

## 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 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 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 2023 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

**1A-1. CoC Name and Number:** GA-504 - Augusta-Richmond County CoC

**1A-2. Collaborative Applicant Name:** Augusta, Georgia

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** Augusta, Georgia

## 1B. Coordination and Engagement–Inclusive Structure and Participation

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

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- Frequently Asked Questions

<b>1B-1.</b>	<b>Inclusive Structure and Participation–Participation in Coordinated Entry.</b>	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

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

By selecting "other" you must identify what "other" is.

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

(limit 2,500 characters)

The CoC solicits and considers opinions from a broad array of organizations and individuals by conducting open, public meetings for general membership, and all subcommittees and work groups. Notice of general meetings is emailed in advance to over 200 individuals and organizations with knowledge, capacity and a dedicated mission to reduce homelessness in the community. These open meetings encourage the free flow of ideas for improvements and new approaches to prevent and end homelessness in Richmond County. Our meetings are forums where we receive input from agencies and share information regarding policy and advocacy/action updates from committees. This allows the CoC to actively engage partners in the work of the committee level of the CoC. During CoC meetings, information is shared and received from partner agencies and community resources via the planned agenda and open call for information before adjourning. The CoC also hosts at least one public meeting for the City of Augusta’s Annual AP/CP engagement process. Using these forums, information is regularly obtained to identify any service gaps experienced in the community as well as providing open dialogue on identifying available resources that can be leveraged to benefit the homeless populations of our service area. The CoC works to ensure information is available to everyone, regardless of disability. Most communications are made electronically and in PDF format if presented as an attachment. Coordinated Entry contact includes TTY accessibility or the hearing impaired or those who have difficulty speaking. We utilize online formats for communication through a landing page on the City of Augusta website and utilize and continue to improve communication via social media, most recently upgrading the CoC’s Facebook presence from a group to an organizational page.

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

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

(limit 2,500 characters)

The GA-504 CoC solicits and considers opinions from a broad array of organizations and individuals by conducting open, public meetings for general membership, and all subcommittees and work groups. Notice of general meetings is emailed in advance to over 200 individuals and organizations with knowledge, capacity and a dedicated mission to reduce homelessness in the community. These open meetings encourage the free flow of ideas for improvements and new approaches to prevent and end homelessness in Richmond County. Our meetings are forums where we receive input from agencies and share information regarding policy and advocacy/action updates from committees. This allows the CoC to actively engage partners in the work of the committee level of the CoC. During CoC meetings, information is shared and received from partner agencies and community resources via the planned agenda and open call for information before adjourning. The CoC also hosts at least one public meeting for the City of Augusta’s Annual AP/CP engagement process. Using these forums, information is regularly obtained to identify any service gaps experienced in the community as well as providing open dialogue on identifying available resources that can be leveraged to benefit the homeless populations of our service area. The CoC works to ensure information is available to everyone, regardless of disability. Most communications are made electronically and in PDF format if presented as an attachment. Coordinated Entry contact includes TTY accessibility or the hearing impaired or those who have difficulty speaking. We utilize online formats for communication through a landing page on the City of Augusta website and utilize and continue to improve communication via social media, most recently upgrading the CoC’s Facebook presence from a group to an organizational page.

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

(limit 2,500 characters)

Any organization that is a participating member of the CoC as defined in the charter may apply for CoC funding, including entities that haven't previously received CoC funds. Partner agencies wishing to submit an application proposal must submit by the noted deadline in eSnaps and must participate in the completion of the Community application. As part of the FY2023 CoC Competition, the funding opportunity was communicated to the public through publication in Augusta's recognized legal organ, the Augusta Chronicle referencing the subsequent NOFA information session for prospective applicants held at the monthly Homeless Task Force Meeting. The CA then announced the opportunity during the July CoC meeting. Additional notifications were made through distribution list mailings, social media and online posts. Prospective applicants were briefed on eligibility as it related to new projects, priorities, performance expectations and submission requirements at the information session hosted by the CA in the week after the July HTF Monthly meeting.

The GA-504 CoC makes every effort to ensure information is made available to everyone, regardless of disability. Most communications are made electronically and in PDF format if presented as an attached document. We utilize online formats for communication through a landing page on the City of Augusta website and utilize and continue to improve communication via social media, most recently upgrading the CoC's Facebook presence from a group to an organizational page.

## 1C. Coordination and Engagement

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

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  - Section 3 Resources;
  - PHA Crosswalk; and
  - Frequently Asked Questions

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	No
13.	Organizations led by and serving people with disabilities	No
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Nonexistent
17.	Temporary Assistance for Needy Families (TANF)	No
	Other:(limit 50 characters)	



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

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

**(limit 2,500 characters)**

Augusta HCD administers Emergency Solutions Grant (ESG) funds and is the CA/Lead Agency for CoC, affording coordination with the CoC in establishing priorities and performance standards for both ESG and CoC programs. HCD's ESG lead staff member sits on the CoC's Executive Committee and serves as the coordinator in developing funding priorities and performance standards for projects funded through ESG. The CA is also working to update its model for quality and evaluation standards for all HUD funded agencies in order to identify strengths, overcome barriers and improve each agency's overall outcomes. The local HMIS Administrator serves on the Executive Committee and provides TA to all local HCOs to ensure data quality is high in order to properly evaluate outcomes. The CA serves as the PJ for the CP/AP process, meaning integration of homeless data is incorporated into the local planning process and serves as a strong focus in the PJs housing and community development strategy.

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

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:
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1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	No
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	No

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

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

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

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

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

**(limit 2,500 characters)**

CoC partner agency has a dedicated staff person assigned to work with the Richmond County Board of Education’s (Board) homeless children’s liaison to ensure all homeless children receive eligible services through the board. A MOU between the CE project and the board is in effect to formalize this relationship. The homeless coordinators routinely visit our largest homeless shelter to inform homeless individuals and families of services they may be eligible for. Additionally, transportation services are facilitated by partner agencies in concert with local BoE reps to ensure students are transported to their appropriate school regardless of their current housing situation in a safe and discreet manner.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section V.B.1.d.	

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

**(limit 2,500 characters)**

To inform households who become homeless of eligibility for education services, the CoC developed and adopted policies and procedures noted within the written standards. Many individual CoC agencies have their own policies and programs for linking clients with educational services. These ensure all households are informed of their rights to access educational services and are supported in accessing these services. CoC policy requires providers to 1) designate a specialized staff person to provide direct educational supports to families who move into permanent housing from shelter as well as 2) designate staff to support families in shelter with ensuring there is no disruption in current education services. The staff person is expected to connect and work with both the families and the school system to ensure the most appropriate services are made available to households and that they are able to overcome any barriers to accessing educational services, including issues with transportation. For example, local shelter staff and supportive housing case managers are required to coordinate with local McKinney-Vento Liaisons in the families' existing school district to coordinate transportation services and ongoing enrollment for children in households experiencing homelessness.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section V.B.1.d.	

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

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

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

In the chart below select yes or no for the organizations your CoC collaborates with:

Organizations		
1.	state domestic violence coalitions	No
2.	state sexual assault coalitions	No
3.	other organizations that help this population	Yes

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

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

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

(limit 2,500 characters)

Local CoC partners with subject matter expertise on victim services, SafeHomes of Augusta; Rape Crisis and Sexual Assault Services; and Intimate Partner Violence, strive to conduct partner training at least annually at regular, quarterly, full body CoC meetings. To ensure adherence to best practices, the focus of the training is partly to raise awareness of the impact of trauma on survivors of domestic violence, their functioning, and their ability to engage with services. Moreover, the CoC area project staff is educated about the principles of trauma-informed care with an emphasis on their implementation in the safety and planning protocols in order to enhance effectiveness of programs and facilitate a victim-centered approach to both program planning and service provision. Additionally, annual training is conducted with CE staff to ensure that interactions with clients experiencing domestic violence reflect trauma-informed philosophy, prevent re-traumatization, foster sense of safety, and empower clients to move toward engagement with community resources while establishing autonomy and independence. Consequently, the training's trauma informed focus aids in identifying domestic violence victims, developing effective safety plans, and connecting them to the local domestic violence provider where they are able to gain access to further services, such as legal advocacy, financial assistance, counseling, and case management. The information of the identified clients is not entered into HMIS for safety reasons. The CoC's DV provider uses an HMIS comparable database for data collection and client service record retention. Particular importance is placed on early involvement of domestic violence advocates and service providers with domestic violence victims to ensure continuum of care and immediate access to safety and wellness enhancing services.

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

Describe in the field below how your CoC coordinates to provide training for:

1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

**(limit 2,500 characters)**

Local CoC partners with subject matter expertise on victim services, SafeHomes of Augusta; Rape Crisis and Sexual Assault Services; and Intimate Partner Violence, strive to conduct partner training at least annually at regular, quarterly, full body CoC meetings. To ensure adherence to best practices, the focus of the training is partly to raise awareness of the impact of trauma on survivors of domestic violence, their functioning, and their ability to engage with services. Moreover, the CoC area project staff is educated about the principles of trauma-informed care with an emphasis on their implementation in the safety and planning protocols in order to enhance effectiveness of programs and facilitate a victim-centered approach to both program planning and service provision. Additionally, annual training is conducted with CE staff to ensure that interactions with clients experiencing domestic violence reflect trauma-informed philosophy, prevent re-traumatization, foster sense of safety, and empower clients to move toward engagement with community resources while establishing autonomy and independence. Consequently, the training’s trauma informed focus aids in identifying domestic violence victims, developing effective safety plans, and connecting them to the local domestic violence provider where they are able to gain access to further services, such as legal advocacy, financial assistance, counseling, and case management. The information of the identified clients is not entered into HMIS for safety reasons. The CoC’s DV provider uses an HMIS comparable database for data collection and client service record retention. Particular importance is placed on early involvement of domestic violence advocates and service providers with domestic violence victims to ensure continuum of care and immediate access to safety and wellness enhancing services.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC’s Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC’s coordinated entry includes:

1.	safety planning protocols; and
2.	confidentiality protocols.

**(limit 2,500 characters)**

While the GA-504 CoC’s CE implementation is designed to meet the needs of victims of violence accessing services through both victim service providers and providers with services that are not specific to victims, it is the policy of the GA-504 CoC to communicate to all clients, irrespective of acknowledged survivor status, the emergency transfer plan policy and procedure for requesting an emergency transfer. The plan is in compliance with and explanatory of the requirements of VAWA and explains who is eligible for an emergency transfer, documentation needed to request an emergency transfer, privacy and confidentiality protections and how an emergency transfer may occur and guidance to clients on safety and security. The CE process is designed to ensure both safety and confidentiality by the decision of the CoC to appoint SafeHomes of Augusta as CE Lead for DV clients. Assessments conducted by CE staff will explore every possibility of a participant attempting to flee domestic violence, concerned for their safety, victim of stalking and any related violence. In such cases, the following will occur:

- Assessor will ensure that there is not an immediate threat to a participant’s safety. If one exists, law enforcement will be contacted
- Participants are offered an immediate referral to DV-specific resources
- Households may choose to complete an assessment and receive services via the CE project or can receive an immediate referral to a DV specific agency
- If being assessed by a DV specific agency, participant information will not be entered into HMIS. De-identified information (DV comparable database, client key, VI-SPDAT score, family size, veteran status and chronicity) will be added to the supplemental prioritization list. Lead agency will follow the standard assessment, prioritization and referral process. CE staff are responsible for ensuring that participants are not denied access to the CE process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault or stalking

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

(limit 2,500 characters)

Entry and exit questionnaires are used to ascertain the specific conditions of the persons experiencing homelessness, including victims of domestic violence. SafeHomes, the appointed CE Lead for domestic violence victims, identifies trends and addresses them with community partners within the CoC as needed to meet client needs. The DV CE Lead provides statistics and other data about these needs to the CoC as they relate to DV and the issue of homelessness. Additionally, review of annual data from HMIS comparable databases assists with identifying service disparities between victims of domestic violence and mainstream beneficiaries, allowing for a more thorough assessment of the unmet needs and gaps in community programs and resources that can inform future decision-making processes.

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1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
NOFO Section V.B.1.e.		
Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:		
1.	whether your CoC has policies and procedures that include an emergency transfer plan;	
2.	the process for individuals and families to request an emergency transfer; and	
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.	

(limit 2,500 characters)

While the GA-504 CoC’s CE implementation is designed to meet the needs of victims of violence accessing services through both victim service providers and providers with services that are not specific to victims, it is the policy of the GA504 CoC to communicate to all clients, irrespective of acknowledged survivor status, the emergency transfer plan policy and procedure for requesting an emergency transfer. The plan is in compliance with and explanatory of the requirements of VAWA and explains who is eligible for an emergency transfer, documentation needed to request an emergency transfer, privacy and confidentiality protections and how an emergency transfer may occur and guidance to clients on safety and security. The CE process is designed to ensure both safety and confidentiality by the decision of the CoC to appoint SafeHomes of Augusta as CE Lead for DV clients. Assessments conducted by CE staff will explore every possibility of a participant attempting to flee domestic violence, concerned for their safety, victim of stalking and any related violence. In such cases, the following will occur:

- Assessor will ensure that there is not an immediate threat to a participant’s safety. If one exists, law enforcement will be contacted
- Participants are offered an immediate referral to DV-specific resources
- Households may choose to complete an assessment and receive services via the CE project or can receive an immediate referral to a DV specific agency
- If being assessed by a DV specific agency, participant information will not be entered into HMIS.

De-identified information (DV comparable database, client key, VI-SPDAT score, family size, veteran status and chronicity) will be added to the supplemental prioritization list. Lead agency will follow the standard assessment, prioritization and referral process. CE staff are responsible for ensuring that participants are not denied access to the CE process on the basis that the participant is or has been a victim of domestic violence, dating violence, sexual assault or stalking.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
NOFO Section V.B.1.e.		
Describe in the field below how your CoC:		
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC’s geographic area; and	

2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.
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**(limit 2,500 characters)**

The CoC DV Lead agency, SafeHomes of Augusta, operates an emergency shelter to immediately house victims/survivors. While in shelter, all necessities are made available to assist clients such as clothing, toiletries and food. During the sheltering process, once immediate needs are addressed, the CoC DV Lead Agency works through the CE referral process to ensure that survivors of violence have access to all the housing & services available w/in the CoC's geographic area.

All household referrals to CE, regardless of who is making the referral, are automatically placed on the prioritization list for each project type w/in the CoC, including RRH, PSH and other program placements, as available. The GA-504 CoC's HMIS Lead also invested funds to create a comparable non- HMIS database for referral & prioritization list for those fleeing/attempting to flee DV. The Non-HMIS system allows agencies to create unique id for referrals & the id of the client belongs only to the referring agency. The highest prioritized by project type is offered to the client for program enrollment, regardless of which list they were on. While being a survivor of DV may create additional opps for certain housing & services only available to that subpopulation (such as DV RRH), it will never prevent a client from accessing all the other available housing & services they are eligible for & wish to pursue. All CE participating agencies work to achieve responsive & streamlined access to services; cooperate to use available resources to achieve the best possible housing outcomes; & work diligently to match interventions w/household needs, strengths & wishes. Compliance w/CE is required for all ESG/CoC funded agencies & many others chose to use the system.

Shelter advocates are specially trained to assist clients on a daily basis and encourage them along their journey through case management, parenting classes, job skills training and more. For up to 30 days in shelter, the DV Lead works to help clients obtain permanent, safe and affordable housing, including a means of financial support as well as to help identify and overcome any other barriers faced upon exit. After exiting to permanent housing, clients receive quarterly follow up and support for up to one year to ensure continued safety and success, with continued encouragement to attend support group, counseling or life skills classes as needed.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
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NOFO Section V.B.1.e.

Describe in the field below how your CoC:

1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and
2.	accounted for the unique and complex needs of survivors.

**(limit 2,500 characters)**



The CoC understands that a trauma informed approach recognizes the pervasiveness and impact of trauma on victims, staff, organizations, and communities. Addressing the needs of survivors and with a range of lived experiences is facilitated principally through the CoC’s DV provider, SAFEHOMES of Augusta. This understanding and consciousness ensure that this understanding is incorporated into every aspect of SafeHomes’ administration, culture, environment, and service delivery.

Obtaining regular and pertinent feedback regarding the services provided by SafeHomes’ from both clients and community partners is an important part of being a trauma informed agency. The CoC works with SafeHomes to use both regulatory and internal evaluation surveys that help the CoC strengthen what is working, to try new and creative ideas, and to adjust practices that are perceived as not working. This feedback assists with implementation of quality assurance and involves planning, monitoring, and controlling the quality of project activities, processes, and outputs. To ensure the CoC remains victim-centered, collecting direct feedback from the clients communicates to them that their opinion is important and heard, and that CoC services are being responsive to their needs. In addition, the data will be used to navigate future growth of programs by analyzing unmet needs and strategizing on how to meet the needs of the clients and the community. In addition, the CoC, through SAFEHOMES, establishes “trust” with the victims served. SafeHomes demonstrates a genuine commitment to listening, learning, and taking action based on their feedback, if possible. The data collected will also be utilized in marketing strategies, recruitment, and community presentations to share the CoC’s success stories, the success of its programs, and how CoC services better the communities in which we live.

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

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

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

Describe in the field below:	
1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and

4. your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

The GA-504 CoC updates its CoC-wide anti-discrimination policies, as necessary, based on stakeholder feedback. Additionally, all CoC policies will be reviewed in the next 6 mo by the new Executive Board, with a specific lens focused on DEI and anti-discrimination. Each CoC Committee is asked for feedback, input & recommendations. In 2020, the CoC approved 2 CoC-wide project-level anti-discrimination policies that mirror fed policy: Involuntary Family Separation & Non-Discrimination and Equal Access & Gender Identity Rule, in line with HUD expectation. Complimentary verbiage was added to the CoC's Governance Charter, Written Standards and CE Policy & Procedures Manual as well. All HUD funded agencies are required to comply w/project-level policies & CE requirements and processes. Access to services, shelter & housing shall be free from discrimination including protections against splitting households based on composition; denying based on gender, age or familial status; & asking for proof or inquiries. Agencies must use appropriate, inclusive language in materials & other policy docs; ensure all clients understand their right to equal access, including privacy rights; be serviced in accordance with their gender identity; implement an anti-harassment policy, ensure a private space for intake/data collection; & include confidentiality practices to keep transgender status confidential. Agencies must create a formal grievance process that is rapid, thorough and openly transparent. The CoC assists partnering agencies with creating anti-discrimination policies consistent w/CoC-wide policies by requiring agencies to adopt the CoC-wide policies into their program procedures; hosting trainings on fair housing, adherence to the equal access & gender identity final rules and anti-discrimination and offer TA to address compliance concerns. The CoC evaluates compliance w/CoC's antidiscrimination policies & CE verbiage by conducting desk & in person monitoring of project every other year. Monitoring includes reviewing policies, procedure manuals, client files & interviewing program staff. The CoC addresses noncompliance w/CoC's anti-discrimination policy by issuing findings & required corrective action, which can include training & oversight. Failure to correct or repetitive noncompliance can result in loss of funding, removal of good standing status w/CoC & notification to other funders and interested parties.

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Augusta Housing Authority	10%	Yes-Both	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	

Describe in the field below:	
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,500 characters)

In years past, CoC partner agencies and CA staff struggled to develop a relationship with the local PHA. Numerous invitations to participate often went unanswered and there was not a referral relationship between CoC providers and the local PHA. CE staff worked to continue to assist clients with completing the application process for open waiting lists.

The GA-504 CoC has made great strides recently with collaborating with the Augusta Housing Authority (AHA). AHA has committed to a dedicated staff person that will regularly attend CoC meetings and is working to become a member of the CoC. Collaboration with AHA has also resulted in identification of homeless or previously homeless households who ultimately receive benefits through public housing or the HCV program and the development of preference policies that are more aligned with the needs of persons experiencing housing instability in the local community through the coordinated entry process. In addition, the AHA has committed resources, both personnel and financial, to the annual PIT count and is actively working on development of a formal relationship with the GA-504 CoC.

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

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

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	No
	Other (limit 150 characters)	
5.		

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

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

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		<b>Program Funding Source</b>
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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<b>1C-7e.1.</b>	<b>List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.</b>	
	Not Scored—For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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	If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
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PHA
Augusta Housing ...

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

Name of PHA: Augusta Housing Authority

## 1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Discharge Planning Coordination.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	No
2. Health Care	No
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	6
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	6
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

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

**(limit 2,500 characters)**

In the CoC competition, the GA-504 CoC required all renewal & new projects to fully commit to the HF approach & check HF related boxes in the project app. These apps are reviewed for consistency & commitment to Housing First. To ensure compliance, Housing 1st practices are reviewed during the regular on-site or desk monitoring the CoC conducts throughout the year using a CoC Board approved HF checklist. External to the CoC competition, CoC staff conduct monitoring visits w/all direct CoC recipients at least once every 2 years. Each project is assessed & scored on compliance with HF specific factors. Interviews are conducted w/staff & clients; written documents & program forms are reviewed, and outcomes & data are analyzed. Findings & corrections are issued on HF outside of the NOFO Competition process. CoC staff provide TA & training on HF-related topics. For the Competition, the CoC Board has begun using the results of the monitoring process to impact the scoring tool. Agencies w/out a recent assessment are sent a questionnaire to self-assess certain elements of their policies & procedures as it relates to HF. The purpose of the assessment is to ensure those committing to a HF approach are using it, prioritizing rapid placement & stabilization in PH, & removing any unnecessary barriers to services. The specific list of factors the CoC uses during the evaluation are: (1) access to housing-project must have low barriers to entry & ensure households have access despite no income, or criminal or eviction histories; (2) client input-client must be educated on housing search/placement, tenant rights & responsibilities, services offered & principles of Housing 1st, (3) Leasing/rental assistance-clients must have a choice in unit selection & be part of the process. Housing must be permanent w/clients signing lease/sublease & ensuring understanding of tenant rights & how to avoid evictions; (4) Services-clients must have a choice in services including type/intensity. Case plans must be client centered w/staff trained in strategies such as motivational interviewing & harm reduction.

1D-3.	Street Outreach—Scope.	
	NOFO Section V.B.1.j.	

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

**(limit 2,500 characters)**



The GA-504 CoC has adopted a coordinated Street Outreach effort leveraging participation from several key partner agencies (PATH, SSVF, etc.) led by the staff of the CoC's CE Team. These Street Outreach events occur twice a month and are targeted to locations within the community that have been identified by Partners, law enforcement and community members as "high-density" areas for the congregation of residents experiencing homelessness. The CE Lead coordinates with existing street outreach programs as well as private and public agencies, social service organizations, etc. for referrals so that individuals sleeping on the streets are prioritized for assistance in the same manner as any other person that is assessed. CE project staff performs outreach at soup kitchens and other areas where the homeless are known to congregate.

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

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		

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

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	0	0

<b>1D-6.</b>	<b>Mainstream Benefits--CoC Annual Training of Project Staff.</b>	
	NOFO Section V.B.1.m.	

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	No
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	

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

(limit 2,500 characters)

To keep program staff up-to-date on mainstream resources, information and availability of resources are disseminated through quarterly CoC and monthly committee meetings, a CoC newsletter, and ongoing training where new information is shared and peer learning is facilitated. The CoC works with mainstream programs that assist persons experiencing homelessness by coordinating with agencies who assist with mainstream benefit applications through the CE sponsor, as well as additional collaboration and coordination with DFCS and other benefit programs. The annual Homeless Stand Down event and other similar Resource Fairs targeted towards local homeless populations, includes healthcare providers who provide clients with onsite medical care and resources. Presenters come to partner agencies and clients to educate on available benefits, eligibility, enrollment and utilization; partner agency staff also assist with these applications on a case management level. 5) The CoC CE Sponsor at CSRA EOA is responsible for the CoC's strategy for mainstream benefits.

CoC partner agency, Golden Harvest has a dedicated caseworker on staff that goes into shelters and other locations with the sole purpose of helping individuals to access benefits. Through the local Health Department, WIC program coordinators also perform this service at various locations throughout the CoC service area to include shelters.

1D-7.	<b>Increasing Capacity for Non-Congregate Sheltering.</b>	
	NOFO Section V.B.1.n.	

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

**(limit 2,500 characters)**

GA-504's CA, Augusta HCD, utilized the response to the CV19 pandemic to forge multiple partnerships with local hotel and motel providers to afford access to non-congregate sheltering options when congregate shelter placement was not possible or practical. Utilizing a portion of the jurisdiction's HESG-CV funding award, Augusta HCD placed over 1200 households in temporary non-congregate shelter accommodations to families and individuals experiencing literal homelessness in Augusta since the onset of the CV19 pandemic. The partnerships forged in this implementation are open to the community, dependent on the availability of funding, through the community's Coordinated Entry intake and referral process

ID-8.	<b>Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.</b>	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:

- |    |  |
|----|--|
| 1. | develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and |
| 2. | prevent infectious disease outbreaks among people experiencing homelessness.             |

**(limit 2,500 characters)**

The GA-504 CoC effectively collaborated with state & local public health agencies to develop CoC-wide policies & procedures to respond to infectious disease outbreaks. The CoC Coordinator attended quarterly inter-governmental meetings to address barriers w/in government services w/the response to COVID & other health outbreaks; bi-weekly DPH / EMA COVID emergency response strategy meetings that included local and state Health Dept. staff. The CoC Lead organized weekly local homeless forums w/local officials & CoC partners to support education & awareness of various programs & resources. As part of the DPH/EMA COVID response meetings, the CoC Coordinator worked w/the other 3 CoC leaders, state & local partners to create policy & procedure recommendations using lessons learned during COVID to improve a response to infectious or healthcare crisis w/the goal to add to the local plan to end homelessness previously approved by the local CoC. Specific to the CoC, the CE Team established a process to adjust priorities & policy to address the pandemic when necessary. This policy is codified in the CoC's CE P&P. The CoC amended program standards to address program needs associated w/COVID, and incorporate HUD-issued waiver provisions, as applicable, to program services. The CoC works to prevent infectious disease outbreaks among people experiencing homelessness by working w/DPH, hospital systems, local clinics & EMA. The CoC Coordinator advocated at the local level for homeless vaccine priority, more PPE, support for shelters & the need for more non-political basic info on COVID, testing & vaccines. CoC Lead staff met with CE and outreach staff, provided education & talk about CE; created lines of communication w/key DPH staff to help address local challenges & hospitals to find space for those in quarantine. The CoC Coordinator worked public health and local shelter staff to expand access & availability of testing, vaccines & supplies for those at risk, vulnerable, or staying in congregate or unsheltered settings.

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

(limit 2,500 characters)

The GA-504 CoC effectively collaborated with state & local public health agencies to develop CoC-wide policies & procedures to respond to infectious disease outbreaks. The CoC Coordinator attended quarterly inter-governmental meetings to address barriers w/in government services w/the response to COVID & other health outbreaks; bi-weekly DPH / EMA COVID emergency response strategy meetings that included local and state Health Dept. staff. The CoC Lead organized weekly local homeless forums w/local officials & CoC partners to support education & awareness of various programs & resources. As part of the DPH/EMA COVID response meetings, the CoC Coordinator worked w/the other 3 CoC leaders, state & local partners to create policy & procedure recommendations using lessons learned during COVID to improve a response to infectious or healthcare crisis w/the goal to add to the local plan to end homelessness previously approved by the local CoC. Specific to the CoC, the CE Team established a process to adjust priorities & policy to address the pandemic when necessary. This policy is codified in the CoC's CE P&P. The CoC amended program standards to address program needs associated w/COVID, and incorporate HUD-issued waiver provisions, as applicable, to program services. The CoC works to prevent infectious disease outbreaks among people experiencing homelessness by working w/DPH, hospital systems, local clinics & EMA. The CoC Coordinator advocated at the local level for homeless vaccine priority, more PPE, support for shelters & the need for more non-political basic info on COVID, testing & vaccines. CoC Lead staff met with CE and outreach staff, provided education & talk about CE; created lines of communication w/key DPH staff to help address local challenges & hospitals to find space for those in quarantine. The CoC Coordinator worked public health and local shelter staff to expand access & availability of testing, vaccines & supplies for those at risk, vulnerable, or staying in congregate or unsheltered settings.

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

(limit 2,500 characters)

Homeless individuals are provided access to services from multiple locations throughout the entire CoC geographic area, managed by a Centralized Intake and Assessment (CIA) center to ensure a fair and consistent process. Presentation at the CIA access point is not a prerequisite for service rendering as CE project staff can complete remote and, in some cases, on-site intake and assessment. Assessment can be completed in person, by phone or email, or with homeless outreach teams across the CoC. VI-SPDAT info is used to determine which housing intervention is the most appropriate. Referrals are completed through the CE workflow process in the HMIS system and are available to all HMIS CE Workflow participating programs. Households receive a score and are placed on the prioritization list with the most vulnerable at the top. The HMIS CE workflow process automatically compiles this list daily. The HMIS CE Workflow is completed and the household is enrolled within 24 hours of eligibility determination. CE staff or case managers provide the household with a list of available rental units that meet the needs of the household and assist as necessary with the goal of housing within 30 days. Once households have found appropriate housing and completed documentation, program staff will request financial assistance through the funding source referred by the CE project staff. Homeless households access the system through referrals from a wide variety of programs including, but not limited to, 211, school districts, domestic violence service providers and all members of the CoC. The CE Lead coordinates with existing street outreach programs as well as private and public agencies, social service organizations, etc. for referrals so that individuals sleeping on the streets are prioritized for assistance in the same manner as any other person that is assessed. CE project staff performs outreach at soup kitchens and other areas where the homeless are known to congregate.

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

(limit 2,500 characters)

Homeless individuals are provided access to services from multiple locations throughout the entire CoC geographic area, managed by a Centralized Intake and Assessment (CIA) center to ensure a fair and consistent process. Presentation at the CIA access point is not a prerequisite for service rendering as CE project staff can complete remote and, in some cases, on-site intake and assessment. Assessment can be completed in person, by phone or email, or with homeless outreach teams across the CoC. VI-SPDAT info is used to determine which housing intervention is the most appropriate. Referrals are completed through the CE workflow process in the HMIS system and are available to all HMIS CE Workflow participating programs. Households receive a score and are placed on the prioritization list with the most vulnerable at the top. The HMIS CE workflow process automatically compiles this list daily. The HMIS CE Workflow is completed and the household is enrolled within 24 hours of eligibility determination. CE staff or case managers provide the household with a list of available rental units that meet the needs of the household and assist as necessary with the goal of housing within 30 days. Once households have found appropriate housing and completed documentation, program staff will request financial assistance through the funding source referred by the CE project staff. Homeless households access the system through referrals from a wide variety of programs including, but not limited to, 211, school districts, domestic violence service providers and all members of the CoC. The CE Lead coordinates with existing street outreach programs as well as private and public agencies, social service organizations, etc. for referrals so that individuals sleeping on the streets are prioritized for assistance in the same manner as any other person that is assessed. CE project staff performs outreach at soup kitchens and other areas where the homeless are known to congregate.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

1. Upon each client’s request for assistance, intake, and office visit a copy of reputable and affordable housing options are provided to client via email or hard copy. The housing options is compiled of landlords who have previously worked with those in our community experiencing hardship to include but not limited those clients who are identified as homeless. These landlords have in the past made exceptions for previous evictions, low to no credit score, and lack of income to meet threshold for 3 times rent requirement.
2. During intake clients are provided with CSRA EOA's Clients Rights and Obligations, CIA Grievance Policy and HMIS Privacy Policy along with a copy of the Georgia tenant handbook and HUD website information printouts regarding Fair Housing. Any client experiencing an unjust eviction is provided contact information for Georgia Legal Services to address the legality of their eviction.
3. In addition to reporting to the Collaborative Applicant, Augusta Housing and Community Development (which is responsible for certifying consistency with the local Consolidated Plan), GA-504 CE Staff reports any unsafe living conditions to Augusta 3-1-1 or a formal report is made to Code Enforcement. Clients are also encouraged to self-report the aforementioned entities if they decline to provide all information required for report from Coordinated Entry staff.

1D-10.	Advancing Racial Equity in Homelessness–Conducting Assessment.	
	NOFO Section V.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	No
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	10/01/2019

1D-10a.	Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

Describe in the field below:	
1.	your CoC’s process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

**(limit 2,500 characters)**



The GA-504 CoC’s process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance includes data analysis, client surveys & participant input during monitoring visits. Data includes a HMIS reporting, PIT & CE demographic info. Client surveys include the annual gaps & needs survey, CoC Board approved questions for participants of CoC funded programs, & feedback provided by CoC Partner staff. In comparing the overall rate of homelessness w/the rate by race & ethnicity, the CoC can determine whether there is a disparity. If there is no disparity, the rates will be within reasonable equilibrium of one another. In these assessments, the total population is derived from the US Census Bureau Decennial 2020 count & the count of clients comes from HMIS service data. Using the analysis described, the GA-504 CoC identified that while there are racial disparities in the data relative to the % of the total population experiencing homelessness that Black/African-American and Hispanic, the provision or outcomes of homeless assistance do not evidence a disparity in the provision of assistance. When looking at who experiences homelessness by race, people who are Black are significantly more likely as to experience homelessness in 20-21 compared to White; Multi-race, Am Indian, Native Hawaiian, & Asian. Hispanic/Latino are as likely as non-Hispanic/Latino. The data includes those identified by CE or served in shelter, outreach, , & transitional housing projects. Looking at who entered into CoC-funded RRH or PSH during the same reporting period: showed no statistically significant variance from the trend lines established by those experiencing homelessness. Looking at those exiting successfully to permanent destinations from CoC-funded RRH or PSH in the same reporting period, the overall success rate is higher among racial minorities than whites. By race, success rates for Black, Multi-racial, Asian, Hispanic/Latino are greater than for whites. In summary, those identifying as Black, Am Indian & Native Hawaiian are more likely to experience homelessness than people who are white. Yet, they are also more likely to enter CoC-funded RRH or PSH projects as well.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

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

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

9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	No
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	No
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	No
	Other:(limit 500 characters)	
12.		

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The GA-504 CoC & homeless provider Partners have taken steps to address disparities in the provision of service or outcomes of homeless assistance identified in 1D-10a. Steps include staff education & awareness; establishing data baselines & collect additional data elements to better understand patterns and measure progress; gather feedback from people w/lived experience to improve project participant outcomes; review policy & procedures, including CE; & expand outreach to places w/underrepresented groups (i.e. Hispanic/Latina communities).. CoC surveys were developed & applications revised to help ensure representatives reflect the populations being served, including race & ethnicity. The HMIS lead created a HMIS customized Racial Disparity report that can be used at the CoC & project level to review rate of homelessness, project entry & outcomes w/race & ethnicity overlays. CoC staff work w/committees to enhance client surveys for the annual gaps & needs assessment & CoC Leadership will continue to host discussions to better understand the experiences of those using the homeless service system. The CE Team is working on policy & procedure review from a racial equity lens, expanding outreach & marketing to underserved areas & populations. CoC Committee members are tasked w/developing strategies to expand access & work to remove barriers to services, particularly for those overrepresented in the homeless pop. Agencies must continue developing robust tools for service delivery, aware of the racial disparities in outcomes & tailoring support as needed. By creating agency awareness, a mechanism for evaluation & hearing from those w/lived experience, the GA-504 CoC intends to hold agencies accountable for addressing disparities.

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

Describe in the field below:

1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and
2.	the tools your CoC uses.

**(limit 2,500 characters)**

The GA-504 CoC has established various measures to track progress on prevention or eliminating disparities in the provision or outcome of homeless assistance. At the CoC level, CoC staff will continue to refine and utilize the customized Racial Disparity HMIS report created by the HMIS lead. Run annually, this data will help the CoC review the overall rate of homelessness by race & ethnicity, program entry and successful exits. Tracking progress CoC-wide year-to-year provides the ability for projects and collaborators to make changes that can impact the data. It is the goal of the GA-504 CoC to see no difference by race in who is experiencing homelessness, that the percentage of those getting into programs matches w/the percentage that is homeless, & that there is no disparity related to race when looking at successful outcomes. This report will be used to educate & inform local CoC partners on their data & continue to use it to assess local progress. CoC staff will continue to use the PIT count demographics to measure change among those sheltered & unsheltered w/in the GA-504 CoC & drilling down to Project level data. PIT data also compartmentalizes fleeing/attempting to flee DV, veterans & youth which can be additional subpopulations to analyze for disparities in service provision. CoC staff will continue to use CE Priority List data to measure change among those experiencing homelessness & those prioritized for interventions. By analyzing these data elements, the CoC can track progress w/the goal to eliminate disparities both in homelessness, access to programs/services & outcomes. The CoC is working to identify additional complimentary measures or elements that should be collected to analyze progress. The GA-504 CoC has measures in place in the recently approved Strategic Plan to end homelessness including enhancing the way we identify, prevent & eliminate disparities. There has also been an expressed interest in expanding the review to include other types of inequities including gender, LGBTQ & disability status.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts.  NOFO Section V.B.1.r.	
Describe in the field below your CoC’s outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.		

**(limit 2,500 characters)**

Potential CoC members are identified and invited on a rolling basis throughout the year. The CoC has at least one formerly homeless member of the Executive Committee at all times. Through progressive outreach through Partner Agencies, community networking and CE Outreach efforts, new members with lived experience of homelessness are recruited to join and participate in Continuum activities, including participation in Committees and Workgroups, including the CoC's Executive Committee. Participation in the CoC's Executive Committee provides opportunity for local residents with lived experience of homelessness to assume leadership roles and contribute to the decision-making processes of Continuum activities.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

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

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

1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

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

**(limit 2,500 characters)**

The GA-504 CoC & partner agencies have not historically intentionally provided professional development & employment opportunities to people w/lived exp. This is a component of GA-504's local strategy that is a high-priority for systemic change in 2023. At CoC Board and Committee level, people w/lived experience that participate on the Board, and in CoC Committees in both leadership and non-leadership roles, are provided onboarding support on policy, past practice, homeless service funding & priorities. All are encouraged to join CoC hosted training on housing issues (fair housing, ADA); sub-population specific (LGTBQ, HIV/AIDS, DV, Vets, etc.) subjects; & outreach / engagement strategies. There is never a cost to participate in any trainings for CoC members w/lived exp. Consideration has been given to the hiring process for CoC staff to potentially adjusting recruitment strategies, language in ad & requirements for higher education to actively seek someone w/lived experience for the Homeless Coordinator position tasked w/overseeing the CoC's approved Strategic Plan. In next hiring process for additional positions, efforts to prioritize those w/lived experience & actively seeking people w/direct knowledge of the homeless service system services from a participant perspective. Former clients & others w/lived experience are recruited and encouraged to apply for the CoC Board, CoC leadership positions & join the CoC and CoC committee where they feel that they can make impact. Within partner agencies, staff seek recommendations for people w/lived experience to serve on boards & other policy making entities. Supervisors seek to hire people w/lived experience as CM and/or peer specialists to work alongside clients in housing & shelter programs. Shelters seek volunteers to help w/daily upkeep; operate groups; & provide service feedback & suggestions. Agencies provide staff dev training, volunteer support & onboarding activities to help adjust to the role, provide background knowledge & create a culture of communication & support.

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

(limit 2,500 characters)

1. The GA504 CoC has incorporated entry and exit surveys to better determine the risk factors that contribute to persons experiencing homelessness, including those experiencing homelessness for the first time.
2. The CoC routinely gathers feedback from participants in CoC and ESG funded programs to better understand barriers they experience and how program services can better address those barriers.
3. The GA504 CoC is implementing diversion strategies to avoid first time homelessness including collaboration with the faith based community to provide assistance where Federally funded programs cannot assist. Identifying the clients' obstacles, available personal and community resources and utilizing case management to ensure maintenance of housing stability and reduce the potential of experiencing continued or repetitive episodes of homelessness. Identifying and working with housing subsidy providers and linking eligible households to providers affords the opportunity to have the strongest effect on lowering rates of homelessness. The GA504 CoC also places a strong emphasis on supportive services coupled with permanent housing opportunities for persons with disabling conditions, including addiction. The GA504 CoC also works with the local Legal Aid organization to provide representation and services for families facing eviction.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

**(limit 2,500 characters)**

Through the GA504 CoC's Homeless Task Force Strategic Plan, as Approved by the Augusta, GA Commission in May 2022, the CoC has incorporated through special exemption the opportunity to develop "tiny-home villages" intended specifically for the use of serving the housing needs of residents experiencing homelessness. With the adoption of the Code Amendment in July of 2022, Augusta now has the ability to add this housing and land use type to the community's inventory of available residences for clients served by CoC Partner Agencies. Further, additional actions have been presented and are under consideration for Commission adoption to further modify existing Code and Land Use policies to allow for the incorporation of "Accessory Dwelling Units" to further diversify and add to the inventory of affordable housing in Augusta, Georgia.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	<b>Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice.</b> NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	07/27/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	07/27/2023

1E-2.	<b>Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.</b> NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
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1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	No
4.	Provided points for projects that addressed specific severe barriers to housing and services.	No

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	No

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

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.  
 Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	4
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)



The GA-504 CoC revises the process for scoring & selecting project annually by collecting & analyzing data, past comp results & getting feedback. PIT, CE & SPM project & CoC level data & trends are reviewed & shared @ CoC mtgs. Scoring Tool criteria includes project performance & outcomes, CE, Housing 1st compliance, SPM & CoC-level action steps. Data sources include project APRs, CE data, monitoring results, customized HMIS reports on project-level SPM & other population & vulnerability metrics. Scoring criteria changes for each housing type (PSH/RRH) given the specific needs of the target population. The CoC collected & analyzed data relative to each project that successfully housed clients in PH by reviewing APR data on housing stability-calculating exits to PH & those retaining PH.

The CoC analyzed data on how long it takes to house people in PH by reviewing CoC APRs & a customized HMIS report that shows LOT btw client entry & move in date. These can be reviewed by project type provider. The CoC also considered specific severity of needs & vulnerabilities experienced by those with difficulties locating, attaining and maintaining PH by awarding pts to those projects serving higher % of clients w/disabilities (including mental health, substance abuse and co-occurring disorders); chronic homeless; no income @ entry; & from unsheltered living situations. Data comes from project APRs & custom HMIS reports to show new entries during Program year. Projects serving those w/the highest barriers may have lower outcome data scores (% exits to PH, increase income, reoccurrence) but have higher scores because of client characteristics (chronicity, disability, no income, coming from unsheltered situation). For new projects, the GA-504 CoC considers proposals to provide housing & services to the hardest to serve populations, particularly in an underserved area. Need based on data is requested & scored in review process. In CE, the assessment score is based on vulnerability and high needs.

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

(limit 2,500 characters)

The GA-504 CoC obtained input & included people of different races, particularly those overrepresented in our local homeless population by sending out the request for feedback & comments on the scoring tool used to score & rank projects to all local CoC/ESG-funded partners, posting on website, intentional outreach to those working w/BIPOC, LGBTQ & people w/disabilities. All feedback is encouraged & welcome to ensure a strong tool reflective of diverse opinions, experiences & backgrounds is used. The GA-504 CoC used input received to determine the rating factors & scoring metrics used to review project applications. As a result of input, no new factors were added or changes made to the FY22 tool. The CoC included people of different races in review, selection & ranking process to approve all review, selection & ranking policies for renewal & new projects, including scoring & selection criteria; the final CoC app & priority listing w/final rank of all projects. The GA-504 CoC Board includes a representative w/lived experience. Several Board members & CoC Lead staff review each project applications using the approved rubric, scoring & ranking for renewal projects. The CoC rated & ranked projects based on how well they identified barriers to participation faced by people of different races & ethnicities & the steps the project has taken or will take to eliminate those barriers by scoring action plans (which include work on racial disparity & addressing barriers) & CE review. The CE review of demographics includes race & is done w/in the local CoC-level annually. Specifically looking at the difference between race, ethnic and gender disparities. CoC Lead staff reviews data annually & present to local stakeholders and CoC members a snapshot of reoccurrence data & demographics -including whether 1 group is more/less likely to reoccur into homelessness. CoC project monitoring will start including an evaluation on whether projects identified barriers to participation & what steps were taken to address & eliminated those barriers.

<b>1E-4.</b>	<b>Reallocation—Reviewing Performance of Existing Projects.</b>	
	NOFO Section V.B.2.f.	

Describe in the field below:

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

**(limit 2,500 characters)**

The GA-504 CoC routinely conducts an annual ranking and review process of all of its CoC funded projects to determine if they should continue. Projects are ranked based on objective criteria, vulnerability of the population served and system wide capacity to reduce homelessness and promote housing stability. This year, it used the HUD Project Ranking and Rating tool to rank projects based on 12 measures of performance. The tool satisfies the objective criteria requirement in the FY 2023 CoC Program NOFA. Priority is given to projects that serve the most vulnerable target groups, within the target population eligible for Permanent Supportive Housing. Priority is also given to projects which are 100% Dedicated projects to serve chronically homeless individuals and families. Additional ranking criteria are based on the projects' performance in serving the highest number of vulnerable individuals, especially those with more than one condition at entry and those who have experienced domestic violence, abuse, trafficking or other forms of exploitation. Key performance criteria are measures of housing outcomes described in the Rating and Ranking Procedure portion of the CoC's Written Standards. If a project is identified as low performing or demonstrates other unsatisfactory performance measures, including occupancy rate and costs, the project sponsor is advised that the project will be reallocated to meet the CoC's priorities or will be replaced by a project which scores highest on the HUD renewal/expansion project rating tool.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/18/2023

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

	<p>Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.</p>	08/28/2023
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1E-5b.	<p>Local Competition Selection Results for All Projects.</p> <p>NOFO Section V.B.2.g.</p> <p>You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.</p>	
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	<p>Does your attachment include:</p> <ol style="list-style-type: none"> <li>1. Project Names;</li> <li>2. Project Scores;</li> <li>3. Project accepted or rejected status;</li> <li>4. Project Rank—if accepted;</li> <li>5. Requested Funding Amounts; and</li> <li>6. Reallocated funds.</li> </ol>	Yes
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1E-5c.	<p>Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.</p> <p>NOFO Section V.B.2.g. and 24 CFR 578.95.</p> <p>You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</p>	
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	<p>Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included:</p> <ol style="list-style-type: none"> <li>1. the CoC Application; and</li> <li>2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.</li> </ol>	09/25/2023
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1E-5d.	<p>Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.</p> <p>NOFO Section V.B.2.g.</p> <p>You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</p>	
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	<p>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.</p>	09/25/2023
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## 2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>2A-1.</b>	<b>HMIS Vendor.</b>	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	Eccovia Solutions
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<b>2A-2.</b>	<b>HMIS Implementation Coverage Area.</b>	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Single CoC
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<b>2A-3.</b>	<b>HIC Data Submission in HDX.</b>	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/28/2023
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<b>2A-4.</b>	<b>Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.</b>	
	NOFO Section V.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;	
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database–compliant with the FY 2022 HMIS Data Standards; and	

3. state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

The CoC and HMIS Lead for GA504 coordinates with the Statewide GAHMIS Steering Committee to ensure access to and participation in an HMIS comparable database for Augusta's DV Providers. This HMIS-comparable database is developed and maintained, in compliance with HUD HMIS Data Standards, by the GAHMIS Implementation's HMIS vendor, Eccovia Solutions. Through consultation, oversight and engagement with the GAHMIS Steering Committee, GA504 is able to ensure that the GA504 CoC is in compliance with HUD's 2022 HMIS Data Standards.

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

Enter 2023 HIC and HMIS data in the chart below by project type:

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	407	12	387	97.97%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	0	0	0	
4. Rapid Re-Housing (RRH) beds	0	0	0	
5. Permanent Supportive Housing (PSH) beds	25	0	25	100.00%
6. Other Permanent Housing (OPH) beds	0	0	0	

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

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

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

(limit 2,500 characters)

GA-504's biggest deficits have been in having operating RRH Beds on-line due to provider staffing issues and funding delays. Additionally, the CoC has not been successful thus far in integrating HUD VASH inventory on to HMIS, which is indicative of the 159 OPH beds listed not in HMIS. Continued conversation with local VA Leadership is being pursued to better align this program with the CoC's efforts to consolidate efforts and data. Also, GA-504 continues to work to bring our faith-based missions that provide emergency shelter into our HMIS database, but continued efforts to incentivize their participation have failed to gain their support. The CoC intends to further these efforts through new initiatives conducted by Coordinated Entry staff performing direct outreach to clients served by these providers, with hopes that they will bring their programs online in the coming program year.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
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## 2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2023 PIT count.	01/23/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023
--	---	------------

2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)



The GA-504 CoC implemented several changes to improve its 2023 count to better represent the following sub-populations (1) persons experiencing CH; (2) families w/children and (3) homeless Veterans, (4) homeless youth. Changes included increased coordination with partner agencies and improved HMIS data analysis. The GA-504 PIT count sub-committee held meetings starting in summer of 2022 with agencies that specifically serve each of these populations to identify any potential they may have been unrepresented in the 2021 count and to formulate an improved process for this year. For all populations, including youth, GA-504 improved sheltered data integrity by having the HMIS admin analyze shelter PIT reports and engage in direct TA to ensure data quality, validity and integrity related to CH designation, especially in local emergency shelters. In an effort to improve the sheltered PIT count for homeless families, the HMIS admin provided training to partner agencies who are the main provider of ES services for families within the CoC. Training focused on ensuring accurate intake dates and family composition. To better count homeless youth, PIT Count Coordinators worked with other members of PIT Count Committee to engage youth peer volunteers to identify locations where homeless youth are known to frequent and to participate in the count. The PIT Count Coordinators will continue to work w/stakeholders, community members, business owners & people w/lived experience to review past locations & identify new locations during each PIT planning period. Specifically for youth, the CoC will continue to work w/youth providers & local youth to revamp the night of the count process to select locations where homeless youth would most likely be identified. Feedback was also requested on partners, locations & approaches to use during the post-PIT count (up to 7 days after count). Emphasis is placed on using non-traditional partners, other systems of care, and other “touch points” to help engage w/anyone that may have been missed on the night of the count. In a large geography, the post-blitz PIT service-based count provides more opportunity to reach eligible respondents, especially ones that are harder to identify, such as homeless youth. The CoC will continue to increase coordination with community partners and improve HMIS data quality again to ensure and accurate reflection of sub-populations in future counts.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
	3. describe how the changes affected your CoC’s PIT count results; or	
	4. state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

Going into PIT 2023, GA-504 instituted data quality protocol changes to improve the validity of the unsheltered PIT data. There was a heavier focus on providing one-on-one technical assistance with non-HMIS agencies and providing through HMIS data quality training with HMIS-participating agencies these data quality changes improved the validity and reliability of the data. The CoC facilitated increased training opportunities for the community on PIT requirements and specifically worked with the DV shelters and non-HUD-funded transitional housing programs to ensure a complete census on the night of the count. Training focused on ensuring the numbers reported reflect timely data entry and data accuracy from each contributing partner agency. In addition, improved data quality training with HMIS-participating agencies lead to better data collection, resulting in an increase of persons reported from 2022. The CoC lead, organized and analyzed PIT data reports from HMIS and had individual communication with each contributing partner agency to ensure timely data entry and data accuracy. Review of intake dates noted within HMIS ensured a proper count of those utilizing shelter services on the night of the count. The result of this review and subsequent data correction by agencies was a reported increase of persons utilizing emergency shelter on the night of the count.

## 2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

**(limit 2,500 characters)**

(1)The CoC has incorporated entry and exit surveys to better determine the risk factors that contribute to persons experiencing homelessness including those experiencing homelessness for the first time. The GA-504 also analyzes the supply of permanent housing units for persons with low income throughout the community compared to the number of individuals receiving services through CoC partners annually and the number of days/nights that temporary shelter options are being utilized.

(2)Implementing diversion strategies to avoid first time homelessness including collaboration with the faith based community to provide assistance where federally-funded dollars cannot; ID’ing the clients’ obstacles, available personal and community resources and utilizing case management to ensure maintenance of housing stability and reduce the potential of experiencing homelessness. Identifying and working with housing subsidy providers and linking eligible households to providers affords the opportunity to have the strongest effect on lowering homelessness rates. The GA-504 also places a strong emphasis on supportive services coupled with permanent housing opportunities for persons with disabling conditions, including addiction. The CoC also works closely with the local Legal Aid organization to provide representation and services for families facing eviction.

(3) Coordinated entry through CSRA Economic Opportunity Authority’s Centralized Intake and Assessment/Resource Center for the Homeless.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	

- In the field below:
- |    |  |  |
|----|--|--|
| 1. | describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;   |  |
| 2. | describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and   |  |
| 3. | provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless. |  |

**(limit 2,500 characters)**

Using a RRH model that aims to ensure families and individuals are placed within 30 days of presenting for services; clients are assessed using SPDAT tool to ensure provision of appropriate services and interventions; chronically homeless individuals and families are given preference / priority for permanent housing placement. Outreach is performed bi-weekly to actively identify these populations; if PSH is unavailable at the time of assessment, RRH model can be used as interim assistance until PSH placement is possible (if necessary). ID'ing the clients' obstacles to, available personal and community resources and utilizing case management to ensure maintenance of housing stability and reduce the potential of returns to experiences of homelessness. ID'ing and working with housing subsidy providers and lining eligible households to providers affords the opportunity to have the strongest effect on supportive services coupled with the housing assistance. GA504 places strong emphasis on permanent housing opportunities for persons with disabling conditions, including behavioral health/developmental disabilities and addiction.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section V.B.5.d.	

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

**(limit 2,500 characters)**

GA-504 has developed strategies to increase the rate at which households in ES, TH and RRH exit to permanent destinations. Current strategies are: (1) connect the most vulnerable households to RRH and PSH through an efficient and effective CE system (2) build relationships with local landlords to increase access to affordable housing units (3) connect households to mainstream housing subsidies (4) connect households to support services and mainstream benefits (5) connect households to education/employment training opportunities to improve their self-sufficiency. In unison, these strategies ensure households are linked to affordable housing options, have the necessary income to afford access and sustain that housing and have services available that are appropriate to ensure ongoing housing stability. Strategies to increase the rate at which households in permanent housing projects, other than RRH, retain their permanent housing or exit to permanent housing destinations have been more successful with a rate of 97% in FY22. Current strategies are (1) engage with consumers to ensure they are meeting their individualized service goals and are stable within housing (2) implement the CoC Move On Strategy, which includes providing pre-transition services such as basic living skills training, employment and community integration supports – as well as strong aftercare supports to ensure a successful transition over the long-term and (3) partner with affordable housing providers and cultivate relationships with local landlords to maintain an ongoing list of affordable housing vacancies. These strategies ensure clients in PSH programs are supported in maintaining housing, while fostering opportunities for greater housing self-sufficiency within the community. The position in charge of overseeing all of those strategies is the housing and services committee who reports to the GA-504 Executive Committee.

2C-4.	Returns to Homelessness—CoC’s Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	

In the field below:	
1.	describe your CoC’s strategy to identify individuals and families who return to homelessness;
2.	describe your CoC’s strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.

**(limit 2,500 characters)**

The Ga-504 CoC has implemented the utilization of entry/exit surveys to identify the risk factors clients experience allowing for analysis of the impact of these factors on the outcomes the clients experience. The CoC has designated the management of this responsibility to the HMIS admin. Partner RRH/PSH agencies offer wrap around services and intensive case managements to address the barriers that made or kept clients homeless so as to prevent a return. Partner RRH/PSH agencies continue support of clients upon program exit for approximately six months to ensure housing stability and/or provide resources as needed to maintain housing status. Prevention and shelter diversion are key interventions in the CoC’s fight to reduce returns to homelessness. Immediate screening for these possibilities at entry preserves emergency beds for those who truly have nowhere else to go. Access to rental subsidies and CM at entry is often enough to ensure formerly homeless households successfully maintain stable housing. The CoC utilizes these tactics interchangeably in its strategy. Prevention targets those at imminent risk of homelessness and diversion targets people as they are applying for entry into shelter. Once a household enters in the system, it is assessed to determine needs through a series of questions during assessment.

Diversion activities include:

- Financial assistance;
- Mediation;
- Legal assistance;
- Exploration of other short term housing options;
- Referral for mainstream resources;
- Other emergency assistance

The determining factor that CE staff will weigh when considering diversion assistance is “but for” the assistance be requested; the household would return to homelessness. This ensures that diversion assistance will be provided to the households in most need.

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

(limit 2,500 characters)

- 1) The CoC’s strategy to increase access to employment income is through collaboration with employment agencies and implementing and strengthening supported employment programs. This process begins at the Coordinated Entry project, our CoC’s Centralized Intake and Assessment resource center. When families and individuals are assessed at the point of entry, they will be connected with local agencies who provide the necessary services that are appropriate for addressing their specific barriers to self-sufficiency. Some examples of employment resources are: Salvation Army Job Skills Training Program, Walton Options for Independent Living for those with disabilities, Vocational Rehabilitation through the GA DOL for those living with disabilities.
- 2) To increase access to employment, the CoC continues collaborations with providers like Goodwill to help clients gain work skills and employment opportunities. CoC agencies also collaborate on hosting job fairs to help bring employers to clients. CoC Partners work to identify and utilize additional employment opportunities through referrals to local apprenticeship, job training and soft-skills training programs such as Second Chances, RPM, and the EOA High Demand Career Initiative.
- 3)The CoC’s Executive Committee is responsible for overseeing the CoC’s strategy to increase jobs and income from employment.

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

**(limit 2,500 characters)**

The CoC’s strategy to increase non-employment cash income is to coordinate training and outreach and strengthen partnerships with agencies that assist with benefits. The CoC has a SOAR trained staff who act as liaisons with the social security office. The SOAR process is able to be started even before a client gets into housing to help get clients income sooner. These specialists work with clients to help them in the process of obtaining SSI/SSDI benefits to increase non-employment income.

2)The CoC strategy for increasing access to non-employment cash income isto increase non-employment resources the CoC assists clients in connecting with resources through our local Dept. of Human Service programs (TANF, WIC, EBT, etc.) through a partnership agreement between our CE project and the local DFCS office. Multiple CoC agencies work to provide clients with access to agencies that assist with SSI/SSDI, VA disability compensation, and retirement income to ensure clients are able to access benefits or begin the process as soon as possible. For Veteran clients, CoC veteran service providers utilize the VA’s Homeless Providers Assistance Program to determine benefits client can access.

3) The CoC Executive Committee is responsible for overseeing the CoC’s strategy to increase non-employment cash income.

### 3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
--	--	----

<b>3A-2.</b>	<b>New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.</b>	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

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

<b>3A-3.</b>	<b>Leveraging Housing/Healthcare Resources–List of Projects.</b>	
	NOFO Sections V.B.6.a. and V.B.6.b.	
	If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.	

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



### 3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>3B-1.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	NOFO Section V.B.1.s.	

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

<b>3B-2.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	NOFO Section V.B.1.s.	

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

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

**(limit 2,500 characters)**

N/A

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

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

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

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

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

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

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.

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

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

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.I.(1)(c)	

1.	Enter the number of survivors that need housing or services:	279
2.	Enter the number of survivors your CoC is currently serving:	67
3.	Unmet Need:	212

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

**(limit 2,500 characters)**

1. Element one includes all survivors needing housing and services, including those the CoC is already serving. In 2022, 279 households requested services from DV providers within the CoC. Of these households, 67 households with experience of DV were enrolled in housing projects in HMIS. This represents the 67 households represented in Element two. Coordinated Entry data is compiled in two lists, the Community Queue in HMIS & a confidential de-identified DV Queue managed through SAFEHOMES, the local DV provider. The DV Queue included 67 unique households as of 12/31/22. Some overlap may exist, but, due to underreporting of DV, it's likely the combined number is still an undercount.
2. SafeHomes utilizes various data sources to collect information about the clients served. SafeHomes uses the DV comparable database called Client Track as well as utilizes a state mandated database called CaseWorthy. Both data bases allow SafeHomes to provide intakes, set goals through an individualized service plan, as well as track their means of support/income.
3. While SafeHomes and the COC work collaboratively to ensure DV survivors are receiving services, many times they are still faced with barriers. Currently, in Richmond County there is a shortage of affordable housing. Due to high costs of living, inadequate wages, and wealth and income inequality, it doesn't allow for sufficient housing or supportive services. Other barriers that DV survivors face is lack of transportation and childcare. While Augusta has a public transit, many times, a DV survivor may not reside or work on or near the bus line, therefore they do not have access to public transportation. In addition, the public transit does not operate 24/7 and due to high cost of living, they are not able to afford taxi services or other means of transportation. SafeHomes assist DV survivor with obtaining employment, however, their hours or work may be after the traditional business hours of 8a-5p or weekends. With non traditional work hours, a DV survivor with children can not work due to lack of childcare or affordable childcare. Lastly, DV survivors experience long lasting trauma from abuse. While SafeHomes employees two licensed professional counselors, the demand for services outweighs the capacity in providing mental health services.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)	

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

Applicant Name
SAFEHOMES of Augu...

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	SAFEHOMES of Augusta, Inc.
2.	Project Name	DV Bonus Project RRH
3.	Project Rank on the Priority Listing	5
4.	Unique Entity Identifier (UEI)	0301400326
5.	Amount Requested	\$142,496
6.	Rate of Housing Placement of DV Survivors—Percentage	32%
7.	Rate of Housing Retention of DV Survivors—Percentage	99%

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

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

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

**(limit 1,500 characters)**

1) Both outcomes are from SH's existing RRH program that provides rental assistance and case management to achieve permanent housing for survivors. Rate of Housing Placement: Of the number of people who exited the project in the most recent reporting period, the percentage who were in housing when they exited. Rate of Housing Retention: Of the number of people who exited the project to permanent housing in the most recent reporting period, the percentage who retained housing 6 months after exit. 2) The project works with every survivor to develop a safety plan, which includes the safety of their permanent housing. Advocates work with every survivor to identify their safety needs in relation to housing, and all housing exits included in these outcomes align with that approach. 3) The data source for these outcomes is CASE WORTHY, SAFEHOMES' DV-comparable database.

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

(limit 2,500 characters)

SAFEHOMES runs a confidential shelter and a rapid rehousing program for survivors of intimate partner violence and sexual assault. In order to move survivors quickly in to housing, SAFEHOMES cultivates relationships with local housing providers, apartment complexes, & private landlords. Each participant is assigned a Case Manager and may also be supported by an Advocate, to help ID housing & build landlord relationships. In collaboration w/ clients, staff ID housing opportunities, negotiate w/ landlords, help clients submit housing apps, coach them on tenant right & responsibilities, & accompany them to visit units. 2) All RRH clients are prioritized & referred through the CoC’s DV Coordinated Entry System. SH’s program prioritizes survivors who are not necessarily connected to services. 3) Staff work with survivors to design individualized Housing stability plans (HSP) that identify the goals, barriers, & resources that will meet their needs. HSPs are created in partnership w/ survivors so they are survivor-driven & survivor-centered. Each plan incorporates 9 essential sections: Client documentation; Benefits; Physical/behavioral health; Education; Employment/Vocational Training; Legal; Permanent Housing; Transportation and Life Skills. 4) Services provided by SH or by referral include counseling, advocacy, crisis intervention and support safety, well-being and autonomy of survivors. Connections to parenting classes and / or education, mainstream benefits and social services and mental health services. 5) SH supports survivors from crisis to stabilization and long-term sustainability by: finding housing that will be affordable long-term; building economic stability through benefits eligibility screening & applications, job training & career planning; on-going safety planning, survivor support & legal services; life skills & tenant rights education; developing a self-identified supportive system; & linkages to mainstream community resources.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(d)		
Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:		
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	

3.	keeping information and locations confidential;
4.	training staff on safety and confidentiality policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

**(limit 2,500 characters)**

1) Intake & assessments are conducted by SAFEHOMES Advocates in private spaces, & adults in a household are interviewed separately. The SH office has exterior and interior security cameras in common areas, and security doors to private offices are accessed through secured keys. 2) Safety considerations are embedded in all aspects of service provision, including housing location, type, & amenities. Safety planning begins at intake & continues regularly as the survivor moves into & stabilizes in housing. Survivors and staff work together to ID potential risk factors & identify housing options that address the survivor's specific needs. Clients are supported to move from one housing situation or project to another if safety is in jeopardy. 3) Client information & locations, including locations of all housing & shelter, are kept confidential & protected through a comprehensive privacy and data security structure. All client data is maintained in an HMIS- comparable database only accessible to SAFEHOMES (SH) staff. Access is protected through a secured login and limited to computers controlled by SH. Paper records are stored in locked storage in a locked area of SH offices. Written protocols exist to ensure survivor privacy and safety in case of a data breach. All staff providing services to survivors are trained Advocates and are trained to assert advocate/client privilege to protect confidentiality when necessary. 4) All staff providing confidential survivor services have completed Advocate training and Caseworker training. Staff are also trained on internal policies & procedures, including for data management, conducting intake, and preserving the safety of program facility. 5) Keeping location of shelter confidential, working w/ local police for input on creating a security plan for shelter, including a map of the layout of the buildings w/ entrances & facility locations. Outdoor cameras, motion lights, & a 24/7 crisis line phone number for program sites. Regular meetings w/ survivors to discuss safety concerns, including input from law enforcement when necessary.

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

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.
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**(limit 2,500 characters)**



SAFEHOMES (SH) utilizes individual client data and aggregate program data to ensure continuous program and process improvement. SH's housing program measures program effectiveness through the use of client satisfaction surveys that capture quantitative and qualitative client feedback. Satisfaction surveys focus on client's perception of safety, increased knowledge of resources, linkage to services, feelings of empowerment and connectedness, as well as suggestions for program improvement. Program services are also evaluated to ensure services are meeting established key performance outcomes. Outcome data is analyzed on a regular basis to identify gaps in service delivery, improvement of services offered and partner commitment and quality of services delivered. Meetings are convened with case managers and community partners to facilitate collaboration and discuss/review program activity. In addition to satisfaction survey data from clients served, stability and progress are tracked in a secure database for all enrolled clients, and Advocates check in regularly with clients and adjust plans with clients on a regular basis dependent on their needs and situation. This data is used to evaluate success in ensuring safety of clients during enrollment. When incidents occur that impact client safety, SH conducts threat assessments and responds swiftly, in collaboration with law enforcement as necessary depending on the severity of the risk. These incidents are tracked and responses are reviewed to improve future safety planning.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:

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

(limit 5,000 characters)

The mission of SAFEHOMES (SH) is to create opportunities for positive change by promoting & supporting self-sufficiency and helping achieve the full potential of individuals served, the strengths of families, and the well-being of the community. All staff are DV Counselors & have completed Advocate training and Caseworker training, plus annual training on trauma informed care, cultural sensitivity, safety planning, confidentiality, harm reduction, & housing. 1) Safety planning, housing planning, and selection of services are survivor-led, with support from SH Advocates trained in evidence-based trauma-informed approaches & motivational interviewing. Using survivor-led approaches, survivors are empowered to choose the services & housing options that meet their needs, including full client choice in service participation & housing search. Housing stability plans (HSP) are created in partnership with the survivor and the case manager, are client centered, & must be agreed upon by the survivor. 2) SH is committed to a trauma-informed, survivor-centered, strengths-based, empowering and culturally sensitive framework to supporting survivors. Staff training of Advocates ensures that staff working w/ survivors understand the unique importance of autonomy, empowerment, & respect in the recovery process, and are adequately trained in evidence-based practices. Most importantly, staff provide services that are informed by client needs and engage clients in non- judgmental communication. Regular client surveys gather feedback on: strengths-based, nonjudgmental, responsive, understanding and respectful of gender/gender identity, sexual orientation, culture, religion, etc. 3) All SH staff will be trained in Trauma-Informed Services and in evidence-based interventions, including safety protocols and motivational interviewing. 4) SH’s approach to serving survivors is focused on identifying and building on strengths. Through collaborative housing stability planning, survivors identify their own short, medium, and long-term goals. To measure client progress, SH uses intensive case management and a self-assessment tool for individuals who wish to determine their own strengths & areas for improvement as they work towards self-sufficiency. SH’s housing stability plan is an effective tool for documenting the progress or maintenance of client skills and abilities by providing a clear demonstration of clients’ strengths are, as well as where to target interventions for improvement. 5) SH supports cultural responsiveness through its Diversity, Equity, and Inclusion (DEI) training, which promotes cultural awareness and inclusion. 6) Case managers work w/survivors to ID needs & goals with a focus on connecting to community and self-identified support networks. SH staff help survivors ID community & faith groups, school activities, and other ways to connect within the survivor’s community. 7) SH offers the following supports for parents: regular house meetings to build relationships & social networks, mobile case management, referral for mental health services for the survivor.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(d)		

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

(limit 5,000 characters)

SAFEHOMES' Housing Program has provided the following services for survivors of domestic violence and their families: A) Life Skills Development: Case Managers meet with survivors to help them acclimate, access resources such as bank accounts, childcare, school placements, or afterschool programs, & assist families to build life skills including budgeting for household expenses, household management, conflict resolution & parenting techniques. B) Transportation: The project provided transportation assistance to survivors. C) Job Skills and Training: SH helps clients build skills such as arriving at work on time, being a hard worker, taking responsibility, and positive communication with supervisors and co-workers. SH makes referrals to employment services including to Goodwill and First Step Staffing to supplement agency lead efforts to support clients. D) School Advocacy: If children and youth have issues enrolling and participating in school, staff advocate for the family with the local school system. Issues addressed may include remaining in the same school even if they had to move; enrolling in a new school without required records (proof of residency, immunizations, school records, or other papers left behind when the family fled violence; obtaining transportation to school; and accessing school services clients need. E) Food, Clothing and Hygiene Items: SH provides access to food prep equipment, referrals to Golden Harvest Food Bank to provide food for survivors & their children. Contributions of gently-used clothing & household items are accepted and maintained for use by all clients. F) Social Service Benefits: Referrals to Public benefits include Medicaid, SSI/SSDI, TANF and other mainstream benefits programs.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(e)	

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

(limit 5,000 characters)

The proposed RRH project will use all of the successful strategies used in existing SAFEHOMES program services, including Advocate training & trauma-informed care training for all project staff, plus annual training covering trauma informed care, survivor-defined advocacy, cultural awareness, safety planning, confidentiality and harm reduction. 1) Safety planning, housing planning, and selection of services will be survivor-led, with support from SH Advocates trained in evidence-based trauma-informed approaches and motivational interviewing. Using these best practice and survivor-led approaches, survivors will be empowered to choose the services and housing options they feel meet their needs, including full client choice in service participation and to direct the housing search to find housing that meets their needs. Housing stability plans (HSP) are a vital part of helping survivors achieve long term housing. HSPs will be created in partnership with the survivor and the case manager, will be client centered, and must be agreed upon by the survivor. 2) SH is committed to a trauma-informed, survivor-centered, strengths-based, empowering and culturally responsive approach to supporting survivors of intimate partner violence. Central to creating an environment of empowerment and mutual respect, all staff will receive training to support survivors appropriately. This will ensure that staff working with survivors understand the unique importance of autonomy, empowerment, and respect in the trauma recovery and healing process, and are adequately trained and supported in evidence-based practices. Staff approaches will be informed by harm reduction and will seek to engage clients in non-judgmental communication and offer education appropriate to the needs of the client. Regular client surveys will gather feedback on: strengths-based, nonjudgmental, responsive, understanding and respectful of gender/gender identity, sexual orientation, culture, religion, etc. 3) All staff will be trained to understand and recognize the patterns and impacts of trauma, to work with survivors to identify those impacts in their own lives, and to offer education to clients about the immediate & long-term effects of trauma. Staff will assist survivors to identify & meet any needs for mental health services that may arise. All staff will be trained in Trauma-Informed Services and Motivational Interviewing. 4) SH's approach to serving survivors is focused on identifying and building on clients' strengths. SH uses a housing stability plan as a case management resource and as a self-assessment tool for individuals who wish to determine their own strengths and areas for improvement as they work towards self-sufficiency. This plan is a tool for documenting the progress or maintenance of client self-sufficiency by identifying where a client has strengths, as well as where to focus additional energy to generate improvement. 5) SH supports cultural responsiveness through its Diversity, Equity, & Inclusion (DEI) training, which promotes cultural awareness and inclusion by: A) creating an open, welcoming environment by understanding and appreciating cultural differences; B) raising awareness around different cultural norms; C) building capacity for cultural responsiveness towards clients, each other, & the community at large through trainings and other opportunities for personal & professional growth. Staff of the proposed project will receive training in equal access, culturally responsive approaches to serving populations over-represented in the unhoused & survivor populations, and Fair Housing / non-discrimination. 6) Case managers will work with survivors to identify their needs and goals around connections to community and self-identified support networks. Staff will help survivors identify community and faith-based groups, school activities, and other ways to connect w/in the survivor's community. 7) Peer Counseling and Support Groups: SH will provide peer support groups in an atmosphere where trust & caring relationships can develop. Legal Services: SH refers to the GA Legal (local Legal Aid organization) for child custody legal

services. Parent Education: SH educates parents in ways designed to strengthen families & anchor children & families in positive relationships.

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(f)		

Describe in the field below how the new project will involve survivors:

- |    |   |
|----|---|
| 1. | with a range of lived expertise; and                                  |
| 2. | in policy and program development throughout the project's operation. |

(limit 2,500 characters)

Individuals with lived experience in gender-based violence and homelessness are uniquely positioned to inform programming and policy related to case management and housing services. Survivor input is incorporated into all aspects of SAFEHOMES' (SH) program development, implementation, and evaluation. During implementation of the proposed DV RRH project, project staff will provide an evaluation that clients can complete. This evaluation will collect feedback on how clients feel the programming is supporting them, as well as ideas for strengthening the program. Bi-annual review of evaluation data by the program director will guide program adjustments and subsequent programming implementation. Program staff will use program evaluations, focus groups, surveys, and individual interviews from project participants and staff to evaluate this project and create a findings report. Additionally, SH has a continuum of opportunities for survivor participation that will be leveraged for the proposed project. The spectrum includes: participating in focus groups, training panels, systems and policy advocacy, and part-time or full-time employment. SH's training approach is intersectional and collaborative. Most trainings include survivor case studies, and when possible, survivors participate in training panels to share their stories and answer participant questions.

## **Attachment Details**

**Document Description:** 1C-7 Augusta Housing Authority Homeless Preference GA504 CoC

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** 1D-11a. Letter Signed by Working Group

## **Attachment Details**

**Document Description:** 1D-2a. Housing First Evaluation

## **Attachment Details**

**Document Description:** 1E-1: Local Competition Deadline GA-504 CoC FY2023 CoC Competition

## **Attachment Details**

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

## **Attachment Details**

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

## **Attachment Details**

**Document Description:** 1E-5 Notification of Projects Rejected-Reduced  
FY2023 CoC NOFO

## **Attachment Details**

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

## **Attachment Details**

**Document Description:** 1e-5b. final\_project\_scores\_for\_all\_projects  
FY2023 GA504

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** 1E-5d - Notification of CoC-Approved Consolidated Application

## **Attachment Details**

**Document Description:** 2A-6 GA504 HDX 2023 Competition Report

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

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## Attachment Details

### Document Description: