services—Warm Hand-Offs to Stable Housing Providers.

Describe how your CoC coordinates with the programs named in questions 1C-1a through 1C-1i to facilitate warm hand-offs to stable housing providers and prevent entry into homelessness.

(limit 2,500 characters)

Behavioral health and substance use treatment providers coordinate directly with the CoC lead agency and the Coordinated Entry process to make referrals to shelter, housing, and other services needed to end a homeless episode and prevent entry into homelessness.

The main agency for Coordinated Entry is Community Action Agency of Delaware County with multiple programs to prevent homelessness including rental assistance and case management. They can directly refer and make a warm hand off to their team members who handle these programs.

County offices also coordinate in a monthly case conferencing meeting where participants bring information on individuals that are either enrolled in services across systems or in need of additional coordination of care based on the severity and complexity of needs. Adult and Family Services as the lead CoC agency within County government participates in these meetings along with the Drug & Alcohol Programs, Mental Health, Intellectual Disabilities, Child and Youth Services, Community and Justice Supports, and Early Intervention all participate.

The County Office of Drug and Alcohol Programs funds recovery housing and a permanent supportive housing initiative for individuals in recovery from Opioid Use Disorder and Stimulant Use Disorder who are experiencing homelessness. The program provides comprehensive housing support, including assistance with locating rental properties within an individual's budget, covering move-in expenses, and supplying essential furnishings. Additional supports, such as transportation assistance and utility setup, help ensure a smooth and successful transition into stable housing. To foster financial independence, participants receive six months of step-down rental assistance, enabling them to gradually assume full responsibility for housing costs while building effective budgeting skills. The program also offers up to one year of case management services, including financial education and connections to community-based resources

1C-2.	Supportive Services Investment.	

	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	$6,102,273

2. Of projects your CoC proposed to be funded in the FY 2026 CoC Program Competition, enter the total amount of funding for the supportive services budget line items.	$3,196,045
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	52%
4. Enter the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services for the projects included in your CoC's FY 2026 ARD.	$799,011
5. Percent of your CoC's FY 2026 ARD (from element 1 above) that is the supportive services funding in proposed projects (from element 2 above) plus the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services (from element 4 above).	65%

1C-3.	Participation Requirements for Supportive Services.
	You must upload the Language from Project Supportive Service Agreements attachment to the 4A. Attachments Screen.

What percent of your housing projects (TH, PH-PSH, PH-RRH, and Joint projects) require program participants to take part in supportive services (e.g. case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h)?	100.00%

1C-4. Consulting with ESG Recipients.

Describe how your CoC has and will continue to consult with ESG recipients in the planning and allocation of ESG funds.

(limit 2,500 characters)

The CoC maintains ongoing formal partnerships and consultations with both ESG grant recipients operating in the CoC region. The Delaware County Office of Housing and Community Development, the largest ESG grant recipient, serves on the CoC Governing Board, as does its largest subrecipient, which also holds multiple CoC Program grants. The Collaborative Applicant works closely with the Delaware County Office of Housing and Community Development to plan and allocate ESG grants to align with CoC needs, priorities, and funding gaps. The second ESG grant recipient, Upper Darby Township, meets annually with the CoC Collaborative Applicant to identify priority needs and gaps for people experiencing homelessness, prioritize fund use, and define performance standards.

1C-4a. Coordination with Emergency Shelter Providers.

Describe how your CoC coordinates with shelter providers to connect individuals and families with CoC assistance.

(limit 2,500 characters)

The CoC lead agency is the County Dept of Human Services – Office of Adult and Family Services which contracts with emergency shelter providers in the community. All shelter referrals and placements are managed through the CoC's coordinated entry process. CoC lead agency staff work with the Coordinated Entry staff at various sites throughout the County to communicate shelter availability and eligibility information along with communication with the shelters themselves to coordinate placement.

Once an individual or family is at a shelter, shelter staff and case managers complete assessments and make referrals to services including mental health and substance use treatment, day programs, employment training, and case management. The goal is to connect to needed services and help transition the individual or family back to self sufficiency.

In addition, the CoC lead agency also includes the Office of Children and Youth Services who have housing staff to help support families that are at risk of their children entering foster care due to lack of stability. The Office of Adult and Family Services works with the Office of Children and Youth Services to fund and monitor two emergency shelter and transitional housing programs. CYS makes referrals of families that have an open CYS case and the two organizations (Family and Community Service of Delaware County and Community Action Agency of Delaware County) provide services and coordinate with CYS.

1C-5. Data Sharing to Inform the Homelessness Response System.

Describe how your CoC has or will share PIT, HIC, HMIS, and System Performance data with state and local government as permitted by law in order to inform the homelessness response system.

(limit 2,500 characters)

The CoC lead agency is Delaware County government, which administers funding for homeless assistance programs and is responsible for making funding decisions. This structure creates a direct connection between CoC data, local planning, resource allocation, and system improvement.

The CoC will regularly share Point-in-Time (PIT) Count, Housing Inventory Count (HIC), Homeless Management Information System (HMIS), and System Performance Measures (SPMs) with County leadership and relevant state and local government partners. These data will be used to identify trends in homelessness, assess available housing and shelter and services resources, identify service gaps, evaluate program effectiveness, and inform funding priorities.

To make this information more accessible and actionable, the County is developing a data dashboard that will track key indicators of system performance, including the number of people experiencing homelessness, length of time homeless, exits to permanent housing, returns to homelessness, and utilization of available resources. The dashboard will help County leadership, service providers, elected officials, and community stakeholders understand how effectively the homelessness response system is meeting community needs and where improvements are needed.

The Commonwealth of Pennsylvania recently hired a Chief Homelessness Officer to coordinate statewide homelessness prevention and assistance strategies. The CoC will work closely with the Chief Homelessness Officer and other state partners to share local data that can inform statewide priorities, policy development, and resource allocation.

The CoC will also use these data to engage municipalities, community stakeholders, and service providers in identifying effective strategies, addressing gaps, and establishing shared goals for reducing homelessness. As both the CoC lead agency and a primary local funder, Delaware County will use system performance data to guide funding decisions, establish expectations for funded programs, monitor progress, and strengthen accountability for housing outcomes.

The overarching goal is to ensure that data are not simply collected and reported, but actively used to guide decisions and improve access to assistance.

1C-5a. Using Other Data Sources Alongside HMIS to Improve Care.

Describe how your CoC utilizes other data sources alongside HMIS to improve care (e.g., health care utilization and claims data, electronic health care record data; admission, discharge, and transfer data; and law enforcement and corrections system data).

(limit 2,500 characters)

The County Dept of Human Services contracts with a managed care organization to provide behavioral health services to County residents. Managed care in Pennsylvania is divided between physical health and behavioral health services with different MCOs contracted for each. Community Care Behavioral Health is our behavioral health managed care organization. County offices share information with CCBH on clients enrolled in homeless services to identify who is enrolled in CCBH behavioral health services. This data sharing allows the County DHS to identify who may need behavioral health services who is not already enrolled in Medicaid.

The sharing of this data also allows CCBH and the CoC to identify frequent users of both systems that may benefit from coordinated care.

In addition, the Upper Darby Township Police Department – the largest police department in the county - shares information on individuals they have frequently encountered on the street with the CoC. The CoC lead agency also shares information with the Police Department on contact with these individuals and their enrollment in services.

1C-6. Employment and Workforce Development Partnership.

Identify at least one partnership the CoC has with employment and workforce development programs and organizations such as the Local Workforce Development Board, State Workforce Agency, American Job Center (also known as One-Stop Career Centers), registered apprenticeship program, community and technical college, union training program, adult education provider, or State Vocational Rehabilitation agency.

(limit 2,500 characters)

The Executive Director for the Delaware County Workforce Development Board sits on the Continuum of Care Board and is an active referral partner. The Executive Director of one of the main homeless service providers also sits on the Board for the County Workforce Development Board.

A representative of the Workforce Development Board makes regular presentations to homeless service providers and Continuum of Care representatives to explain their services and how to help connect people experiencing homelessness to those services. The Workforce Development Board has two American Job Center sites (called PA Career Links in our county) where people experiencing homelessness regularly visit to access one of three tiers of services. The three tiers are self service where the consumer is self guided in accessing available services, universal job seeker services which includes short term career advice, and more intensive services for those eligible.

In addition, a main employment training provider is also a member of the CoC board and is a regular partner with homeless service providers to refer clients to available services.

1C-7. Street Outreach–Cooperation with First Responders and Law Enforcement.

Describe in the field below how your CoC's street outreach projects (including co-response) cooperate with first responders and law enforcement to increase positive interactions in order to increase housing and service engagement and promote use of CoC services.

(limit 2,500 characters)

Upper Darby is a hot spot for unsheltered individuals – some of whom have behavioral health and / or substance use challenges. The Upper Darby Police Department – the largest municipal police department in the county - convenes a monthly “HUB” meeting which brings together police officers, County Department of Human Services Adult and Family Services, County Department of Drug and Alcohol Programs and County Department of Community Supports for the forensic population, the Public Defenders Office along with several community organization partners including MVP Recovery, Mental Health Partnerships, and the Domestic Abuse Project.

The purpose of this monthly meeting is to discuss individuals with frequent police contact and / or 911 calls who may be experiencing homelessness and / or experiencing behavioral health and / or substance use challenges. The Police Department identifies these frequent users of emergency services and then facilitates a discussion regarding the services that these individuals could access via a warm handoff. At each monthly meeting the group discusses the status of individuals discussed at the prior meeting and any new individuals for discussion.

In addition, Mental Health Partnerships – the contracted street outreach provider – regularly visits municipal police departments to provide their contact information if a police officer encounters individuals they believe to be experiencing homelessness. MHP provides transportation assistance, a Coordinated Entry assessment, shelter and housing placement if available and can connect to other supportive services.

1C-8. Family or Support Network Reunification.

Describe how your CoC, or your recipients, assist with family or support-network reunification efforts for individuals experiencing homelessness or living in CoC Program-funded housing (e.g., case management, travel costs, arrangement of assistance in another geographic area).

(limit 2,500 characters)

The CoC Board includes the County Office of Children and Youth Services (CYS) and multiple CYS staff attend CoC general membership meetings. CYS's mission is to provide for the immediate safety and protection of children, to keep children with their own families whenever possible, to provide temporary, substitute care for children when necessary and to reunite children with their families as quickly as possible after placement.

CYS has 3 staff dedicated to coordinating services to meet housing needs of CYS involved families at risk of experiencing homelessness. They have grant funded programs with contracted providers for rent/utility assistance program (Housing Stability Program), emergency shelter (Family Management Center) in addition to Transitional Housing. These programs are placement prevention services to stabilize families in a safe place of residence. They coordinate with the CoC lead agency when families overlap the two systems during homeless episode. The emergency shelter program helps stabilize families and connects them with needed services to work towards self-sufficiency and moving back into the community. The Housing Stability Program funds are flexible and allow them to provide an incentive to landlords that are leasing up to a family for the first time and accepting rent assistance for move in costs. It has allowed them develop relationships with landlords in the community and their social service aide acts as a housing locator.

CYS staff works closely with the CoC lead agency (also a County government office) to contract with a nonprofit for transitional housing specifically for CYS involved families at risk of losing their children to foster care due to a lack of housing among other reasons. The transitional housing is to help stabilize the families and connect them with behavioral health, substance use treatment, employment, and other needed services to help them regain stability and become self sufficient.

In addition, CYS has a MOU with the Delaware County Housing Authority and the CoC to provide services to families/youth receiving Family Unification Program vouchers. Their grant allocation is for 141 vouchers cumulatively from multiple grants over the years. They have a caseworker that provides supportive housing case management for first 12 months of lease up and does discharge tracking for 12 months beyond that case management.

1C-9	**Partnering with Public Housing Agencies—Agreement to Enable Transition to HUD Assisted Housing.**		
	Does your CoC have an agreement with at least one public housing agency to enable participants to transition from Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing to HUD assisted housing?	Yes	

1C-10. Protecting Public Safety—Cooperation with Law Enforcement.

You must upload the Evidence of Coordination and Non-Interference with Local Efforts to Advance Protecting Public Safety attachment to the 4A. Attachments Screen.

Describe how your CoC cooperates and does not interfere with or impede local efforts to advance the objectives below, and assists first responders in providing services to homeless individuals.

(limit 2,500 characters)

The CoC works closely with the Delaware County District Attorney's Office, Courts, and major municipal police departments to ensure it cooperates with, and does not impede, law enforcement's efforts to protect public safety.

The CoC lead agency – the County Dept of Human Services – participates in a monthly meeting with the Upper Darby Police Department to identify individuals experiencing homelessness, behavioral health and / or substance use challenges to help coordinate services to help them connect to services. While there are currently no known encampments because police officers require that individuals move on fairly quickly when a tent is identified, the CoC has a policy to assist those identified as living outside in unauthorized spaces in the future.

Delaware County Drug and Alcohol Program office – a member of the CoC board – works closely with the courts, police departments, the District Attorney's office, and substance treatment providers on the Law Enforcement Treatment Initiative to decrease the public use of illicit drugs and quickly connect individuals with appropriate services. CoC partners also follow all laws related to identifying individuals who are a danger to themselves or others. And CoC partners follow all relevant laws including sharing information as required in accordance with SORNA.

1C-10a. Protecting Public Safety—Plan to Quickly Clear Tents and Encampments.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to quickly clear tents and encampments on public property and connect individuals who are camping in public with appropriate services and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

Delaware County provides that no person may erect or maintain a tent or shelter and / or camp in any park without written authorization for all County parks.

The County is made up of 49 municipalities (cities, boroughs, and townships) that create their own rules around tents and encampments on public property. The vast majority of municipalities either have specific restrictions on public camping or an ordinance in place which provides the legal framework to restrict camping.

Seven municipalities specifically restrict tents, temporary living quarters, temporary housing, sleeping / camping structures. Fifteen prohibit camping / overnight camping in parks or on municipal property. Nine require people to leave parks or municipal property after dusk and while this does not specifically prohibit camping, it can be used to remove people who may be on site after dusk.

The Continuum of Care lead agency – the County Department of Human Services – utilizes county administered funding to contract with Mental Health Partnerships for homeless street outreach and MVP Recovery for outreach specific to people experiencing mental health and substance use disorder challenges. The two organizations have active partnerships with most police departments in the larger municipalities including Upper Darby and Chester and are contacted by police when they identify an individual that may be eligible for homeless, mental health, and substance use disorder services.

Mental Health Partnerships and the CoC lead agency continues to outreach to all police departments to coordinate to identify unhoused individuals and connect them to available services.

The Upper Darby Police Department – the largest municipal police department in the county - convenes a monthly “HUB” meeting which brings together police officers, County Department of Human Services Adult and Family Services, County Department of Drug and Alcohol Programs and County Department of Community Supports for the forensic population, the Public Defenders Office along with several community organization partners including MVP Recovery, Mental Health Partnerships, and the Domestic Abuse Project.

The purpose of this monthly meeting is to discuss individuals with frequent police contact and / or 911 calls who may be experiencing homelessness, behavioral health and / or substance use challenges.

1C-10b. Protecting Public Safety—Current Status of Tents and Encampments.

Describe the current status of tents and encampments in the CoC’s geographic area.

(limit 2,500 characters)

Upper Darby Township and the City of Chester are “hot spots” for unsheltered individuals without a stable place to stay. Upper Darby Township Police report that there are no encampments on a regular basis because they quickly move people on. Where there was a reported encampment the Upper Darby Township Police Captain reported that he attempted to find it and it was no longer in existence.

A main public transportation center for the subway, buses, and trolleys for SEPTA – Philadelphia’s transit system – is located in Upper Darby. More unhoused individuals can be found within SEPTA’s transit center rather than in tents or other structures in the woods and on the streets. The CoC lead agency and the nonprofit contracted to provide street outreach (Mental Health Partnerships) have an active partnership with SEPTA and meet every two weeks to coordinate on how to connect individuals found within the SEPTA station to mental health and substance use treatment, case management, and shelter and housing supports.

MVP Recovery – a behavioral health and substance use treatment provider – has active relationships with the Chester Police Department. MVP Certified Recovery Specialists have worked with the Chester Police to find people in two encampment locations in parks and outreach to them and connect them to treatment. Then the police quickly cleared the encampments after offers of services were made.

MHP reports that they have not found any encampments where people are staying on a regular basis in the last several months. This is in part due to the quick actions of area police departments.

1C-10c. Protecting Public Safety—Plan to Decrease the Public Use of Illicit Drugs.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to decrease the public use of illicit drugs and quickly connect individuals who are using illicit drug in public with appropriate services and/or law enforcement and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

The Delaware County Law Enforcement Treatment Initiative was developed to address the demand side of the drug epidemic to curtail crime and overdose deaths.

The initiative has the following goals:
1. Reduce deaths, overdoses, and crime associated with substance use disorders, by getting individuals who need treatment into appropriate programs.
2. Reduce stigma associated with substance use disorder.
3.Strengthen police-community relationships by encouraging individuals with a substance use disorder to seek help from law enforcement.
4.Train law enforcement officers on how better to help individuals who have a substance use disorder.
5.Connect individuals with organizations that are ready, willing, and able to provide help.

As part of the initiative, a probation certified recovery specialist works directly out of the probation office to support and coordinate care, to include warm handoffs when appropriate. LETI, the Law Enforcement Treatment Initiative also utilizes peer support but also leverages close inter-disciplinary collaboration and cooperation with the Justice system; including courts, police departments, District Attorney's office and substance treatment providers, especially MVP recovery - the treatment provider who administers the peer support services and also provides outreach, treatment services and assessment and referrals.

Treatment court: County staff and providers are part of the Treatment Court team that functions to provide alternatives to incarceration and other penalties for eligible individuals willing to follow the Court's collaborative method of having wrap around support and accountability. This process occurs through collaborating among Probation, the Public Defender's office, the District Attorney's office, treatment providers, recovery housing providers and mutual aid groups within the community, with the SCA functioning in a supportive capacity. The team also works with prison liaisons. Probation, treatment providers, CCBH, the Medicaid BHMCO, and the County Assistance office to coordinate funding and referrals to treatment for individuals incarcerated in the County's prison.

1C-10d. Protecting Public Safety—Current Status of Overdoses and Illicit Drug Use in Public Spaces.

Describe the current status of overdoses and illicit drug use in public spaces in the CoC's geographic area.

(limit 2,500 characters)

The opioid epidemic continues to have a profound impact on Delaware County, but the data also show that sustained programming in prevention, treatment, and recovery are making a difference.

In 2024, opioid-related overdoses remained the leading driver of overdose fatalities in Delaware County. Of all overdose deaths, 78.3% involved an opioid, and 73.9% involved fentanyl, underscoring the continued role these substances play in the crisis.

While the challenge remains significant, we are seeing measurable progress. In 2024, Delaware County's overdose death rate was 2.0 deaths per 10,000 residents, a substantial decline from the county's peak of 4.0 deaths per 10,000 in 2017. By comparison, both the Pennsylvania statewide rate and the national rate in 2024 were 2.5 deaths per 10,000 residents.

Overdose fatalities rose dramatically throughout the 2010s, reaching a high of 257 deaths in 2017. For several years, annual fatalities remained near 200 before beginning to decline. Delaware County recorded 170 overdose deaths in 2023 and 121 in 2024. Preliminary data for the 12-month period ending in December 2025 indicate 129 overdose deaths. While these numbers represent meaningful progress from the peak of the epidemic, they also remind us that far too many lives continue to be lost.

MVP Recovery – a behavioral health and substance use provider – employs Community Resource Specialists who travel with the Chester Police Department to identify people that are experiencing substance use challenges in public. And MVP Recovery along with Dept of Human Services staff, the Public Defenders Office, the Domestic Abuse Project, the Area Agency on Aging, and multiple other providers coordinate with the Upper Darby Police Department in a meeting led by a police captain called the HUB. Police officers bring names and details of individuals that are frequent users of public services and also struggling with substance use disorders to discuss coordination of care and services for shelter, housing, treatment and other services.

1C-10e. Protecting Public Safety—Standards to Address Danger to Self or Others.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to utilize standards that address homeless individuals who are a danger to themselves or others (e.g., involuntary commitment) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

The CoC lead agency is the County Dept of Human Services where the Office of Mental Health resides, enabling close coordination. The CoC and Office of Mental Health work closely to coordinate responses to individuals experiencing homelessness who may pose a danger to themselves or others due to a mental health crisis.

The County Office of Mental Health contracts with Elwyn to provide a Mobile Crisis team that conducts crisis assessments and assists in determining the appropriate level of intervention. The County also contracts with Riddle Hospital and Mercy Fitzgerald Hospital to provide emergency psychiatric evaluations, including evaluations for involuntary commitment. The Office of Mental Health, other County offices, and homeless service providers follow established protocols for contacting Mobile Crisis and/or law enforcement when an individual appears to require an assessment for involuntary commitment.

Pennsylvania's Mental Health Procedures Act (MHPA), particularly Section 302, establishes the legal framework for involuntary emergency psychiatric examination and treatment when an individual meets the statutory criteria for severe mental disability and presents a clear and present danger of harm to themselves or others.

The CoC recognizes that these legal standards can also create challenges when individuals have significant behavioral health needs but do not meet the threshold for involuntary commitment. Homelessness, refusal of services, or the presence of a mental health condition alone does not establish eligibility for involuntary treatment. Individuals who do not meet the statutory criteria may nevertheless require substantial assistance to remain safe, access treatment, and obtain stable housing.

The CoC leverages existing resources and addresses these challenges through continued coordination between homeless service providers and the County's behavioral health system. This includes strengthening communication and referral procedures between providers and Mobile Crisis, promoting early identification of individuals experiencing behavioral health crises, and facilitating connections to mental health treatment and supportive services whenever appropriate.

1C-10f. Protecting Public Safety—Share Information in Accordance with SORNA.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to comprehensively share information, including location information, in accordance with the Sex Offender Registry and Notification Act (SORNA) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

Delaware County's established partnerships among law enforcement, County human services departments, and community-based organizations support coordinated information sharing to address unsheltered homelessness, behavioral health needs, substance use challenges, and public safety concerns.

One example is the Upper Darby Police Department's monthly HUB meetings, which bring together representatives from law enforcement, County human services agencies, the Public Defender's Office, and community service providers. These meetings provide a structured opportunity to identify individuals with frequent emergency service contacts, share relevant information, coordinate referrals, and facilitate warm handoffs to appropriate services. Partners also review previous cases to assess progress and identify additional opportunities for intervention.

These established relationships help the CoC coordinate with law enforcement while maintaining the distinct responsibilities of service providers and public safety agencies. The CoC and its partners do not interfere with law enforcement responsibilities, including arrests or the enforcement of applicable laws.

Information sharing is also governed by applicable confidentiality and privacy requirements, including protections for HMIS participants and individuals receiving behavioral health, substance use, or domestic violence services. These requirements may limit the disclosure of certain client information but do not prevent agencies from coordinating services through appropriate information-sharing practices.

The CoC recognizes the importance of complying with the Sex Offender Registration and Notification Act (SORNA) and applicable Pennsylvania requirements, including Megan’s Law and those related to registration and location information. The CoC will continue working with law enforcement and County partners to support lawful information sharing, facilitate access to appropriate services, and ensure that coordination efforts are consistent with applicable legal requirements.

1C-11. Outreach Strategy.

Describe your CoC’s strategy to outreach to all individuals and families experiencing homelessness across your geographic area.

(limit 2,500 characters)

The CoC's Street Outreach Team locates, identifies, and builds relationships with individuals experiencing homelessness who are unsheltered, living on the street, or in other places not meant for human habitation throughout the CoC's geographic region. The Street Outreach Team engages these individuals by providing linkages to emergency shelter, healthcare, and other community-based supports. In addition, the CoC has collaborated with the Philadelphia Outreach Team at Philadelphia Airport (which many residents experiencing homelessness use as a temporary place to sleep at night and stay during the day). The CoC also partners with the Southeastern Pennsylvania Transportation Authority (SEPTA, which operates bus, rapid transit, commuter rail, light rail, and electric trolley services throughout the CoC's entire geographic region. The CoC Street Outreach Team partners with SEPTA Police to identify and coordinate the engagement of treatment-resistant unhoused residents. The Team strives to build trust and rapport with these unhoused individuals to encourage enrollment in CoC services.

1C-12.	Collaboration Related to Children and Youth–Written Agreements with Early Childhood Services Providers.	

Select 'Yes' or 'No' in the chart below to indicate whether your CoC or HUD-funded projects in the CoC have written agreements with the listed providers of educational supports and services for children ages 0-5:

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

1C-12a.	Collaboration Related to Children and Youth–Formal Partnerships with Schools and Youth Education Providers.	

Select 'Yes' or 'No' in the chart below to indicate the youth education providers your CoC has a formal partnership with:

1.	McKinney-Vento Liaison(s) (including State Education Agency (SEA) or Local Education Agency (LEA))	Yes
2.	School District(s)	Yes
3.	General Education Development (GED) Program(s)	Yes
4.	Community College(s)	Yes
5.	Technical College(s)	No

6.	Other Post-Secondary Education Provider(s)	Yes

1C-12b.Collaboration Related to Children and Youth—Informing Individuals and Families who Become Homeless about Eligibility for Educational Services.

Describe your CoC's written policies and procedures to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

A written policy was adopted by the CoC Governing Board in October 2014 and updated in January 2020. The policy has been reviewed regularly but the Governing Board determined no changes were necessary since 2020.

The policy establishes procedures to ensure that children and families experiencing homelessness are informed of their educational rights and connected to appropriate educational services. As part of the initial assessment process, Coordinated Entry (CE) staff utilize the Homeless Management Information System (HMIS) to assess the educational needs of children and inform families of their rights to receive education.

Upon intake into the CoC, CE staff distribute the Educational Rights of Homeless Children pamphlet to the Head of Household and review its contents. CoC providers also publicly display educational rights posters and distribute written summaries of educational rights to families. Additionally, providers receive educational materials, including posters and pamphlets, for distribution to families.

The CoC promotes collaboration among parents, schools, psychologists, early childhood education programs, and other community partners to ensure children's educational needs are addressed. Children under age three are evaluated by the Office of Early Intervention or its designee, while children ages three through five are evaluated by the Delaware County Intermediate Unit or its designee. The Coordinated Assessment system also provides an opportunity to ensure children receive current developmental and behavioral screenings.

To support ongoing education and staff awareness, the Regional ECYEH Coordinator conducts an annual educational presentation on the Educational Rights of Homeless Children at the Continuum of Care meeting. The presentation is recorded and made available on the CoC's website for new staff and individuals seeking refresher training. The Regional ECYEH Coordinator also provides technical assistance to case managers, as requested, to help ensure children maintain educational stability with minimal interruptions.

Through these written procedures, the Delaware County CoC ensures that families experiencing homelessness receive timely information about educational eligibility and rights, while establishing collaborative processes to connect children with school enrollment, transportation, early intervention, developmental screenings, and ongoing educational support.

1C-12c. Collaboration Related to Children and Youth—Coordination with Foster Care or Child Welfare Services.

Describe how your CoC coordinates with foster care or child welfare services to assist youth transitioning from public systems of care.

(limit 2,500 characters)

The PA-502 Continuum of Care (CoC) works closely with Delaware County's Office of Children and Youth Services (CYS) to support youth transitioning out of foster care, prevent homelessness, and connect youth to stable housing and supportive services.
The CoC lead agency is the Delaware County Department of Human Services (DHS), which also houses CYS. This organizational structure facilitates coordination between the homeless assistance and child welfare systems. CYS is represented on the CoC Governing Board, and multiple CYS staff regularly participate in CoC general membership meetings through the Homeless Services Coalition. This ongoing engagement supports cross-system collaboration, identification of service gaps, and coordination of housing resources for youth experiencing or at risk of homelessness.

The CoC and CYS coordinate several housing resources specifically designed to assist transition-aged youth:
- Foster Youth to Independence (FYI) Vouchers: CYS has a Memorandum of Understanding (MOU) with the Chester Housing Authority, one of Delaware County's two housing authorities, and the CoC to facilitate access to FYI housing vouchers. Through this partnership, CYS, the housing authority, and the CoC coordinate to identify eligible youth transitioning from foster care and connect them with rental assistance.

- Transition-Aged Youth BRIDGE Program: CYS administers funding for the BRIDGE program, which provides rental subsidies and case management to eligible youth through their 25th birthday. Assistance is available for up to 24 months, supporting youth as they work toward independence and long-term housing stability. The CoC can refer Chafee-eligible youth to this program, helping connect youth identified through the homeless assistance system with available child welfare housing resources.

- Emergency Shelter Resources: Family Management Center (FMC) maintains a shelter room designated for transition-aged youth referred by CYS as part of their transition planning. Wesley House shelter has also provided overflow capacity when needed.

Together, these partnerships strengthen coordination between the child welfare and homeless assistance systems, providing multiple pathways to housing assistance, case management, and emergency shelter when necessary. CYS's ongoing participation in CoC governance and planning also helps ensure that the needs of transition-aged youth are incorporated into broader countywide efforts to prevent and end homeless

1C-12d. Collaboration Related to Children and Youth—Coordination with Runaway and Homeless Youth (RHY)-funded Providers.

Describe how your CoC coordinates with RHY-funded providers including Street Outreach Programs, Basic Center Programs, Transitional Living Programs, and Maternity Group Homes where such providers exist.

(limit 2,500 characters)

No Runaway and Homeless Youth (RHY) funded providers currently operate within the CoC's geographic region. However, the CoC maintains strong partnerships with organizations serving youth experiencing homelessness and youth transitioning out of foster care to ensure access to housing and supportive services.

The CoC's lead agency is Delaware County Department of Human Services (DHS), which includes the Office of Children and Youth Services (CYS). CYS is represented on the CoC Governing Board and actively participates in the Homeless Services Coalition, facilitating coordination, identifying service gaps, and ensuring that youth experiencing or at risk of homelessness are connected to appropriate resources.

CYS partners with the Community Action Agency of Delaware County to provide placement and independent living services for youth aging out of foster care. CYS also maintains a Memorandum of Understanding with Chester Housing Authority and the CoC to facilitate access to Foster Youth to Independence (FYI) vouchers, helping eligible youth transition into stable housing.

Additionally, CYS funds the Transition Aged Youth BRIDGE program, which provides rental subsidies and case management for up to 24 months to eligible youth through their 25th birthday. The CoC can refer Chafee-eligible youth to this program, creating another pathway to housing stability and independent living.

Emergency shelter resources are also available for transition-aged youth. FMC maintains a shelter room designated for youth referred by CYS as part of their transition planning. Wesley House has also made a targeted shelter room available when needed and space permits. These arrangements help address immediate housing needs while longer-term housing options are identified.

To further strengthen its response, the CoC is formalizing a partnership with Valley Youth House, an RHY provider operating in neighboring CoCs. This partnership will leverage Valley Youth House's specialized expertise to inform local practices, strengthen service coordination, and identify opportunities to improve outreach, housing connections, and supportive services for runaway and homeless youth.

Together, these partnerships allow the CoC to leverage existing resources, strengthen coordination between youth-serving and homeless assistance systems, and improve housing pathways for vulnerable youth despite the absence of a locally funded RHY provider.

1C-13. Collaboration Related to Families with Children—TH or RRH Project Dedicated to Serving Families with Children.

Identify at least one Rapid Rehousing (RRH) or Transitional Housing (TH) project in the CoC that primarily or exclusively serves families with children experiencing homelessness in accordance with 24 CFR 578.93(b).

(limit 500 characters)

The Domestic Abuse Project has a CoC funded rapid re-housing program exclusively serving families with children experiencing homelessness that are fleeing domestic violence.

Community Action Agency of Delaware County has a rapid re-housing program primarily serving families with children experiencing homelessness.

Family and Community Services of Delaware County operates transitional housing for families with children experiencing homelessness with an open Child and Youth Services case.

1C-13a. Collaboration Related to Families with Children—Supportive Services to Improve Income to Pay Rent.

Describe how the project(s) identified in 1C-13 provides supportive services focused on improving incomes to pay rent, such as workforce development, job training, or registered apprenticeship programs.

(limit 2,500 characters)

DAP, CAADC, and FCSDC provide supportive services designed to help participants increase their income, strengthen financial stability, and achieve long-term housing stability. All three programs combine individualized case management, employment assistance, and connections to community workforce development resources to help participants obtain and maintain employment and increase their ability to pay rent independently.

DAP's Rapid Re-Housing Program provides direct financial assistance to help participants access employment opportunities, including funding for professional certifications, job training, and other workforce development activities. Case managers also connect participants to external employment resources, including PA CareerLink (what is American Job Centers in PA), EDSI, and other job readiness and workforce development programs. Recognizing that employment success often depends on addressing additional challenges, the program helps participants overcome barriers to employment through financial literacy resources and assistance with childcare and transportation expenses.

Similarly, CAADC case managers help participants develop financial management and savings skills while providing practical employment support, including résumé development and connections to job training and placement services. Participants may be referred to CAADC's internal Work Ready program or external workforce development providers, such as EDSI and PA CareerLink (eg American Job Centers), based on their individual needs and employment goals.

FCSDC provides case management at least biweekly to all participants, focusing on household budgeting, financial literacy, improving credit scores, and increasing income. Case managers connect participants to employment and workforce development opportunities, most frequently through referrals to EDSI, PA CareerLink, and Goodwill's employment program for job search assistance and related supports.

Together, these services help participants build the skills, resources, and financial independence necessary to increase household income, sustain rental payments, and maintain housing stability beyond the period of rental assistance.

1C-13b. Collaboration Related to Families with Children—Leveraging Funding from Mainstream Family Service Systems.

Describe how the project(s) identified in 1C-13 leverages funding from mainstream family service systems, such as Temporary Assistance for Needy Families (TANF).

(limit 2,500 characters)

DAP, CAADC, and FCSDC leverage funding and resources available through mainstream family service systems, including Temporary Assistance for Needy Families (TANF), to help participating households maximize their income, access essential supports, and achieve long-term housing stability. All three programs use individualized case management to identify benefits for which families may be eligible, assist with accessing and maintaining those resources, and coordinate services to ensure comprehensive support beyond the housing assistance provided by the projects.

DAP's Rapid Re-Housing Program connects participants to TANF and other mainstream benefits, including Supplemental Nutrition Assistance Program (SNAP), Medical Assistance (Medicaid), and subsidized childcare. Case managers also help families access welfare-to-work initiatives, workforce development and job training programs, and employment readiness assistance. These connections help families address barriers to employment, increase household income, and reduce expenses that could affect their ability to maintain housing.

Similarly, CAADC case managers help families identify and access eligible mainstream benefits, including TANF, SNAP, the Low Income Home Energy Assistance Program (LIHEAP), Medical Assistance, and subsidized childcare through Pennsylvania's Early Learning Resource Center (ELRC) system. Case managers also connect participants to additional community-based services and employment supports based on individual needs.

FCSDC assists families with applying for TANF, SNAP, Medicaid, and other eligible mainstream benefits, as well as completing renewals and reporting changes in circumstances to the County Assistance Office (CAO) to prevent interruptions in assistance. FCSDC also helps all participants apply for utility assistance programs, including LIHEAP, PECO's Customer Assistance Program (CAP), and Aqua's Customer Assistance Program (CAP), reducing household expenses and supporting ongoing housing affordability.
By coordinating housing assistance with existing public benefit programs and community resources, the projects leverage mainstream funding to address household needs without relying exclusively on homelessness assistance dollars. This approach helps families maximize available resources, reduce financial burdens, and build the economic stability necessary to sustain housing after program assistance ends.

1C-13c. Collaboration Related to Families with Children—Combining Housing Assistance with Parental Support.

Describe how the project(s) identified in 1C-13 combines housing assistance with childcare, parenting support, pregnancy-related and child healthcare, and education.

(limit 2,500 characters)

DAP, CAADC, and FCSDC combine housing assistance with supportive services addressing the needs of families with children, including childcare, parenting support, maternal and child healthcare, and educational resources. All three programs use case management and community partnerships to connect families with services that promote family well-being and long-term housing stability.

DAP's Rapid Re-Housing Program assists families in accessing childcare subsidies and provides direct financial assistance to bridge gaps between enrollment in childcare and receipt of subsidies. Case managers also help families access WIC, Healthy Start, and other community resources supporting maternal and child health. Additional assistance may include pregnancy-related supports, essential newborn furniture, parenting classes, counseling, support groups, and transportation to medical appointments.

CAADC provides on-site after-school programming for children through a recreational aide and helps families access healthcare and nutritional resources. Families are required to obtain physical examinations during their stay, and a nutrition counselor is available to provide additional support. Case managers also make referrals to community child resource centers and other services based on each family's needs.

FCSDC assists families with applying for and maintaining subsidized childcare benefits through Pennsylvania's Early Learning Resource Center (ELRC). Parenting support and classes, child healthcare, and educational needs are coordinated with the family's Children and Youth Services (CYS) case manager. FCSDC's Transitional Housing (TH) case manager also assists families with arranging out-of-district school transportation through the Education for Children and Youth Experiencing Homelessness (ECYEH) program, helping children maintain educational continuity. The TH case manager monitors families' needs and communicates any additional concerns related to parenting, healthcare, or education to CYS for appropriate follow-up.

Together, these services help families address immediate needs while maintaining access to childcare, healthcare, and education, strengthening their ability to achieve lasting housing stability and support their children's healthy development.

1C-14. Collaboration with Veteran Serving Organizations—Partnership with the U.S. Department of Veterans Affairs or Veteran Serving Organization.

Identify at least one partnership the CoC has with the Department of Veterans Affairs or other Veteran Serving Organizations.

(limit 500 characters)

The CoC maintains a formal partnership with the Department of Veterans Affairs' Coatesville VA Medical Center (VAMC). A VAMC staff member serves on the CoC Governing Board to provide recommendations to better address veteran homelessness. VAMC enters all Veteran homelessness client data into HMIS. Its homeless veteran outreach staff works closely with the CoC Street Outreach Team and Coordinated Entry to ensure all veterans are enrolled or referred to eligible CoC and VA housing and services.

1C-14a	Collaboration with Veteran Serving Organizations.	
	Select 'Yes' or 'No' in the chart below to indicate whether the partnership(s) identified in 1C-14 does the following:	

1.	Refers veterans identified by the CoC to VA or other Veteran Serving Organizations for assistance?	Yes
2.	Coordinates the provision of emergency shelter, supportive services, and housing for veterans?	Yes
3.	Ensures access to a full spectrum of employment and career pathway opportunities?	Yes
4.	Shares data with the Department of Veterans Affairs as appropriate?	Yes
5.	Identifies service gaps for veterans?	Yes
6.	Fills service gaps for veterans?	Yes

1C-15. Collaboration with Organizations who Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.

Identify at least one partnership your CoC has with victim service providers, state domestic violence coalitions, state sexual assault coalitions, anti-trafficking service providers or other organizations who help provide shelter, housing, and services to individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

(limit 500 characters)

The CoC partners with the Domestic Abuse Project of Delaware County (DAP), a VAWA-funded VSP serving the CoC service area, to address the needs of people fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking. DAP serves on the CoC Governing Board, delivers CoC-funded DV Coordinated Entry and RRH, provides trauma-informed DV training to other CoC providers, and helps develop CoC policies for survivors.

1C-16. Collaboration with Justice System Re-entry Partners.

Identify at least one partnership your CoC has to prevent homelessness among people transitioning from prisons, jails, or court-ordered programs.

(limit 500 characters)

The CoC lead agency is the Dept of Human Services that also houses Community and Justice Supports staff who coordinate directly with the County Public Defender's Office to identify people that are being held in jail on the condition of address verification who need emergency housing upon release. They contact the Coordinated Entry lead agency to find an available opening for emergency shelter or housing and also work with Drug and Alcohol Programs for treatment services and recovery housing.

1C-17. Collaboration with Partners to Address High Utilizers of Healthcare Systems.

Identify at least one partnership or project your CoC has to provide specialized supportive services for homeless individuals with a high level of medical needs.

(limit 500 characters)

Referrals for services for older medically fragile individuals are made to the County Office of Services for the Aging (COSA) to ensure an appropriate medical assessment and connection to needed healthcare services.

Many individuals with severe health needs frequent Catholic Charities day program who has partnered with nursing students from Drexel University to provide health education, discuss wellness concerns, and identify when follow up with a health care provider is needed.

1C-18. Collaboration with Partners to Address the Needs of Aging and Elderly Individuals Experiencing Homelessness.

Identify at least one partnership or project your CoC has to serve aging and elderly individuals experiencing homelessness, such as with a provider of residential care, assisted living, or medical respite services.

(limit 500 characters)

When MHP Outreach staff engage individuals experiencing homelessness who are medically fragile or have significant healthcare needs, the team coordinates with County Office of Services for the Aging (COSA) to ensure the individual receives a medical assessment and connection to needed healthcare services. Through this partnership, Outreach staff can help identify immediate medical concerns, facilitate referrals, and connect individuals to the most appropriate medical provider or level of care.

1C-19. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Project that Prioritizes Individuals Experiencing Chronic Homelessness.

Identify at least one Rapid Rehousing (RRH) or Permanent Supportive Housing (PSH) project that prioritizes individuals experiencing chronic homelessness.

(limit 500 characters)

The following projects all prioritize chronically homeless individuals and families – FCSDC – PSH – FAM; Horizon House PSH CH; Salvation Army Chester Consolidated PSH, S+C 67, and SHP Reallocation Project.

1C-19a. Permanent Supportive Housing for Chronically Homeless Individuals and Families—On-site Behavioral Healthcare.

Describe how the project(s) identified in 1C-19 provides on-site behavioral healthcare.

(limit 2,500 characters)

The CoC reallocated several permanent supportive housing projects to create new transitional housing projects all of which will have on site behavioral health treatment services.

In addition, the County Office of Mental Health will offer the availability of on-site behavioral health treatment services to all permanent supportive housing providers. This will be provided through the County's contracted behavioral health providers.

1C-19b. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Need for Higher Level of Care.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant need for higher level of care (i.e., assisted living, residential treatment).

(limit 2,500 characters)

The CoC's housing and service providers are required to assess participants' needs on an ongoing basis to identify when additional support or a higher level of care, such as assisted living, residential treatment, or other specialized services, may be appropriate.

When a potential need is identified, providers work with the participant and appropriate healthcare, behavioral health, and other community partners to obtain a professional assessment and identify available options. Providers coordinate referrals and assist with transitions to appropriate settings, prioritizing participant choice, continuity of care, and housing stability.

Assessments are individualized, and decisions regarding a higher level of care are based on participants' needs, preferences, and applicable clinical recommendations.

1C-19c. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Readiness for Moving On.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant readiness for moving on to unsubsidized or other permanent housing.

(limit 2,500 characters)

The CoC maintains a process for assessing whether Permanent Supportive Housing (PSH) participants are interested in and ready to transition to unsubsidized or other permanent housing. The process promotes participant choice, long-term housing stability, and the availability of PSH resources for individuals who need ongoing housing assistance and supportive services.

PSH providers assess participants' interest in and readiness for transitioning to other permanent housing opportunities at least annually and as part of ongoing housing stability planning.

Assessments are individualized and consider the following:
•Participant interest in transitioning to another permanent housing option.
•Current housing stability and ability to maintain housing with available supports.
•Income and financial resources to afford housing-related expenses.
•Availability of unsubsidized housing or alternative permanent housing assistance, including Housing Choice Vouchers.
•Need for and availability of ongoing community-based supportive services.
•Potential barriers to securing and maintaining alternative housing.

When a participant expresses interest in transitioning, the provider works with them to develop an individualized transition plan. The plan identifies appropriate housing options, financial resources, necessary supportive services, and assistance needed to complete the transition.

Providers coordinate with housing authorities, the CoC's Coordinated Entry system, and community partners to identify available housing opportunities and facilitate connections to ongoing services.

Participation in the move-on process is voluntary. Participants are not required to leave PSH solely because they achieve housing stability, increase their income, or complete service goals. All transitions prioritize participant choice and continued housing stability.
Providers document assessments, transition plans, and housing outcomes in participant records and HMIS, as applicable. The CoC monitors successful transitions to unsubsidized and other permanent housing as part of its ongoing system performance evaluation.

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

1D-1.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question along with the required attachment as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	

You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.
Select 'Yes' or 'No' in the chart below to indicate how your CoC reviewed, rated, and ranked project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 50 percent of the total available points were based on objective criteria to review, rate, and rank project applications.	Yes
3.	At least 25 percent of the total available points were based on system performance measures to review, select and rate project applications.	Yes
4.	Considered returns to homelessness in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
5.	Considered employment income in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
6.	Considered supportive service participation requirements in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes

1D-2.	New Proposals.	
	Does your CoC invite new proposals from entities that have not previously received funding, if such eligible entities exist?	Yes

1D-2a.	Web Posting of CoC-Approved Consolidated Application Before the CoC Program Competition Application Submission Deadline.	

	Enter the date your CoC posted all parts of the CoC-approved Consolidated Application on the CoC's website or partner's website–which included: 1. the CoC Application, and 2. Project Priority Listings.	09/29/2026

1D-2b.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on the Website.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/29/2026

1D-2c.	Local Competition Selection Results for All Projects.	
	You must upload the Local Competition Selection Results attachment to the 4A. Attachments Screen.	

	Does your attachment include: 1. Project Names, 2. Project Scores, 3. Project Rank, 4. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated, 5. Amount Requested from HUD, and 6. Reallocated Funds +/-.	Yes

1D-2d.	Projects Rejected/Reduced–Notification Outside of e-snaps.	

1.	Did your CoC reject or reduce any project application(s) submitted for funding during its local competition?	Yes
2.	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.	09/22/2026
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes

1D-2e.	Projects Accepted–Notification Outside of e-snaps.	

	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.	09/22/2026

1D-3.	Reallocation–Reviewing Performance of Existing Projects.	

	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

The CoC's non-conflicted Project Review Committee annually evaluates all CoC renewal projects for potential reallocation based on system performance, utilization rates, cost efficiency, and spending, using data from HMIS, HDX 2.0, and SAGE. During the NOFO competition, the Committee scores new and renewal projects using the CoC-approved renewal project scoring tools, then identifies renewal projects for reallocation based on performance and the potential for new projects to perform better or address unmet system needs. The Committee's recommendations are reviewed and approved by a majority vote of non-conflicted CoC Governing Board members. In the FY 2026 CoC local grant competition, the Committee identified four renewal projects for full reallocation. The CoC Governing Board then voted to approve the full reallocation of all four projects.

1D-3a.	Reallocation Between FY 2021 and FY 2026.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2021 and FY 2026?	Yes

2A. Homeless Management Information System (HMIS) and System Performance

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; 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.(limit 75 characters)	Coehlo Consulting

2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC

2A-3.	PIT Count–Methodology Change.	

	Describe:
1.	any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2025 and 2026, if applicable, and
2.	how the changes affected your CoC's PIT count results.

(limit 2,500 characters)

No changes were made to the unsheltered PIT count implementation between 2025 and 2026.

2A-4. Reduce Encampments—Actions to Reduce Encampments.

Describe in the field below the actions your CoC took to reduce the number of encampments or the number of people residing in encampments during your evaluation period.

(limit 2,500 characters)

Few encampments exist in the County because municipal police departments require individuals to vacate any encampment fairly quickly. However, the CoC and Mental Health Partnerships (MHP) - the contracted street outreach provider – along with MVP Recovery – a behavioral health and substance use treatment provider - are contacted by police and other emergency services personnel when they identify individuals residing outside either on the street or in a tent often with whom emergency personnel have frequent contact. MHP's Outreach Team responds to the identified location and works collaboratively with the first responder to assess the individual's immediate needs. Depending on the situation, staff may assist with Coordinated Entry, provide transportation to an appropriate service provider or facility, or help facilitate placement in an available shelter. In addition to shelter referrals, staff provide individuals with information and access to community-based resources that can address the underlying need contributing to continued homelessness.

These resources include providers offering substance use treatment, medical care, mental health services, housing assistance, financial support, and veteran-specific services. By connecting individuals to a broader network of supports, the MHP Delco Outreach Team works to reduce barriers to shelter and housing, promote greater stability, and decrease the likelihood that individuals will remain in or return to encampments.

The CoC continues to partner to identify individuals living outside and partnerships to locate them and connect them to services.

2A-4a.	Reduce Encampments—Number of Encampments.	

1. Enter the estimated number of encampments in the beginning of your evaluation period.	0
2. Enter the reduction in the number of encampments during your evaluation period.	0

2A-4b.	Reduce Encampments—Number of People in Encampments.	

1. Enter the estimated number of people in encampments in the beginning of your evaluation period.	0
2. Enter the reduction in the number of people in encampments during your evaluation period.	0

2A-4c.	Reduce Encampments—Plans to Reduce Encampments.

If there has been no reduction in encampments or persons in encampments in your CoC, describe the plans your CoC has to participate in efforts to reduce these numbers.

(limit 2,500 characters)

There are currently no known encampments identified by either CoC partners or local police departments. Few encampments exist in the County because municipal police departments require individuals to vacate fairly quickly when they identify one. However, the CoC has a policy which outlines the response we will take when an encampment is identified.

Addressing encampments requires multi-sector, cross-system partnerships and collaboration. The CoC will utilize its existing homeless outreach provider – MHP – along with other partners to contact individuals residing in a tent or an encampment including those identified by local police departments. The CoC has a strong partnership with Upper Darby Police Department – the largest municipal police department in the County – and is working to strengthen partnerships with other area police departments.

If an encampment is identified in the future, the outreach team, CoC lead agency, police, and other partners will assess the extent of public health and safety concerns and demographics and vulnerability of the population. The purpose is to put in place protocols to address any safety risks for all involved.

Then the team will conduct intensive and consistent outreach and engagement to individuals. The team will connect individuals to needed services via warm hand offs to providers of physical and behavioral health treatment, substance use treatment, shelter, housing, and other social services.

The CoC will also work with the owners of the area where the encampment is to ensure clear notification that individuals will be asked to move out of the encampment by a specific date. Finally, data will be collected to understand the outcomes for the individuals residing in the encampment and will be used to improve future responses.

2A-5. Reducing the Number of First Time Homeless–CoC's Plan.

Describe your CoC's plan to decrease the number of individuals and families becoming homeless for the first time.

(limit 2,500 characters)

The CoC is actively developing and implementing homelessness prevention and diversion programs funded with state, local, and private resources. The CoC recently secured a grant from the Federal Reserve Bank of Pittsburgh to implement a shallow rent subsidy program for formerly homeless households and those on the brink of homelessness due to living on a fixed income, including seniors and people with disabilities.

Eviction is a common driver into homelessness for individuals and families that may be able to remain in their home if there were greater availability of case management, mediation between the landlord and tenant, along with some rental assistance funds for arrears. The CoC has recently seen an expansion in eviction prevention services available through an agency represented on the CoC Board – the Housing Opportunities Program for Equity (HOPE) operated by Family Village affiliated with the Foundation of Delaware County. They secured a large corporate donation to expand this program. HOPE offers support that includes: education on financial issues, such as how to review leases, and help creating a budget; advice on how to negotiate and advocate for yourself with landlords; financial support to help cover part of a security deposit, rent, or utility bill.

In addition, the Community Action Agency of Delaware County (CAADC) – a main coordinated entry site – attempts to divert individuals and families from shelter especially when no additional shelter beds are available. CAADC counsels individuals and families on their options for a place to sleep that night to include reconnecting with family or friends and transportation assistance. Shelter diversion is a critical component of our system both for a lack of shelter resources to meet the demand along with an interest in ensuring availability for those that are truly without any place to sleep that night. The CoC will work with providers to expand the availability of shelter diversion and housing problem-solving diversion strategies in the Coordinated Entry intake process.

Finally, the CoC is re-training its members to help clients access public benefits, including Medicaid, Medicare, SSI, SNAP, and others, and to connect them to work and volunteer opportunities to meet new work requirements for Medicaid and SNAP.

2A-6. Reducing Length of Time Homeless–CoC's Plan.

Describe your CoC's plan to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

The CoC will be identifying new methods of engaging and incentivizing landlords to accept housing subsidies by ensuring that landlord engagement focuses on the business interests of landlords and identifies ways to improve the process for landlords themselves. Business interests for landlords include ensuring that rent is paid and paid on time through the availability of the housing subsidy. It also includes landlords receiving assistance from service providers if there are any challenges with the tenants. Landlords are often incentivized to accept subsidies when they understand these benefits to them and their business. Our goal is to decrease the length of time that it takes to find housing by expanding the pool of landlords willing to work with subsidy programs along with ensuring a seamless connection to case management and other services to help individuals remain housed once they find a landlord to accept them. The County as the lead agency for the CoC also employs a housing locator who convenes a meeting of CoC wide housing locators to help coordinate across housing programs.

The CoC lead agency is the Dept of Human Services where the Offices of Mental Health, Drug and Alcohol Programs, Children and Youth Services, and County Office of Services for the Aging all reside. Coordination between agencies for referrals to specialized programs including mental health and substance use treatment has always been strong and streamlined. It will continue to be a priority to help address underlying issues that may be contributing to homelessness.

The CoC is in the process of creating an initiative to assist service providers with providing case management and other services to help participants increase their income. Our goal is to increase participant employment and income growth both through improving their access to benefits such as TANF and veterans benefits along with a renewed focus on partnering with employers and workforce development providers.

2A-7.	**Successful Permanent Housing Placement–Exits to Unsubsidized Housing.**	

Based on HMIS data, what percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing?	36.12%

Describe how you calculated the data for this response.

(limit 2,500 characters)

The CoC calculated the percentage of successful permanent housing placements resulting in exits to unsubsidized housing using data from the Homeless Management Information System (HMIS) for the reporting period.

The numerator represents the number of individuals who exited participating projects to permanent housing destinations that do not include an ongoing housing subsidy. The denominator represents the total number of individuals who exited the applicable projects during the reporting period.

HMIS exit destination data were reviewed to identify individuals exiting to permanent housing without a subsidy, including rental housing without an ongoing subsidy and other qualifying unsubsidized permanent housing destinations.

The percentage was calculated by dividing the number of individuals exiting to unsubsidized permanent housing by the total number of individuals who exited the applicable projects and multiplying by 100.

There were 230 exits to unsubsidized housing among 637 Leavers in the time period.

2A-8.	Housing Inventory Count (HIC) and Point-in-Time (PIT) Count Date.	

	Enter the date your CoC conducted its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count.	04/30/2026

2A-8a.	HIC and PIT Count Data–HDX 2.0 Submission Date.	

	Did your CoC submit its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count data in HDX 2.0 by April 30, 2026, 8:00 p.m. EDT?	Yes

2A-8b.	Longitudinal System Analysis (LSA) Data–HDX 2.0 Submission Date.	
	You must upload your CoC's FY 2026 HDX Competition Report to the 4A. Attachments Screen.	

	Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 16, 2026, 11:59 p.m. EST?	Yes

2A-8c.	System Performance Measures (SPM) Data–HDX 2.0 Submission Date.	

	Did your CoC submit its FY 2025 System Performance Measures data in HDX 2.0 by March 4, 2026, 8:00 p.m. EDT?	Yes

2A-9.	HMIS and Comparable Database Participation—Bed Coverage Rate.	

Using the FY 2026 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds	Adjusted Total Year-Round, Current VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
1. Emergency Shelter (ES) beds	221	35	232	91.00%
2. Safe Haven (SH) beds	0	0	0	100.00%
3. Transitional Housing (TH) beds	78	0	42	53.85%
4. Rapid Re-Housing (RRH) beds	222	42	264	100.00%
5. Permanent Supportive Housing (PSH) beds	300	0	220	73.33%
6. Other Permanent Housing (OPH) beds	0	0	0	100.00%

2A-9a.	Partial Credit for Bed Coverage Rates of 84.99 Percent or Lower for Any Project Type in Question 2A-9.	

	For each project type with a bed coverage rate that is 84.99 percent or lower in question 2A-9, 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)

Both transitional housing and permanent supportive housing have a bed coverage rate below 84.99 percent. Here are the actions the CoC will take to improve coverage.

Any homeless service providers that do not receive CoC funding but do receive County local, state, and federal funding are required to participate in HMIS. The County will add to its funding applications that providers that have previously participated in HMIS but were not required to do so will receive additional points on their funding applications for County administered resources outside of CoC funding.

In addition, we will meet individually with all providers not currently participating in HMIS to understand their barriers in doing so. If it is because they do not believe they have adequate staff, we will explore options where the CoC lead agency and CoC HMIS agency can help remediate this burden. We will explain the purpose of entering data into HMIS and the importance of it in case the reason is that they are unaware of the importance of entering data. In addition, we will explore training needs to help remove their barriers to entering data into HMIS. The main permanent supportive housing provider not entering data into HMIS is the one with HUD VASH vouchers which does not require HMIS participation. Still, we will engage the provider on the reason to enter data into HMIS and explore their barriers to doing so.

The County Dept of Human Services as the Collaborative Applicant and HMIS Lead is dedicating HMIS staff time this year to engaging non-HMIS participating housing providers to encourage them to use it for program and client data management.

3A. Policy Initiatives

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

3A-1.	**Supporting Activities within an Opportunity Zone.**	
	You must upload the HUD-2996 Certification for Opportunity Zone Preference Points attachment to the 4A. Attachments Screen.	

1.	**Will the proposed activities/projects occur within Opportunity Zone Census Tracts?**	Yes
2.	**Do you expect to use at least 50% of the proposed activities/projects in Opportunity Zones Census Tracts?**	Yes

3A-2	**Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.**

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

4A. Attachments Screen For All Application Questions

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

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

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

Document Type	Required?	Document Description	Date Attached
01. 1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment	Yes	PA-502 CoC FY 202...	09/29/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	PA-502 CoC FY 202...	09/29/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	PA-502 CoC FY 202...	09/29/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	PA-502 CoC FY 202...	09/29/2026
05. 1D-1. Local Competition Scoring Tool	Yes	PA-502 CoC FY 202...	09/29/2026

06. 1D-2c. Local Competition Selection Results	Yes	PA-502 CoC FY 202...	09/29/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	PA-502 CoC FY 202...	09/29/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No	PA-502 CoC FY 202...	09/29/2026
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No		
11. Other	No	PA-502 CoC FY 202...	09/29/2026

Attachment Details

Document Description: PA-502 CoC FY 2026 PA-502 CoC FY 2026 List of TH RRH PSH Projects and Treatment Providers with On-Site Substance Use Treatment

Attachment Details

Document Description: PA-502 CoC FY 2026 List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment

Attachment Details

Document Description: PA-502 CoC FY 2026 Language from Project Supportive Service Agreements

Attachment Details

Document Description: PA-502 CoC FY 2026 Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety

Attachment Details

Document Description: PA-502 CoC FY 2026 Local Competition Scoring Tool

Attachment Details

Document Description: PA-502 CoC FY 2026 Continuum of Care Program Local Competition Selection Results

Attachment Details

Document Description: PA-502 CoC FY 2026 HDX Competition Report

Attachment Details

Document Description: PA-502 CoC FY 2026 HUD-2996 Certification for Opportunity Zone Preference Points

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: PA-502 CoC FY 2026 Merakey Letter of Support

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/27/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/29/2026
1C. Coordination and Engagement	09/29/2026
1D. Project Review/Ranking	09/29/2026
2A. HMIS Implementation	09/29/2026
3A. Policy Initiatives	09/29/2026
4A. Attachments Screen	09/29/2026
Submission Summary	No Input Required

PA-502 CoC FY 2026 PA-502 CoC FY 2026 List of TH RRH PSH Projects and Treatment Providers with On-Site Substance Use Treatment

CoC Program Projects	Treatment Provider(s)
Delco FY2026 TH	Mental Health Partnerships
FCSDC-RMH-TH	MVP Recovery
SELF Transitional Housing	MVP Recovery and Recovery Works
Transitional Housing - CAADC	MVP Recovery and Recovery Works

PA-502 CoC FY 2026 List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment

CoC Program Projects	Number of Units that require Substance Abuse Treatment
FCSDC-PSH-CH	5
FCSDC-PSH-FAM	5
Horizon House PSH CH	11
S + C 67	20
Salvation Army Chester Consolidated PSH	10
SHP Reallocation Project	8
TOTAL UNITS	**59**

SELF INC.
STRENGTHENING AND EMPOWERING LIVES AND FUTURES

DELCO House - Transitional Housing

Participant Agreement

Effective Date: _____

Participant Name: _____

Unit Address: _____ Room Number (if applicable): _____

Program Residency Start Date: _____ | End Date: _____

1. Purpose and Service Overview

This Participant Agreement ("Agreement") is between SELF, Inc., located at 1500 Walnut Street, Suite 300, Philadelphia, PA 19107, and the above-named Participant, who is being provided safe, stable, and supportive housing through the DELCO House transitional housing program.

The purpose of this Agreement is to clarify the terms, expectations, and responsibilities associated with the Participant's engagement in SELF, Inc.'s supportive housing program. This is not a lease and does not establish tenancy under Pennsylvania landlord-tenant law. Instead, it affirms mutual accountability and cooperation to support housing stability, service connection, and personal progress. At the conclusion of the trial period, if the participant has demonstrated a willingness to engage respectfully and safely, a continuation of the agreement will be offered for an extended term under the conditions below

The social services offered through DELCO House form a structured, youth-centered system designed to strengthen housing stability, promote recovery, and build long-term self-sufficiency. Participants are introduced to all available services during intake, orientation, and early meetings with their Housing Navigator, where information is reviewed in clear terms and reinforced through written materials, posted notices, and individualized service plans. This ensures that youth understand what agency and community supports are available, how to access them, and how those services relate to their housing goals.

3. Program Participation and Unit Use

The Participant may use the assigned room/unit solely as a personal residence during active participation in the program. Only the Participant may reside in the assigned unit. Allowing guests or others to stay overnight or live in the unit is a violation of this agreement.

4. Term and Continuation

Following a successful trial period, the Participant Agreement continues for a term of 12 months, with automatic month-to-month renewal contingent on:

- Continued compliance with program expectations
- Active participation in coaching and check-ins
- No serious violations of health, safety, or community conduct standards.
- SELF, Inc. may modify or terminate this agreement with 60 days' notice for Programmatic reasons or with immediate effect if serious safety risks or community disruptions occur

5. Services and Expectations

As a participant in the program, you agree to engage in a minimum of 20 hours a week of good faith engagement with services and in furtherance of your housing stabilization goals. The 20 hour a week minimum service engagement can be fulfilled through, but not limited to:

- Monthly meetings with Housing Navigators for health, safety, housing stabilization, and unit maintenance
- Participation in community meetings and/or scheduled life skills seminars
- Engagement with the Job Developer
- Follow through and follow up with community linkages and referrals to address identified needs
- Participation in community meetings and check-ins
- Respectful use of the space and shared areas
- Following house rules and guest policies

6. House Rules and Community Standards

The following rules are in place to ensure safety, dignity, and a peaceful shared environment. Violation may result in a behavioral contract, formal warnings, or exit from the program if unresolved.

Prohibited Conduct:

- Use, sale, or possession of illegal drugs, weapons, or stolen property
- Threats, physical violence, harassment, or property damage
- Unauthorized guests or overnight visitors
- Obstructing entry, altering locks, or refusing scheduled access
- Fire hazards (e.g., personal heaters, tampering with detectors)
- Smoking indoors (designated outdoor areas only)

Transitional Housing Guidelines:

- Clean up after cooking and eating
- No food storage in rooms
- Shared chores and respect for common spaces
- Personal belongings stored safely, not in hallways or exits
- Participants are engaged in monthly house meetings

7. Emergencies, Hospitalization, and Absences

Participants must inform staff of any absence of over 7 days. If no contact is made after 30 days, the unit may be considered abandoned, and belongings removed at SELF, Inc.'s discretion. In cases of incarceration or hospitalization exceeding 30 days, rehousing is not guaranteed. Support will be provided where possible, but units may be reassigned.

If a unit is reassigned due to absence, hospitalization, incarceration, or program exit, SELF, Inc. will make reasonable efforts to arrange for the retrieval of personal belongings 30 days from notice to the participant or their emergency contact. Items not claimed or arranged for pickup within this period will be considered abandoned and may be discarded, donated or otherwise disposed of at SELF, Inc.'s discretion. SELF, Inc. is not responsible for loss, damage, or replacement of unclaimed items

SELF INC.
STRENGTHENING AND EMPOWERING LIVES AND FUTURES

8. Health & Safety

All smoke alarms and carbon monoxide detectors must remain active. Fire exits must remain clear, and all participants must leave the building immediately during fire alarms.

As a program participant, you will be providing codes for submitting property work order requests. All participants are equally responsible for ensuring that the property is well-maintained and clean. Throughout your tenure in the DELCO House Transitional Housing Program, you agree to keep SELF, Inc. informed of any damage, accidents, or safety hazards.

9. Insurance and Liability

SELF, Inc. does not insure personal belongings. Participants are encouraged to purchase their own insurance. SELF, Inc. is not responsible for theft, loss, or damage of participant property.

10. Pets and Animals

No pets are allowed. Approved service animals must be licensed, trained, and under control at all times. Documentation from a licensed medical professional may be requested, as well as documentation of the animal's registry as a service animal.

11. Program Status and Non-Tenancy

This agreement is not a lease. The participant is not a tenant. Instead, this is a mutual agreement for program participation in a supportive housing environment. Withdrawal or disengagement from the program or from expectations may result in loss of housing access.

12. Documentation and Communication

As a participant in the DELCO House Transitional Housing Program, you hereby agree to:

- Work with SELF+ program staff in good faith and with mutual respect
- Keep income information up to date
- Forward all landlord or agency mail to SELF, Inc.
- Keep emergency contact and caseworker details current

- Peacefully and amicably leave the program upon discharge from the program

14. Full Agreement

This agreement represents the full understanding between the Participant and SELF, Inc. It may only be modified in writing by mutual agreement. A copy will be kept on file at SELF, Inc.

Signatures

SELF, Inc. Representative:

Name & Title: _____

Signature: _____

Date: _____

Participant Name: _____

Signature: _____

Date: _____

Last, First Participant's Name:_____ DOB: _____

HORIZON HOUSE, INC.
HUD SERVICE AGREEMENT

By signing this Service Agreement, I _____, acknowledge that it describes the partnership between Horizon House and me while I participate in one of its HUD-funded supportive housing programs. I understand that the goal of these services is to help me maintain stable housing while supporting my recovery, wellness, independence, and achievement of my personal goals.

HORIZON HOUSE WILL:	**I WILL:**
Treat you with dignity, respect, and compassion.	Work collaboratively with Horizon House staff.
Provide recovery-oriented, person-centered supportive services.	Participate in developing and updating my individualized service plan.
Assist you in maintaining safe and stable housing.	Attend scheduled meetings and appointments whenever possible or notify staff if I am unable to attend.
Work collaboratively with you to develop an individualized service plan based on your strengths, needs, preferences, and goals.	Communicate openly regarding my needs, goals, and concerns.
Provide or coordinate supportive services that may include: ➢ Case management ➢ Benefits assistance ➢ Employment and educational supports ➢ Healthcare coordination ➢ Mental health and substance use recovery supports ➢ Independent living skills ➢ Budgeting and financial literacy ➢ Community integration and social supports ➢ Transportation planning and resource coordination	Notify Horizon House of significant changes that may affect my participation in services, including: ➢ Changes in address ➢ Changes in phone number ➢ Hospitalization ➢ Changes in income or benefits (when applicable) ➢ Changes affecting housing stability or service needs.
Respect your privacy and confidentiality in accordance with applicable federal and state laws.	Treat staff, neighbors, landlords, and other participants with dignity and respect.
Inform you of your rights, grievance procedures, and available community resources.	Comply with the terms and conditions of my lease and applicable housing rules established by my landlord or housing provider.
Review your progress with you and revise your service plan as your needs change.	Notify Horizon House if I experience a housing crisis or need assistance maintaining my housing.

PARTICIPATION IN SUPPORTIVE SERVICES

I understand that participation in supportive services is an important component of this HUD-funded housing program.

I agree to actively participate in approximately 20 hours of supportive services each week, or as otherwise identified through my individualized service plan and program requirements, to support my housing stability, recovery, health, employment, education, independent living, and community integration.

Supportive service activities may include individual meetings, groups, employment services, educational activities, medical or behavioral health appointments, skill-building activities, community integration, and other services identified in my individualized service plan.

If circumstances prevent me from participating as planned, I agree to communicate with my assigned staff so that services may be adjusted to meet my needs.

SERVICE PLANNING AND HOUSING STABILITY

Horizon House and I agree to work together to promote long-term housing stability and successful community living.

My individualized service plan will identify goals that are meaningful to me and may include housing stability, physical and behavioral health, recovery, employment, education, financial stability, independent living skills, family relationships, or community participation.

Progress toward these goals will be reviewed periodically and updated as needed.

ACKNOWLEDGEMENT

I acknowledge that:

- I have had the opportunity to ask questions regarding this Service Agreement.
- The contents of this agreement have been explained in a manner I understand.
- I have received information regarding participant rights, confidentiality, and the grievance process.
- I understand that this Service Agreement is separate from my lease and does not alter my tenancy rights.
- I understand my responsibilities regarding participation in supportive services.

_____ Date:_____
Participant's Signature

_____ Date:_____
Staff Signature/Credential/Title

OFFICE OF THE DISTRICT ATTORNEY
DELAWARE COUNTY COURTHOUSE
MEDIA, PENNSYLVANIA 19063

(610) 891-4168

TANNER ROUSE
DISTRICT ATTORNEY

September 24, 2026

To Whom it May Concern:

The Delaware County Office of the District Attorney is pleased to support the Department of Human Services, Office of Adult and Family Services, in applying for the PA 502 Continuum of Care Local Competition, as required by the U.S. Department of Housing and Urban Development (HUD).

The Delaware County Office of the District Attorney facilitates the Law Enforcement Treatment Initiative (LETI), which works to divert individuals with substance use disorders from the criminal justice system and connect them with treatment and supportive services. LETI is an important component of Delaware County's efforts to reduce illicit drug use in our communities, address substance use disorders and promote safer and healthier neighborhoods.

Stable housing is a critical part of successful treatment and recovery. Individuals experiencing homelessness often face significant barriers to accessing treatment and achieving long-term stability. Housing resources provided through the Continuum of Care will strengthen the LETI model by helping individuals who are diverted into treatment establish stable living environments and reduce the likelihood of continued substance use and justice-system involvement.

The District Attorney's Office supports this grant application and the continued collaboration among law enforcement, human services, treatment providers, and housing partners to expand the effectiveness of LETI and help reduce the public impact of illicit drug use throughout Delaware County.

Sincerely,

/s/Tanner Rouse
Tanner Rouse
District Attorney

PA-502 Continuum of Care / Delaware County DHS Encampment Policy

Our goal is to ensure everyone who lives, works, learns, and invests in Delaware County has equal opportunity to live in an affordable home and a thriving community. When that opportunity is out of reach for some and they become unhoused, we want to ensure our citizens are treated with the dignity and respect every person should enjoy as we work together as a community to get people rehoused. If a municipality or private property owner deems it necessary to close an encampment, we strongly advise that they follow our recommendations for encampment outreach and engagement of individuals to ensure connections to services as well as the removal of personal items, tents, and other structures.

The core components of an effective, trauma-informed, person-centered, engagement driven, and safe encampment response are: Assessment Outreach & Engagement Resource Connection Clearance Follow-up. These components and additional features are described in this practice guidelines document and are based on effective local and national strategies to address homelessness. They are meant to supplement, not supplant, existing laws, regulations, or policies.

1. Establish a Team: Addressing encampments requires multi-sector, cross-system partnerships, and collaboration. It is recommended that an Outreach Team be established which includes those who have the necessary expertise to address all facets of outreach and encampment response and that a clear and consistent communication structure be put in place. Though certainly not exhaustive, below are some areas of expertise for consideration when developing a team:

a. Homeless outreach and engagement

b. Physical and behavioral health

c. Housing and shelter

d. Social services

e. Waste, trash, and biohazard removal

f. Transportation

g. Legal consultation

h. Law enforcement

i. Project Management

2. Assessment: Conduct an initial assessment of the encampment to determine: 1) the geographic boundaries of the encampment; 2) Whether the encampment is an Obstruction

or Hazardous Encampment; 3) the extent of any public health or other safety concerns; 4) the extent of any infrastructure concerns; and 5) the demographics and vulnerability of the population. Protocols should be put in place to address any safety risks for all involved.

3. **Comprehensive Outreach & Engagement**: Intensive, consistent outreach and engagement is critical throughout all phases of the encampment response. This consists of a combination of physical and behavioral health treatment, social services, and access to an array of low-barrier housing and shelter options. Warm hand-offs to service providers and resources increases the likelihood of engagement.

4. Notification: Clear notifications should be given to occupants of the encampment prior to and after any action taken. Written notice should include, at minimum, the date, location, and time any action is to occur, resources for assistance, and be posted in and around the encampment. Notices should be in plain language and printed in English, Spanish and/or any other languages assessed to be needed to inform encampment occupants. In cases where obstructions or hazards are present and immediate action must be taken due to safety issues; oral notice may be sufficient. If items are to be removed from the encampment site, the types of items to be removed should be clearly defined in the written notice.

5. **Storage**: Assessment should include a definition and inventory of items that are considered personal property or belongings vs. hazardous materials, abandoned items, or debris. With the exception of immediate hazards or obstructions, it is strongly recommended that sufficient time be given for encamped individuals to gather their belongings (e.g., 30 days). Examples of personal belongings/property include tents, cooking equipment, (sanitary/not infested) sleeping bags and blankets, clothing, vital documents or files (e.g. IDs, military paperwork, medical records). Storage may be provided when sufficient time can't be offered and should be free of cost for those who request it.

Depending upon the location of the storage facility, transportation may need to be provided. Best efforts should be made to return any personal belongings/property not stored by individuals.

Examples of items that have been determined to be Personal Belongings include but are not limited to medicine, clothing, backpacks, hand-held tools, vital documents, cooking utensils, folding carts that are personally owned by an individual.

6. Documentation: It is recommended that documentation of all activities be maintained. Documentation may include pictures, videos, and written information.

7. Timelines: Based on assessment, reasonable timelines should be established for all encampment response activities with flexibility for immediate removal of hazards and obstructions that pose risks to safety and well-being of encampment occupants and the community. Depending upon the size of the encampment, it is not unusual to allow several weeks (e.g. 4-8 weeks) for assessment, outreach, engagement, removal and follow-up activities. It is important to adhere to posted timelines. 4

8. Closure and Follow-up: Periodic surveillance of the area may be needed once the encampment response has been completed. It is helpful to work with outreach providers to ascertain the status of everyone that was previously residing in the encampment area. It is advisable that the information collected from Outreach be inputted into the Delaware County HMIS database for follow- up support with services. Follow-up report information may include:

a. Dates of Outreach

b. Total # of individuals in the encampment

c. # of individuals contacted

d. # of individuals rejecting services

e. Types of services rejected and reasons

f. # of individuals accepting services

g. Types of services accepted

h. For each service accepted, # of individuals confirmed to have engaged with the resource within 7 days of completion of encampment activities

i. identifying information such as name, DOB, ss# if individual consents

PA-502 Continuum of Care / Delaware County DHS Advancing Recovery By Prohibiting Illicit Drug Use Policy

Policy Statement: PA-502 Continuum of Care and Delaware County DHS providers shall not knowingly permit, encourage, or facilitate activities that support or enable illicit drug use on organizational property, during organizational services, or through organizational resources.

All services shall be delivered using trauma-informed, person-centered, and recovery-oriented practices while maintaining accountability and safety.

Purpose: The purpose of this policy is to promote a safe, recovery-oriented environment by prohibiting behaviors that enable or facilitate the use, possession, distribution, or procurement of illicit drugs. The organization recognizes that substance use disorder is a treatable health condition and is committed to supporting recovery while maintaining clear boundaries that protect consumers, staff, visitors, and the community.

Protocol:

This policy applies to:

- All employees
- Volunteers
- Contractors
- Interns
- Consumers/participants
- Visitors
- Vendors while conducting business with the organization

A. Prohibited Drug Use Activities:

The following activities are prohibited:

- Providing, selling, purchasing, or distributing illicit drugs.
- Allowing organizational property to be used for drug use, storage, or distribution.
- Assisting another individual in obtaining illicit drugs.
- Providing money, transportation, or other assistance for the purpose of purchasing illicit drugs.
- Concealing, ignoring, or assisting in the concealment of illegal drug activity.
- Possessing drug paraphernalia intended for illicit drug use, unless specifically permitted by law and organizational policy.
- Threatening, coercing, or encouraging another person to use illicit substances.

PA-502 Continuum of Care / Delaware County DHS Advancing Recovery By Prohibiting Illicit Drug Use Policy

B. Recovery-Oriented Response

When staff become aware of suspected illicit drug activity, they shall:

1. Prioritize immediate safety.
2. Respond professionally without judgment.
3. Avoid confrontational or punitive interactions unless safety requires immediate intervention.
4. Offer recovery supports and referrals.
5. Encourage voluntary engagement in treatment.
6. Notify appropriate supervisory staff.
7. Document observations factually and objectively.

C. Consumer Support

Consumers identified as struggling with substance use shall be offered, when appropriate:

- Screening and assessment
- Referral to substance use treatment
- Medication-assisted treatment resources
- Peer recovery services
- Crisis intervention
- Behavioral health counseling
- Case management
- Community recovery supports

D. Staff Responsibilities

Employees are responsible for:

- Maintaining professional boundaries.
- Reporting suspected violations immediately.
- Protecting confidential information consistent with applicable laws.
- Completing required incident documentation.
- Participating in required training
- Utilizing intervention strategies to engage individuals in treatment and recovery supports as applicable
- Supporting individuals in recovery

Employees shall not transport, purchase, store, or handle illicit drugs and/or drug paraphernalia on behalf of consumers/participants.

Supervisors shall:

- Ensure consistent enforcement of this policy.
- Review all reported incidents.
- Coordinate appropriate responses.
- Ensure consumers receive appropriate referrals.
- Provide staff coaching and corrective action when necessary.

E. Incident Documentation

Documentation should include:

- Date and time
- Location
- Objective observations
- Individuals involved
- Actions taken
- Referrals offered
- Safety concerns
- Follow-up actions

Documentation shall avoid assumptions or conclusions regarding criminal conduct unless confirmed by law enforcement.

F. Consumer Expectations

Consumers are expected to:

- Refrain from possessing or using illicit drugs while participating in organizational programs.
- Respect staff instructions regarding safety.
- Participate in recovery planning when appropriate.
- Report safety concerns.

G. Violations

Violations of this policy may result in actions including:

- Verbal intervention
- Behavioral agreements
- Increased supervision
- Referral to treatment

- Temporary suspension of services when permitted by program requirements
- Discharge from services when appropriate and consistent with applicable regulations
- Notification of law enforcement when required by law or when necessary to protect health and safety

Whenever feasible, responses should emphasize engagement in treatment before termination of services.

H. Training

All employees shall receive training upon hire and annually thereafter on:

- Recovery-oriented care
- Professional boundaries
- Trauma-informed practices
- Substance use disorder awareness
- Incident reporting
- De-escalation techniques
- Naloxone awareness (if applicable) and Naloxone training
- Organizational safety procedures

I. Non-Retaliation

Individuals who report suspected policy violations in good faith shall not be subject to retaliation.

J. Review

This policy shall be reviewed at least annually and revised as necessary to remain consistent with applicable federal, state, and local laws, licensing requirements, accreditation standards, and organizational best practices.

PA-502 CoC FY 2026 Continuum of Care Grant Local Competition Scoring Tool: Renewal Project Scorecard			
Maximum Project Score: 100 [Objective Criteria: Up to 60 Points (60%) + System Performance Criteria: Up to 40 Points (40%)]			
Applicant:			
Project Name:			
Project Component:			
Project Type:			
Renewal Amount:			
HMIS Data Date Range:	10.01.24 - 09.30.25		
THRESHOLD REQUIREMENTS	**MEETS THRESHOLD**		
Complete new or renewal project application and all required attachments submitted in e-snaps as a draft by local competition due date and time.	Yes		
Applicant is eligible per the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11381–11389) (the Act), 24 CFR 578.15, 24 CFR 5.100.	Yes		
Project is an eligible project type in the FY2026 NOFO and the local CoC Competition.	Yes		
Project is an eligible project component in the FY2026 NOFO and the local CoC Competition.	Yes		
The population to be served must meet program eligibility requirements as described in the Act, the CoC Program Rule found in 24 CFR part 578 (the Rule), and section III.G.11 of the FY26 NOFO.	Yes		
Applicant has no outstanding, unresolved judgments against them for violations of civil rights laws.	Yes		
Applicant and subrecipients demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and the capacity to administer federal funds.	Yes		
The project applicant will not engage in illegal racial discrimination consistent with the requirements of 2 CFR 200.300(a).	Yes		
The project applicant will not operate drug injection sites or "safe consumption sites" in violation of 21 U.S.C. 856(a)(1), knowingly permit the use or distribution of illicit drugs on property under their control in violation of 21 U.S.C. 856(a)(2), or knowingly distribute drug paraphernalia in violation of 21 U.S.C. 863 consistent with the objectives outlined in Section III.B of the FY2026 NOFO and consistent with the requirements of 2 CFR 200.300(a).	Yes		
Applicant will accept 100% of project referrals from the CoC Coordinated Entry System.	Yes		
Applicant will maintain accurate and timely project client data in the CoC Homeless Management Information System (HMIS) or a HMIS Comparable Database.	Yes		
Applicant has demonstrated the minimum 25% match requirement (minus leasing costs).	Yes		
Project applications that do not meet all threshold requirements are ineligible and will be automatically rejected.			
PROJECT SCORING FACTOR (DATA SOURCE/CALCULATION)	**POINT SCALE**	**PROJECT OUTCOME**	**POINTS AWARDED**
Objective Criteria: Up to 60 Points (60%)			
Bed and Unit Inventory and Utilization: Average Utilization Rate (SAGE).	100% = 5 Points 95-99% = 4 Points 90-94% = 3 Points <90% = 0 Points		
Cost Effectiveness: Percent of Funds Drawn During the Most Recent Complete Grant Term (SAGE).	100% = 5 Points 97-99% = 3 Points 95-96% = 1 Point >95% = 0 Points		

Data Quality: Universal Data Elements Error Rate (APR Q06b).	0% = 5 Points 1-5% = 3 Points >5% = 0 Points		
Data Quality: Income and Housing Data Quality Error Rate (APR Q06c).	0% = 5 Points 1-5% = 3 Points >5% = 0 Points		
Data Quality: Chronic Homelessness (APR Q06d).	0% = 5 Points 1-5% = 3 Points >5% = 0 Points		
Data Quality: Timeliness (APR Q06e; Time For Record Entry Zero Days or Less).	100% = 5 Points 95-99% = 3 Points >95% = 0 Points		
Coordinated Entry: Percent Of Clients Enrolled Through Referrals From Coordinated Entry (HMIS).	100% = 5 Points 90-99% = 4 Points 75-89% = 3 Points <75% = 0 Points		
Priority Populations Served: The Project Serves Families With Children (APR Q05a).	Yes = 5 Points No = 0 Points		
Priority Populations Served: The Project Serves Chronically Homeless Persons (APR Q05a).	Yes = 5 Points No = 0 Points		
Priority Populations Served: The Project Serves People In Recovery From Substance Use Disorder (Project Application).	Yes = 5 Points No = 0 Points		
Priority Populations Served: The Project Serves People With Physical Or Developmental Disabilities (APR Q13a1).	Yes = 5 Points No = 0 Points		
Priority Populations Served: The project serves people With a History of Domestic Violence, Sexual Assault, Dating Violence, Stalking, or Human Trafficking (APR Q14a).	Yes = 5 Points No = 0 Points		
Subtotal			**0**
System Performance Criteria: Up to 40 Points (40%)			
Returns to Homelessness: Percent Of Participants Who Returned To Homelessness Within 12 Months Of Exit To A Permanent Housing Destination (SPM Measure 2a). *A project with no exits receives full points.*	0% = 10 Points 1-5% = 7 Points 6-9% = 5 Points 10-14% = 3 Points >15% = 0 Points		
Length of Time Homeless: Length of Time between Project Start Date and Housing Move-in Date (APR Q22c). *A project with no start dates in the last grant period receives full points.*	30 days or less = 10 Points 31-44 days = 7 Points 45-60 days = 5 Points 61-90 days = 3 Points 91 days or more = 0 Points		
Exits to Permanent Housing: Percentage Of Participants Who Either Remained In The Project Or Exited To A Permanent Housing Destination During The Reporting Period (APR Q5a, Q23c).	100% = 10 Points 95-99% = 7 Points 90-94% = 5 Points 80-89% = 3 Points <80% = 0 Points		

New or Increased Cash Income for Stayers: Percentage of Adults Who Adults Who Gained or Increased Earned or Other Cash Income from Start to Annual Assessment (APR Q19a1). *A project with no adult stayers who were in project for at least 365 days receives full points.*	91-100% = 5 Points 81-90% = 4 Points 71-80% = 3 Points 61-70% = 2 Points 51-60% = 1 Point <51% = 0 Points		
New or Increased Cash Income for Leavers: Percentage of Adults Who Adults Who Gained or Increased Earned or Other Cash Income from Start to Exit (APR Q19a2). *A project with no adult leavers who were in project for at least 365 days receives full points.*	91-100% = 5 Points 81-90% = 4 Points 71-80% = 3 Points 61-70% = 2 Points 51-60% = 1 Point <51% = 0 Points		
Subtotal			**0**
PROJECT SCORE (Out of 100 Maximum Points)			**0**
Revised 07.28.26			

PA-502 CoC FY 2026 Continuum of Care Grant Local Competition Scoring Tool: New Project Scorecard			
Maximum Project Score: 100 [Objective Criteria: Up to 65 Points (65%) + System Performance Criteria: Up to 35 Points (35%)]			
Applicant:			
Project Name:			
Project Component:			
Project Type:			
CoC Funding Request:			
THRESHOLD REQUIREMENTS	**MEETS THRESHOLD**		
Complete new or renewal project application and all required attachments submitted in e-snaps as a draft by local competition due date and time.	Yes		
Applicant is eligible per the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11381–11389) (the Act), 24 CFR 578.15, 24 CFR 5.100.	Yes		
Project is an eligible project type in the FY2026 NOFO and the local CoC Competition.	Yes		
Project is an eligible project component in the FY2026 NOFO and the local CoC Competition.	Yes		
The population to be served must meet program eligibility requirements as described in the Act, the CoC Program Rule found in 24 CFR part 578 (the Rule), and section III.G.11 of the FY26 NOFO.	Yes		
Applicant has no outstanding, unresolved judgments against them for violations of civil rights laws.	Yes		
Applicant and subrecipients demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and the capacity to administer federal funds.	Yes		
The project applicant will not engage in illegal racial discrimination consistent with the requirements of 2 CFR 200.300(a).	Yes		
The project applicant will not operate drug injection sites or "safe consumption sites" in violation of 21 U.S.C. 856(a)(1), knowingly permit the use or distribution of illicit drugs on property under their control in violation of 21 U.S.C. 856(a)(2), or knowingly distribute drug paraphernalia in violation of 21 U.S.C. 863 consistent with the objectives outlined in Section III.B of the FY2026 NOFO and consistent with the requirements of 2 CFR 200.300(a).	Yes		
Applicant will accept 100% of project referrals from the CoC Coordinated Entry System.	Yes		
Applicant will maintain accurate and timely project client data in the CoC Homeless Management Information System (HMIS) or a HMIS Comparable Database.	Yes		
Applicant has demonstrated the minimum 25% match requirement (minus leasing costs).	Yes		
Project applications that do not meet all threshold requirements are ineligible and will be automatically rejected.			
PROJECT SCORING FACTOR (DATA SOURCE/CALCULATION)	**POINT SCALE**	**POINTS AWARDED**	**REVIEW COMMITTEE NOTES**
Objective Criteria: Up to 65 Points (65%)			
A. Project Design Aligned With HUD FY 2026 NOFO Priorities			

For New Transitional Housing Projects: - The project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing (i.e., case management, behavioral healthcare, employment training, etc.). - The applicant has prior experience operating transitional housing or other projects that have successfully helped homeless individuals and families exit homelessness within 24 months or has a plan in place to ensure homeless individuals and families will exit homelessness within 24 months. - The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to ensure that at least 50 percent of participants exit to a positive destination within 24 months and at least 50 percent of participants exit with employment income as reflected in HMIS or another data system used by the applicant. - The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP. - The project will assess the service needs of program participants, and provide individualized services for program participants as detailed in the NOFO. - The project will project will create service plans for each program participant as detailed in the NOFO. - Substance use treatment is available on-site. - The applicant has satisfactory capacity, drawdowns, and performance for existing grant(s) funded under the CoC Program, as evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of any monitoring findings; however, this does not apply to project applicants who have never received a CoC Program funded project.	Excellent Alignment = 35 Points Very Good Alignment = 25 Points Satisfactory Alignment = 15 Points Slight Alignment = 10 Points Unsatisfactory Alignment = 0 Points		
For New Supportive Services Only Street Outreach Projects: - The project is necessary to assist people in exiting homelessness, addressing barriers to stable housing (e.g., substance use disorder, unemployment, childcare, etc.) and increasing self-sufficiency. - The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP. - The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services. - The applicant has a history of, or a plan for, partnering with first responders and law enforcement to engage people living in places not meant for human habitation to access emergency shelter, treatment programs, reunification with family, transitional housing or independent living. The applicant must cooperate and not interfere or impede with the enforcement of local laws such as public camping and public drug use laws and assist/be willing to assist first responders in their efforts to engage homeless individuals. - The applicant has experience providing outreach services, or a plan for providing outreach services, consistent with the activity description at 24 CFR 578.53(e)(13) and has a plan for or has demonstrated effectiveness at helping people successfully exit from places not meant for human habitation to emergency shelter, treatment programs, transitional housing or permanent housing programs. - The applicant has satisfactory capacity, drawdowns, and performance for existing grant(s) funded under the CoC Program, as evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of any monitoring findings; however, this does not apply to project applicants who have never received a CoC Program funded project.	Excellent Alignment = 35 Points Very Good Alignment = 25 Points Satisfactory Alignment = 15 Points Slight Alignment = 10 Points Unsatisfactory Alignment = 0 Points		
For New Supportive Services Only Standalone Projects: - The project is necessary to assist people in exiting homelessness, addressing barriers to stable housing (e.g., substance use disorder, unemployment, childcare, etc.) and increasing self-sufficiency and the Recipient will conduct an annual assessment of the service needs of the program participants. - The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services. - The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP. - The applicant has satisfactory capacity, drawdowns, and performance for existing grant(s) funded under the CoC Program, as evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of any monitoring findings; however, this does not apply to project applicants who have never received a CoC Program funded project.	Excellent Alignment = 35 Points Very Good Alignment = 25 Points Satisfactory Alignment = 15 Points Slight Alignment = 10 Points Unsatisfactory Alignment = 0 Points		

For New Supportive Services Only Coordinated Entry Projects: - The Coordinated Entry system is easily available and reachable for all persons within the CoC's geographic area who are seeking homelessness assistance. The system must also be accessible for persons with disabilities within the CoC's geographic area. – There is a strategy for advertising that is designed specifically to reach households experiencing homelessness with the highest needs. - There is a standardized assessment process. - The project will ensure program participants are directed to appropriate housing and services that fit their needs. - The applicant has satisfactory capacity, drawdowns, and performance for existing grant(s) funded under the CoC Program, as evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of any monitoring findings; however, this does not apply to project applicants who have never received a CoC Program funded project.	Excellent Alignment = 30 Points Very Good Alignment = 20 Points Satisfactory Alignment = 10 Points Slight Alignment = 5 Points Unsatisfactory Alignment = 0 Points		
For New Permanent Supportive Housing Projects: - The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants. - The type of supportive services and assistance that will be offered to program participants will ensure that the participant is able to successfully obtain and retain permanent housing and in a manner that fits their needs (e.g. transportation, safety planning, enhanced case management). If the applicant is proposing to expand an existing PH project, it must demonstrate how they are expanding supportive services to program participants, including where appropriate, on-site supportive services. - The project will serve homeless individuals or families with a disability in accordance with 24 CFR 578.37(a)(1)(i). - The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP.	Excellent Alignment = 30 Points Very Good Alignment = 20 Points Satisfactory Alignment = 10 Points Slight Alignment = 5 Points Unsatisfactory Alignment = 0 Points		
For New Rapid Rehousing Projects: - The provision of tenant-based rental assistance will help individuals and families achieve self- sufficiency within 24 months. - The type of supportive services and assistance that will be offered to program participants (e.g., case management, substance use treatment, Permanent Housing projects that do not receive at least 4 points will be mental health treatment, and employment assistance) will ensure that the participant is able to successfully obtain self-sufficiency and exit homelessness. - The applicant has previously operated or currently operates a homelessness project where, or has a plan in place to have, at least 50 percent of participants exit to permanent housing within 24 months and at least 50 percent of participants exit with employment income as reflected in HMIS or another data system used by the applicant, or has a plan in place to ensure this. - The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP.	Excellent Alignment = 30 Points Very Good Alignment = 20 Points Satisfactory Alignment = 10 Points Slight Alignment = 5 Points Unsatisfactory Alignment = 0 Points		
B. Budget and Cost Reasonableness			
The average cost per household served for the project is reasonable per 2 CFR 200.404.	Yes = 5 Points No = 0 Points		
The budget will support successful project implementation, outcomes, and performance measures.	Yes = 5 Points No = 0 Points		
C. Priority Populations Served			
The project will serve survivors of domestic violence, dating violence, sexual assault, and/or stalking.	Yes = 4 Points No = 0 Points		
The project will serve Chronically Homeless Persons.	Yes = 2 Points No = 0 Points		
The project will serve families with children.	Yes = 2 Points No = 0 Points		
The project will serve seniors aged 62 and older.	Yes = 2 Points No = 0 Points		
The project will serve people with physical or developmental disabilities.	Yes = 2 Points No = 0 Points		
The project will serve people in recovery from Substance Use Disorder.	Yes = 2 Points No = 0 Points		
D. Community Coordination			

The project design demonstrates meaningful coordination with physical and behavioral health care providers, including mental health and substance use treatment and recovery service providers.	Yes = 3 Points No = 0 Points		
The project design demonstrates meaningful partnerships to help participants increase income from employment and achieve self-sufficiency.	Yes = 3 Points No = 0 Points		
Subtotal		**0**	
System Performance Criteria: Up to 35 Points (35%)			
The project will help increase exits from homelessness to permanent housing within the CoC.	Yes = 10 Points No = 0 Points		
The project will help increase the number of people exiting from homelessness with increased income from employment and achieve self-sufficiency.	Yes = 10 Points No = 0 Points		
The project will help decrease the length of time people experience homelessness in the CoC.	Yes = 5 Points No = 0 Points		
The project will help decrease the number of people experiencing homelessness for the first time in the CoC.	Yes = 5 Points No = 0 Points		
The project will help decrease returns to homelessness in the CoC.	Yes = 5 Points No = 0 Points		
Subtotal		**0**	
PROJECT SCORE (Out of 100 Maximum Points)		**0**	
Revised 07.28.26			

PA-502 Upper Darby, Chester, Haverford/Delaware County CoC FY 2026 Continuum of Care Program Local Competition Selection Results

Applicant Name	Project Name	Component	Funding Type	Score	Status	Tier	Rank	Amount Requested From HUD	Reallocated Funds
Delaware County Dept. of Human Services	FY 2026 Planning Grant	Planning	Planning	NA	NA	NA	NA	$379,868.00	
Delaware County Dept. of Human Services	HMIS 19	HMIS	Renewal	NA	Accepted	1	1	$223,509.00	
Delaware County Dept. of Human Services	HMIS 2	HMIS	Renewal	NA	Accepted	1	2	$140,008.00	
Community Action Agency of Delaware County, Inc.	Coordinated Entry - CAADC	SSO Coordinated Entry	Renewal	NA	Accepted	1	3	$198,557.00	
Family and Community Service of Delaware County	FCSDC-PSH-CH	PH-PSH	Renewal	90	Accepted	1	4	$313,504.00	
The Salvation Army, a New York Corporation	Salvation Army Chester Consolidated PSH	PH-PSH	Renewal	89	Accepted	1	5	$587,659.00	
Family and Community Service of Delaware County	FCSDC-PSH-FAM	PH-PSH	Renewal	80	Accepted	1	6	$192,205.00	
Horizon House	Horizon House PSH CH	PH-PSH	Renewal	80	Accepted	1	7	$501,599.00	
Delaware County Dept. of Human Services	S + C 67	PH-PSH	Renewal	80	Accepted	1	8	$312,498.00	
Horizon House	SHP Reallocation Project	PH-PSH	Renewal	80	Accepted	1	9	$129,827.00	
Domestic Abuse Project of Delaware County, Inc.	DAP RRH Renewal FY2026	PH-RRH	Renewal	62	Accepted	1	10	$435,434.00	
Delaware County Dept. of Human Services	SSO Street Outreach FY 2026	SSO Street Outreach	New - Reallocation	88	Accepted	1	11	$220,000.00	$220,000.00
Community Action Agency of Delaware County, Inc.	Transitional Housing - CAADC	TH	New - Reallocation	87	Accepted	1	12	$406,564.00	$406,564.00
Community Action Agency of Delaware County, Inc.	Transitional Housing - CAADC	TH	New - Reallocation	87	Accepted	2	12	$852,300.00	$852,300.00
Mental Health Partnerships	Delco FY2026 TH	TH	New - Reallocation	87	Accepted	2	13	$754,789.00	$754,789.00
Family and Community Service of Delaware County	FCSDC-RMH-TH	TH	New - Reallocation	77	Accepted	2	14	$372,688.00	$372,688.00
SELF, Inc.	SELF Transitional Housing	TH	Bonus + Reallocation	83	Accepted	2	15	$433,067.00	$279,679.00
Delaware County Dept. of Human Services	CoC-Coordinated Entry-SA	SSO Coordinated Entry	Renewal	NA	Accepted	2	16	$64,374.00	
Domestic Abuse Project of Delaware County, Inc.	DAP CE Renewal FY2026	SSO Coordinated Entry	Renewal	NA	Accepted	2	17	$117,079.00	
Catholic Social Services	Standalone SSO 2026	SSO Standalone Supportive Service	Bonus	85	Accepted	2	18	$241,200.00	
Mental Health Partnerships	Delco FY2026 SSO	SSO Street Outreach	Bonus	79	Accepted	2	19	$745,017.00	
Family and Community Service of Delaware County	FCSDC-RMH-Joint TH-RRH	Joint TH & PH-RRH	Renewal	NA	Fully Reallocated	NA	NA	$0.00	-$372,688.00
Catholic Social Services	Housing Resource Coordination Program	PH-PSH	Renewal	NA	Fully Reallocated	NA	NA	$0.00	-$98,113.00
Community Action Agency of Delaware County, Inc.	Rapid Re-Housing Program 3	PH-RRH	Renewal	NA	Fully Reallocated	NA	NA	$0.00	-$1,258,864.00
Horizon House	Coordinated Entry - Horizon House	SSO Coordinated Entry	Renewal	NA	Fully Reallocated	NA	NA	$0.00	-$193,613.00
Horizon House	Del. Co. PSH for Homeless Adults with Mental Illness	PH-PSH	Renewal	75	Fully Reallocated	NA	NA	$0.00	-$568,419.00
Horizon House	OBH-PSH-CH HH	PH-PSH	Renewal	65	Fully Reallocated	NA	NA	$0.00	-$214,034.00
Mental Health Partnerships	MHP Delco FY2026 RRH renewal	Joint TH & PH-RRH	Renewal	61	Fully Reallocated	NA	NA	$0.00	-$180,289.00
						TOTAL		**$7,621,746.00**	$0.00

2025 HDX Competition Report

2026 Competition Report - Summary

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

HDX Data Submission Participation Information

Government FY and HDX Module Abbreviation	Met Module Deadline*	Data From	Data Collection Period in HDX
2025 LSA	Yes	Government FY 2025 (10/1/24 - 9/30/25).	November 2025 to January 2026
2025 SPM	Yes	Government FY 2025 (10/1/24 - 9/30/25).**	February 2026 to March 2026
2026 HIC	Yes	Government FY 2026. Exact HIC and PIT dates vary by CoC. For most CoCs, it was within the last 10 days of January, 2026.	March 2026 to April 2026
2026 PIT	Yes	Government FY 2026. Exact HIC and PIT dates vary by CoC. For most CoCs, it was within the last 10 days of January, 2026.	March 2026 to April 2026

1) FY = Fiscal Year
2) *This considers all extensions where they were provided.
3) **"Met Deadline" in this context refers to FY25 SPM submissions. Resubmissions from FY24 (10/1/2023 - 9/30/2024) were also accepted during the data collection period, but the previous year's submission is voluntary.

2026 Competition Report - LSA Summary & Usability Status

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

LSA Usability Status 2025

Category	EST AO	EST AC	EST CO	RRH AO	RRH AC	RRH CO	PSH AO	PSH AC*	PSH CO
Fully Usable	☑	☑	☑	☑	☑	☑	☑	N/A	☑
Partially Usable								N/A	
Not Usable								N/A	

Glossary: EST = Emergency Shelter, Save Haven, & Transitional Housing; RRH = Rapid Re-housing; PSH = Permanent Supportive Housing; AO = Persons in Households without Children; AC = Persons in Households with at least one Adult and one Child; CO=Persons in Households with only Children

*Usability was not determined for PSH-AC due to built-in conflicts between HOMES and HMIS. As

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than the look back stop date or client's date of birth, whichever is later.

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

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

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

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, and SH	1,160	56.0	24.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	1,222	71.0	30.0

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

b. This measure is based on data element 3.917

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

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, SH, and PH (prior to "housing move in")	954	160.0	81.5
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to "housing move in")	1,019	179.0	90.0

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 2: Returns to Homelessness for Persons who Exit to Permanent Housing (PH) Destinations

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

	Total # of Persons Exited to a PH Destination (2 Yrs Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
Metric	**Count**	**Count**	**% of Returns**	**Count**	**% of Returns**	**Count**	**% of Returns**	**Count**	**% of Returns**
Exit was from SO	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from ES	313	12	3.8%	7	2.2%	11	3.5%	30	9.6%
Exit was from TH	41	0	0.0%	1	2.4%	1	2.4%	2	4.9%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	226	7	3.1%	1	0.4%	4	1.8%	12	5.3%
TOTAL Returns to Homelessness	580	19	3.3%	9	1.6%	16	2.8%	44	7.6%

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

Please refer to PIT section for relevant data.

Metric 3.2 – Change in Annual Counts

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

Metric	Value
Universe: Unduplicated Total sheltered homeless persons	1,099
Emergency Shelter Total	1,034
Safe Haven Total	0
Transitional Housing Total	97

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

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

This measure is divided into six tables capturing employment and non-employment income changes for system leavers and stayers. The project types reported in these metrics are the same for each metric, but the type of income and universe of clients differs. In addition, the projects reported within these tables are limited to CoC-funded projects.

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

Metric	Value
Universe: Number of adults (system stayers)	260
Number of adults with increased earned income	15
Percentage of adults who increased earned income	5.8%

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

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

Metric	Value
Universe: Number of adults (system stayers)	260
Number of adults with increased non-employment cash income	192
Percentage of adults who increased non-employment cash income	73.9%

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

Metric	Value
Universe: Number of adults (system stayers)	260
Number of adults with increased total income	204
Percentage of adults who increased total income	78.5%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	231
Number of adults who exited with increased earned income	38
Percentage of adults who increased earned income	16.5%

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

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

Metric	Value
Universe: Number of adults who exited (system leavers)	231
Number of adults who exited with increased non-employment cash income	37
Percentage of adults who increased non-employment cash income	16.0%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	231
Number of adults who exited with increased total income	71
Percentage of adults who increased total income	30.7%

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 5: Number of Persons who Become Homeless for the First Time

This measures the number of people entering the homeless system through ES, SH, or TH (Metric 5.1) or ES, SH, TH, or PH (Metric 5.2) and determines whether they have any prior enrollments in the HMIS over the past two years. Those with no prior enrollments are considered to be experiencing homelessness for the first time.

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

Metric	Value
Universe: Person with entries into ES-EE, ES-NbN, SH or TH during the reporting period.	854
Of persons above, count those who were in ES-EE, ES-NbN, SH, TH or any PH within 24 months prior to their entry during the reporting year.	88
Of persons above, count those who did not have entries in ES-EE, ES-NbN, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	766

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

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

Metric	Value
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	979
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	121
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	858

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

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

Measure 6 is not applicable to CoCs in this reporting period.

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

This measures positive movement out of the homeless system and is divided into three tables: movement off the streets from Street Outreach (Metric 7a.1); movement into permanent housing situations from ES, SH, TH, and RRH (Metric 7b.1); and retention or exits to permanent housing situations from PH (other than PH-RRH).

Metric 7a.1 – Change in SO exits to temp. destinations, some institutional destinations, and permanent housing destinations

Metric	Value
Universe: Persons who exit Street Outreach	491
Of persons above, those who exited to temporary & some institutional destinations	464
Of the persons above, those who exited to permanent housing destinations	0
% Successful exits	94.5%

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Metric 7b.1 – Change in ES, SH, TH, and PH-RRH exits to permanent housing destinations

Metric	Value
Universe: Persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1,105
Of the persons above, those who exited to permanent housing destinations	705
% Successful exits	63.8%

Metric 7b.2 – Change in PH exits to permanent housing destinations or retention of permanent housing

Metric	Value
Universe: Persons in all PH projects except PH-RRH who exited after moving into housing, or who moved into housing and remained in the PH project	290
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	277
% Successful exits/retention	95.5%

2026 Competition Report - SPM Data

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

System Performance Measures Data Quality

Data coverage and quality will allow HUD to better interpret your SPM submissions.

Metric	All ES, SH	All TH	All PSH, OPH	All RRH	All Street Outreach
Unduplicated Persons Served (HMIS)	1,034	97	290	517	491
Total Leavers (HMIS)	793	54	21	375	347
Destination of Don't Know, Refused, or Missing (HMIS)	147	0	0	28	0
Destination Error Rate (Calculated)	18.5%	0.0%	0.0%	7.5%	0.0%

2026 Competition Report - SPM Notes

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Notes For Each SPM Measure

Measure	Notes
Measure 1	No notes.
Measure 2	No notes.
Measure 3	No notes.
Measure 4	No notes.
Measure 5	No notes.
Measure 6	No Notes. Measure 6 was not applicable to CoCs in this reporting period.
Measure 7	No notes.
Data Quality	No notes.

2025 HDX Competition Report

2026 Competition Report - HIC Summary

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

For HIC conducted in January/February of 2026

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current Non-VSP Beds in HMIS or Comparable Database	Total Year-Round, Current, Non-VSP Beds	Removed From Denominator: OPH EHV† Beds or Beds Affected by Natural Disaster*	Adjusted*** Total Year-Round, Current, Non-VSP Beds	Adjusted*** HMIS Bed Coverage Rate for Year-Round, Current Beds
ES	221	197	221	0	221	89.1%
SH	0	0	0	0	0	NA
TH	78	42	78	0	78	53.8%
RRH	222	222	222	0	222	100.0%
PSH	300	175	300	0	300	58.3%
OPH	0	0	0	0	0	NA
Total	**821**	**636**	**821**	**0**	**821**	**77.5%**

2025 HDX Competition Report

2026 Competition Report -
PA-502 - Upper Darby, Chester,
For HIC conducted in January/F

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, VSP Beds in an HMIS-Comparable Database	Total Year-Round, Current, VSP Beds	Removed From Denominator: OPH EHV† Beds or Beds Affected by Natural Disaster**	Adjusted*** Total Year-Round Current, VSP Beds	HMIS Comparable Bed Coverage Rate for VSP Beds
ES	221	0	0	0	0	NA
SH	0	0	0	0	0	NA
TH	78	0	0	0	0	NA
RRH	222	0	0	0	0	NA
PSH	300	0	0	0	0	NA
OPH	0	0	0	0	0	NA
Total	**821**	**0**	**0**	**0**	**0**	**NA**

2025 HDX Competition Report

2026 Competition Report -
PA-502 - Upper Darby, Chester,
For HIC conducted in January/F

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS-Comparable Database	Adjusted*** Total Year-Round, Current, Non-VSP and VSP Beds	HMIS and Comparable Database Coverage Rate
ES	221	197	221	89.14%
SH	0	0	0	NA
TH	78	42	78	53.85%
RRH	222	222	222	100.00%
PSH	300	175	300	58.33%
OPH	0	0	0	NA
Total	**821**	**636**	**821**	**77.47%**

2026 Competition Report - HIC Summary

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

For HIC conducted in January/February of 2026

1) † EHV = Emergency Housing Voucher
2) *This column includes Current, Year-Round, Natural Disaster beds not associated with a VSP that are not HMIS-participating. For OPH Beds, this includes beds that are Current, Non-HMIS, and EHV-funded.
3) **This column includes Current, Year-Round, Natural Disaster beds associated with a VSP that are not HMIS-participating or HMIS-comparable database participating. For OPH Beds, this includes beds that are Current, VSP, Non-HMIS, and EHV-funded.
4) ***Adjusted bed counts exclude non-HMIS participating OPH EHV Beds and Beds Affected by Natural Disaster
5) Data included in these tables reflect what was entered into HDX 2.0.
6) In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").
7) In the HIC, "Current" beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").
8) For historical data: Aggregated data from CoCs that merged are not displayed if HIC data were created separately - that is,

2026 Competition Report - PIT Summary

PA-502 - Upper Darby, Chester, Haverford/Delaware County CoC

For PIT conducted in January/February of 2026

Submission Information

Date of PIT Count	Received HUD Waiver
2026-01-28	Not Applicable

Total Population PIT Count Data

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Emergency Shelter Total	395	324	218
Safe Haven Total	0	0	0
Transitional Housing Total	73	78	67
Total Sheltered Count	468	402	285
Total Unsheltered Count	107	70	49
Total Sheltered and Unsheltered Count*	575	472	334

1) *Data included in this table reflect what was entered into HDX 2.0. This may differ from what was included in federal reports if the PIT count type was sheltered only.

2) Aggregated data from CoCs that merged is not displayed if PIT data were entered separately - that is, only data from the CoC into which the merge occurred are displayed. Additional reports can be requested via AAQ for any CoCs that have been subsumed into other CoCs.

Total People Experiencing Chronic Homelessness

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Total Sheltered Count	0	1	0
Total Unsheltered Count	41	0	0
Total	41	1	0

Certification for Opportunity Zones Preference Points

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 02/28/2027

Type or clearly print the following information.
***Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(1)(iii)).*

Applicant Organization: PA-502 Upper Darby/Chester/Haverford/Delaware County CoC

Assistance Listing number and Federal Program name to which the Applicant is applying:
Include the funding opportunity number and name exactly as it appears in the applicable funding opportunity announcement (example: 14.896, Family Self-Sufficiency Program).

14.267 - - Continuum of Care Program

Opportunity Zone Census Tract(s), which the proposed activities/projects will benefit:
Include below the full 11-digit census tract number (example: 06067001101). Designated Opportunity Zone Census Tracts can be found at: https://opportunityzones.hud.gov/resources. Select the "CDFI Fund Opportunity Zones Resources" link and then select the "List of designated Qualified Opportunity Zones."

42045402000, 42045403300, 42045405000, 42045406500, 42045406600, 42045410700

The application meets which of the following criteria (please select one):

- ☐ The proposed activities/projects will occur solely within the Opportunity Zone Census Tract(s) listed above.
- ☒ The proposed activities/projects will occur within the Opportunity Zone Census Tract(s) listed above and other communities.
- ☐ The proposed activities/projects will occur outside Opportunity Zone Census Tracts, but substantial and direct benefits will accrue within the Opportunity Zone Census Tracts listed above.

Note: Projects which substantially and directly benefit Opportunity Zone Census Tracts, but which do not consist of activities delivered within Opportunity Zone Census Tracts may be considered for competitive preference. If applicable, the respective Federal Agency will clearly define "substantially and directly" in the relevant funding announcement.

Estimated Funding Allocations

Estimate a percentage of the total dollar amount of awarded federal funding that would result in a direct benefit within the Opportunity Zone Census Tracts listed above:

- ☒ 76% - 100%
- ☐ 51% - 75%
- ☐ 26% - 50%
- ☐ 11% - 25%
- ☐ 1% - 10%

Provide a narrative explaining and/or reference the section in the application that explains how the project will support public and private investment in urban and economically distressed areas, specifically qualified Opportunity Zones (300-word limit):

Example: "The Main Street project described in this application will stimulate economic opportunity and mobility, encourage entrepreneurship, expand quality educational opportunities, and promote workforce development for those families residing within the XYZ Opportunity Zone."

Projects providing Coordinated Entry, Street Outreach, Supportive Services, Permanent Supportive Housing and Transitional Housing will support health, public safety, human services and family support of the qualified Opportunity Zones. Housing support provided by these activities will encourage economic recovery in the qualified zones. Program participants supported by the project activities located in Opportunity Zones will receive services to combat drug addiction and secure employment making the Opportunity Zones more attractive to private investment. The CoC supported network of social service providers in an around the Opportunity Zones will be used to encourage additional public and private resources to achieve a greater community and economic development impact.

Check the following boxes that accurately reflect the nature or purpose of the proposed project:

- ☐ Access to Capital
- ☐ Asset Building
- ☐ Business Assistance
- ☐ Community Capacity Building
- ☐ Economic Development
- ☐ Education
- ☐ Healthy Food Access
- ☒ Health
- ☒ Housing
- ☒ Human Services and Family Support
- ☐ Community Infrastructure
- ☒ Public Safety
- ☒ Workforce Development
- ☐ Low Income Housing Tax Credit (LIHTC) or other rent restricted housing
- ☐ Market rate housing
- ☐ Industrial development
- ☐ Commercial or retail development
- ☐ Other business development
- ☐ "Above ground" infrastructure – streets, sidewalks, lighting
- ☐ "Below ground" infrastructure – water, sewer, gas, electric
- ☐ Schools or other educational facilities
- ☐ Hospitals or other health care facilities

Certification of Authorized Representative for the Applicant:

**Under penalty of perjury, I certify on behalf of the Applicant that

(1) all information provided on this form is true, complete, and accurate, and

(2) the Applicant will notify the Agency immediately upon learning of any change in the information provided on this form, and

(3) I am authorized to speak for the Applicant regarding all information provided on this form.

Prefix: Mr. First Name: Philip Middle Name: Stephen

Last Name: Welsh Suffix:

Title: Director

Organization: Delaware County Office of Housing and Community Development

Signature: [signature]

Date: 09/24/2026

September 28, 2026

Ms. Phyllis Chamberlain
Director of Housing Access and Community Stability
County of Delaware, Pennsylvania, Dept of Human Services
4990 State Road, Ste 101
Drexel Hill, PA 19026

Dear Ms. Chamberlain,

On behalf of Merakey, I am pleased to provide this letter describing our partnership with the PA-502 Continuum of Care (CoC), the Delaware County Department of Human Services, and other homeless service providers throughout Delaware County.

Merakey is a non-profit provider of developmental, behavioral health, and education services.

Merakey's Base Service Unit (BSU) serves as an initial point of access to Delaware County's behavioral health system. The Commonwealth of Pennsylvania requires every county to have a BSU to serve as a primary intake and service coordination point for individuals accessing county mental health and intellectual disability services.

Individuals will be served by ACM if they have MA insurance, Medicate or funding through the County. Merakey also offers a broad range of services for adults and children, including outpatient therapy and psychiatry, psychiatric rehabilitation, outpatient drug and alcohol treatment and case management services.

Through our partnership with Delaware County and other community providers, Merakey helps connect individuals and families experiencing homelessness or housing instability with behavioral health services and other supports that promote housing stability and overall well-being.

In addition, I am pleased to serve as a member of the PA-502 Continuum of Care Board. Through this role, I contribute to countywide efforts to strengthen coordination among housing, homelessness, behavioral health, and other community service systems.

Merakey values its ongoing partnership with Delaware County and the PA-502 Continuum of Care and remains committed to working collaboratively to improve access to services and housing stability for individuals and families in our community.

Sincerely,

Carol Barnes

Carol Barnes, MS, CAGS, CPG
Executive Director
Phiadelphia Community-Based and Residential Services
Delaware County Residential and Psych Rehab Services

Before Starting the Project Listings for the CoC Priority Listing

The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the CoC Program Competition submission deadline stated in the NOFO.

The CoC Priority Listing includes:
- Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects or if a project applicant will transition from an existing component to an eligible new component.
- Project Listings:

  - New;
  - Renewal;
  - UFA Costs;
  - CoC Planning;
  - YHPD Renewal; and
  - YHDP Replacement and Reallocation.

- Consolidations and Expansions Forms – must be completed if the CoC is consolidating eligible renewal projects or applying for new projects to expand the operations of eligible renewal projects.
- Attachment Requirement

  - HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:
- New, CoC Renewal, YHPD Renewal, YHDP Replacement and Reallocation Project Listings – all project applications must be reviewed, approved and ranked, or rejected based on the local CoC competition process.
- Project applications on the following Project Listings must be approved and are not ranked per the FY 2026 CoC Program Competition NOFO:

  - UFA Costs Project Listing;
  - CoC planning Project Listing;

- Collaborative Applicants are responsible for ensuring all project applications accurately appear on the Project Listings and there are no project applications missing from one or more Project Listings.
- For each project application rejected by the CoC, the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND ranked or approved BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on HUD's website

1. Continuum of Care (CoC) Identification

Collaborative Applicant Name: County of Delaware

2. Reallocation

2-1 Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in Calendar Year 2027 to create one or more new projects?	Yes

Alert:
As stated in the FY 2026 CoC Program Competition NOFO:
- CoCs may reallocate YHDP projects from any Round to create new YHDP Replacement projects.
- If a CoC reallocates funding from a renewal project that was previously awarded DV Bonus funding, any new project created with such funding must be 100 percent dedicated to serving individuals and families who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking and who qualify as homeless under paragraphs (1) or (4) of the definition of homeless at 24 CFR 578.3 or Section 103(b) of the McKinney-Vento Homeless Assistance Act.

2A. Reallocation - Grant(s) Eliminated

CoCs reallocating eligible CoC Renewal, DV Renewal or YHDP renewal project funds to create new project application(s) may do so by eliminating one or more expiring eligible projects.

YHDP Renewal Grants and DV Renewal Grants may only be reallocated to create new projects that serve the same populations/subpopulations as the projects the funding was reallocated from.

Amount Available for New CoC Projects: (Sum of All Eliminated CoC Renewal Projects)
$2,886,020
Amount Available for New YHDP Projects: (Sum of All Eliminated YHDP Restricted Projects)
$0
Amount Available for New DV Projects: (Sum of All Eliminated DV Restricted Projects)
$0

Eliminated Project Name	Grant Number Eliminated	Component Type	Funding Type	Annual Renewal Amount	Transition Grant
FCSDC-RMH-Joint T...	PA0874L3T022508	JOINT	CoC Renewal	$372,688	Yes
Housing Resource ...	PA0101L3T022518	PH-PSH	CoC Renewal	$98,113	No
Rapid Re-Housing ...	PA0954L3T022505	PH-RRH	CoC Renewal	$1,25...	Yes
Coordinated Entry...	PA0762L3T022510	SSO	CoC Renewal	$193,613	No
Del. Co. PSH for ...	PA0098L3T022518	PH-PSH	CoC Renewal	$568,419	No
OBH-PSH-CH HH	PA0683L3T022512	PH-PSH	CoC Renewal	$214,034	No
MHP PA 502 Delco ...	PA0097L3T022518	PH-RRH	CoC Renewal	$180,289	No

Reallocation - Grant(s) Eliminated Details

2A-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name:	FCSDC-RMH-Joint TH-RRH
Grant Number of Eliminated Project:	PA0874L3T022508
Eliminated Project Component Type:	JOINT
Funding Type:	CoC Renewal
Eliminated Project Annual Renewal Amount:	$372,688

2A-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 2500 characters)

The Project Applicant chose to voluntarily eliminate the project to fund a new transition grant, which the CoC Governing Board accepted for inclusion in the FY 2026 Priority Listing. The Collaborative Applicant notified the Project Applicant in writing of the project's reallocation on September 22, 2026.

2A-3 Is the project being eliminated to create one or more transition grant applications?	Yes
How much funding will be made available for transition grants?	$372,688
How much funding will be made available for new Reallocation projects?	0
The Collaborative Applicant confirms the new transition grant(s) are for a new program component.	X
The Collaborative Applicant reviewed and affirms that no more than 50 percent of the funds in the new component project(s) will be for costs of eligible activities under the old component; and	X

The CoC consented to the transition of component and the new component project(s) meet the standards outlined in Section II.A.3.k of the NOFO	X

Reallocation - Grant(s) Eliminated Details

2A-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name:	Housing Resource Coordination Program
Grant Number of Eliminated Project:	PA0101L3T022518
Eliminated Project Component Type:	PH-PSH
Funding Type:	CoC Renewal
Eliminated Project Annual Renewal Amount:	$98,113

2A-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 2500 characters)

The Project Applicant requested voluntary elimination of the project because it no longer met a priority need in the CoC. The Collaborative Applicant notified the Project Applicant in writing of the project's reallocation on September 22, 2026.

2A-3 Is the project being eliminated to create one or more transition grant applications?	No

Reallocation - Grant(s) Eliminated Details

2A-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name:	Rapid Re-Housing Program 3
Grant Number of Eliminated Project:	PA0954L3T022505
Eliminated Project Component Type:	PH-RRH
Funding Type:	CoC Renewal
Eliminated Project Annual Renewal Amount:	$1,258,864

2A-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 2500 characters)

The Project Applicant chose to voluntarily eliminate the project to fund a new transition grant, which the CoC Governing Board accepted for inclusion in the FY 2026 Priority Listing. The Collaborative Applicant notified the Project Applicant in writing of the project's reallocation on September 22, 2026.

2A-3 Is the project being eliminated to create one or more transition grant applications?	Yes
How much funding will be made available for transition grants?	$1,258,864
How much funding will be made available for new Reallocation projects?	0
The Collaborative Applicant confirms the new transition grant(s) are for a new program component.	X
The Collaborative Applicant reviewed and affirms that no more than 50 percent of the funds in the new component project(s) will be for costs of eligible activities under the old component; and	X

The CoC consented to the transition of component and the new component project(s) meet the standards outlined in Section II.A.3.k of the NOFO	X

Reallocation - Grant(s) Eliminated Details

2A-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name:	Coordinated Entry - Horizon House
Grant Number of Eliminated Project:	PA0762L3T022510
Eliminated Project Component Type:	SSO
Funding Type:	CoC Renewal
Eliminated Project Annual Renewal Amount:	$193,613

2A-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 2500 characters)

The CoC Governing Board voted to fully reallocate the renewal project because of low performance. The Collaborative Applicant notified the Project Applicant in writing of the project's reallocation on September 22, 2026.

2A-3 Is the project being eliminated to create one or more transition grant applications?	No

Reallocation - Grant(s) Eliminated Details

2A-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name:	Del. Co. PSH for Homeless Adults with Mental Illness
Grant Number of Eliminated Project:	PA0098L3T022518
Eliminated Project Component Type:	PH-PSH
Funding Type:	CoC Renewal
Eliminated Project Annual Renewal Amount:	$568,419

2A-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 2500 characters)

The CoC Governing Board voted to fully reallocate the renewal project because of low performance. The Collaborative Applicant notified the Project Applicant in writing of the project's reallocation on September 22, 2026.

2A-3 Is the project being eliminated to create one or more transition grant applications? No

Reallocation - Grant(s) Eliminated Details

2A-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name:	OBH-PSH-CH HH
Grant Number of Eliminated Project:	PA0683L3T022512
Eliminated Project Component Type:	PH-PSH
Funding Type:	CoC Renewal

Eliminated Project Annual Renewal Amount: $214,034

2A-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 2500 characters)

The CoC Governing Board voted to fully reallocate the renewal project because of low performance. The Collaborative Applicant notified the Project Applicant in writing of the project's reallocation on September 22, 2026.

2A-3 Is the project being eliminated to create one or more transition grant applications? No

Reallocation - Grant(s) Eliminated Details

2A-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name: MHP PA 502 Delco renewal RRH FY24

Grant Number of Eliminated Project: PA0097L3T022518

Eliminated Project Component Type: PH-RRH

Funding Type: CoC Renewal

Eliminated Project Annual Renewal Amount: $180,289

2A-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 2500 characters)

The CoC Governing Board voted to fully reallocate the renewal project because of low performance. The Collaborative Applicant notified the Project Applicant in writing of the project's reallocation on September 22, 2026.

2A-3 Is the project being eliminated to create one or more transition grant applications? No

2B. Reallocation - Grant(s) Reduced

CoCs that are reallocating eligible CoC Renewal, DV Renewal and YHDP Renewal project funds to create new project applications may do so by reducing one or more expiring eligible renewal projects.

YHDP Renewal Grants and DV Renewal Grants may only be reallocated to create new projects that serve the same populations/subpopulations as the projects the funding was reallocated from.

Amount Available for New CoC Project(s): (Sum of All Reduced CoC Projects)
$0
Amount available for New YHDP Project(s): (Sum of All Reduced YHDP Projects)
$0
Amount available for New DV Project(s): (Sum of All Reduced DV Projects)
$0

Reduced Project Name	Reduced Grant Number	Funding Type	Annual Renewal Amount	Amount Retained	Amount available for YHDP Project	Amount available for DV Project	Amount available for New Project	Reallocation Type
This list contains no items								

Continuum of Care (CoC) New Project Listing

Instructions:

To upload all new project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based on the number of new projects submitted by project applicant(s) to your CoC in the e-snaps. You may update each of the Project Listings simultaneously.

To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details.

To view the actual project application, click on the orange folder.

If you identify errors in the project application(s), you can send the application back to the project applicant to make the necessary changes by clicking the amend icon. It is your sole responsibility to ensure all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is prioritizing.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Funding Type	Transition Grant	Expansion	Rank	PSH/RRH
SSO Street Outrea...	2026-09-23 12:28:...	SSO	Delaware County D...	$220,000	1 Year	Reallocation	No	No	11	
Delco MHP Street ...	2026-09-23 16:56:...	SSO	Mental Health Par...	$745,017	1 Year	Bonus	No	No	19	
MHP Delco Transit...	2026-09-23 16:53:...	TH	Mental Health Par...	$754,789	1 Year	Reallocation	No	No	13	

FCSDC-RMH-TH	2026-09-24 11:13:...	TH	Family and Commun...	$372,688	1 Year	Reallocation	Yes		14	
Housing Stabiliza...	2026-09-24 11:56:...	SSO	Catholic Social S...	$241,200	1 Year	Bonus	No	No	18	
Transitional Hous...	2026-09-25 10:19:...	TH	Community Action ...	$1,258,864	1 Year	Reallocation	Yes		12	
SELF Transitional...	2026-09-25 09:49:...	TH	SELF, Inc.	$433,067	1 Year	Bonus + Reallocation	No	No	15	

Continuum of Care (CoC) Renewal Project Listing

Instructions:

Prior to starting the Renewal Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload all renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of renewal projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.	X
The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.	X
The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.	

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is prioritizing.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Consolidation	Accepted?	Comp Type	Rank	Expansion	PSH/RRH	Consolidation Type
Salvation Army Ch...	2026-07-29 11:50:...	1 Year	The Salvation Arm...	$587,659		Yes	PH	5		PSH	
Coordinated Entry...	2026-07-30 14:15:...	1 Year	Community Action ...	$198,557		Yes	SSO	3			
DAP RRH Renewal F...	2026-07-30 16:10:...	1 Year	Domestic Abuse Pr...	$435,434		Yes	PH	10		RRH	
DAP CE Renewal FY...	2026-07-30 16:09:...	1 Year	Domestic Abuse Pr...	$117,079		Yes	SSO	17			
Horizon House PSH CH	2026-07-30 19:02:...	1 Year	HORIZON HOUSE REH...	$501,599		Yes	PH	7		PSH	
OBH-PSH-CH HH	2026-07-30 19:00:...	1 Year	HORIZON HOUSE REH...	$214,034		No	PH			PSH	
SHP Reallocation ...	2026-07-30 18:57:...	1 Year	HORIZON HOUSE REH...	$129,827		Yes	PH	9		PSH	
HMIS 19	2026-07-30 14:03:...	1 Year	Delaware County D...	$223,509		Yes	HMIS	1			
S + C 67	2026-07-30 14:13:...	1 Year	Delaware County D...	$312,498		Yes	PH	8		PSH	
FCSDC-PSH-CH	2026-07-31 09:27:...	1 Year	Family and Commun...	$313,504		Yes	PH	4		PSH	

FCSDC-PSH-FAM	2026-07-31 09:27:...	1 Year	Family and Commun...	$192,205		Yes	PH	6		PSH	
CoC-Coordinated E...	2026-08-03 11:48:...	1 Year	Delaware County D...	$64,374		Yes	SSO	16			
HMIS 2	2026-08-03 11:49:...	1 Year	Delaware County D...	$140,008		Yes	HMIS	2			
Del. Co. PSH for ...	2026-08-03 19:05:...	1 Year	HORIZON HOUSE REH...	$568,419		No	PH			PSH	
Coordinated Entry...	2026-08-03 19:06:...	1 Year	HORIZON HOUSE REH...	$193,613		No	SSO				
MHP Delco FY2026 ...	2026-08-03 14:54:...	1 Year	Mental Health Par...	$180,289		No	Joint TH & PH-RRH				

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload the CoC planning project application submitted to this Project Listing, click the "Update List" button. This process may take a few minutes while the project is located in the e-snaps system. You may update each of the Project Listings simultaneously. To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If you identify errors in the project application, you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Only one CoC planning project application can be submitted and only by the Collaborative Applicant designated by the CoC which must match the Collaborative Applicant information on the CoC Applicant Profile.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
PA-502 CoC Planni...	2026-08-03 13:47:...	1 Year	Delaware County D...	$379,868	Yes

Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the YHDP Renewal Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload all YHDP Renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP Renewal projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the Project simultaneously. To review a project on the YHDP Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

As stated in the FY 2026 CoC NOFO, YHDP Renewal and YHDP Replacement applications are competitive and must be ranked.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid rehousing projects listed on the YHDP Renewal Project Listing.	
The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the YHDP Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.	
The Collaborative Applicant does not have any renewal permanent supportive housing or rapid rehousing YHDP renewal projects.	X

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted ?	Rank	PSH/RRH	Consolidation Type
This list contains no items									

Continuum of Care (CoC) YHDP Replacement and YHDP Reallocation Listing

Instructions:

Prior to starting the YHDP Replacement and YHDP Reallocation Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload all YHDP Replacement project and YHDP Reallocation project applications, submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP renewal projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the projects simultaneously. To review a project on the YHDP Replacement and YHDP Reallocation Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

As stated in the FY 2026 CoC NOFO, YHDP Renewal and YHDP Replacement applications are competitive and must be ranked.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Applicant Name	Date Submitted	Comp Type	Expansion	Budget Amount	Grant Term	Funding Type	PSH/RRH	Rank
This list contains no items									

4. Consolidation & Expansion

Instructions:

For guidance on completing the CoC Priority listing, please reference the CoC Priority Listing Detailed Instructions on HUD's website.

1. Is the CoC consolidating renewal projects that will expire in Calendar Year 2027?	No
2. Is the CoC expanding renewal projects that will expire in Calendar Year 2027?	No

Funding Summary

Instructions

This page provides the total budget summaries for each of the project listings after you approved and ranked or rejected new and renewal project applications. You must review this page to ensure the totals for each of the categories is accurate.

The "Total CoC Request" indicates the total funding request amount your CoC will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

Title	Total Amount
CoC Renewal Amount	$3,216,253
New CoC Bonus and CoC Reallocation Amount	$4,025,625
New DV Bonus Amount	$0
New DV Reallocation Amount	$0
YHDP Renewal and Replacement Amount	$0
YHDP Reallocation Amount	$0
CoC Planning Amount	$379,868
Rejected Amount	$1,156,355
Total Funding Request	$7,621,746

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	PA-502 CoC FY 202...	09/28/2026
Other	No		
Other	No		
Project Rating and Ranking Tool (optional)	No		

Attachment Details

Document Description: PA-502 CoC FY 2026 Certification of Consistency with the Consolidated Plan (HUD-2991)

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

WARNING: The FY 2026 CoC Consolidated Application requires submissions of the CoC Priority Listing AND the CoC Application by the FY 2026 Application Submission Deadline.

WARNING: The FY 2026 CoC Consolidated Application requires submissions of the CoC Priority Listing AND the CoC Application by the FY 2026 Application Submission Deadline.

Page	Last Updated
Before Starting	No Input Required
1. Collaborative Applicant	09/29/2026
2. Reallocation	09/29/2026
2A. Grant(s) Eliminated	09/29/2026
2B. Grant(s) Reduced	No Input Required
3A. CoC New Project Listing	09/29/2026
3B. CoC Renewal Project Listing	09/29/2026
3D. CoC Planning Project Listing	09/29/2026
3E. YHDP Renewal Project Listing	No Input Required

3F. YHDP Replacement and YHDP Reallocation Project Listing	No Input Required
4. Consolidation & Expansion	09/29/2026
Funding Summary	No Input Required
Attachments	09/29/2026
Submission Summary	No Input Required

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number. 2501-0044
Expiration Date: 2/28/2027

Public Reporting Burden Statement: This collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed forms to this address. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable HUD to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. This information is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including of the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information contained on the form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

I/We, the undersigned, also certify under penalty of perjury that the information provided below is true, correct, and accurate. Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(1)(iii)).

I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: PA-502 Upper Darby/Chester/Haverford/Delaware County CoC

Project Name: See attached list of FY 26 Continuum of Care Program Projects

Location of the Project: See attached list of FY 26 Continuum of Care Program Projects

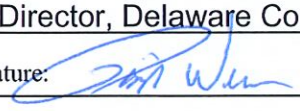
Name of the Federal Program to which the applicant is applying:

Continuum of Care Grant Program

Name of Certifying Jurisdiction: County of Delaware, Pennsylvania

Certifying Official of the Jurisdiction
Name: Philip Welsh

Title: Director, Delaware County Office of Housing and Community Development

Signature:  Date: 09/23/2026

PA-502 CoC FY 2026 Certification of Consistency with the Consolidated Plan (HUD-2991) List of Projects

Applicant Name	Project Name	Location of the Project	Certifying Jurisdiction
Catholic Social Services	Standalone SSO 2026	130 East 7th Street, Chester, PA 19013	County of Delaware, Pennsylvania
Community Action Agency of Delaware County, Inc.	Coordinated Entry - CAADC	1414 Meetinghouse Rd., Boothwyn, PA 19061	County of Delaware, Pennsylvania
Community Action Agency of Delaware County, Inc.	Transitional Housing - CAADC	1414 Meetinghouse Rd., Boothwyn, PA 19061	County of Delaware, Pennsylvania
Delaware County Dept. of Human Services	CoC-Coordinated Entry-SA	County of Delaware, Department of Human Services 4990 State Road, Ste 101, Drexel Hill, PA 19026	County of Delaware, Pennsylvania
Delaware County Dept. of Human Services	FY 2026 Planning Grant	County of Delaware, Department of Human Services 4990 State Road, Ste 101, Drexel Hill, PA 19027	County of Delaware, Pennsylvania
Delaware County Dept. of Human Services	HMIS 19	County of Delaware, Department of Human Services 4990 State Road, Ste 101, Drexel Hill, PA 19028	County of Delaware, Pennsylvania
Delaware County Dept. of Human Services	HMIS 2	County of Delaware, Department of Human Services 4990 State Road, Ste 101, Drexel Hill, PA 19029	County of Delaware, Pennsylvania
Delaware County Dept. of Human Services	S + C 67	County of Delaware, Department of Human Services 4990 State Road, Ste 101, Drexel Hill, PA 19030	County of Delaware, Pennsylvania
Delaware County Dept. of Human Services	SSO Street Outreach FY 2026	County of Delaware, Department of Human Services 4990 State Road, Ste 101, Drexel Hill, PA 19031	County of Delaware, Pennsylvania
Domestic Abuse Project of Delaware County, Inc.	DAP CE Renewal FY2026	14 W. Second St., Media, PA 19063	County of Delaware, Pennsylvania
Domestic Abuse Project of Delaware County, Inc.	DAP RRH Renewal FY2026	14 W. Second St., Media, PA 19063	County of Delaware, Pennsylvania
Family and Community Service of Delaware County	FCSDC-PSH-CH	1260 E. Woodland Avenue, Suite 212, Springfield, PA 19064	County of Delaware, Pennsylvania
Family and Community Service of Delaware County	FCSDC-PSH-FAM	1260 E. Woodland Avenue, Suite 212, Springfield, PA 19064	County of Delaware, Pennsylvania
Family and Community Service of Delaware County	FCSDC-RMH-TH	1260 E. Woodland Avenue, Suite 212, Springfield, PA 19064	County of Delaware, Pennsylvania
Horizon House	Horizon House PSH CH	3275 Stokely Street Philadelphia, PA 19129	County of Delaware, Pennsylvania
Horizon House	SHP Reallocation Project	3275 Stokely Street Philadelphia, PA 19129	County of Delaware, Pennsylvania
Mental Health Partnerships	Delco FY2026 SSO	833 Chestnut Street, Suite 1100, Philadelphia, PA 19107	County of Delaware, Pennsylvania
Mental Health Partnerships	Delco FY2026 TH	833 Chestnut Street, Suite 1100, Philadelphia, PA 19107	County of Delaware, Pennsylvania
SELF, Inc.	SELF Transitional Housing	1500 Walnut Street, Suite 300, Philadelphia, PA 19102	County of Delaware, Pennsylvania
The Salvation Army, a New York Corporation	Salvation Army Chester Consolidated PSH	701 North Broad Street, Philadelphia, PA 19123	County of Delaware, Pennsylvania