## 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 HÚD's funding determination.

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

# 1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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:** MO-503 - St. Charles, Lincoln, Warren Counties

CoC

**1A-2. Collaborative Applicant Name:** Community Council of St. Charles County

1A-3. CoC Designation: CA

**1A-4. HMIS Lead:** Community Council of St. Charles County

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

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

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.
	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	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	Yes	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	Yes	Yes	Yes
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
9.	Law Enforcement	No	No	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	Yes	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	No	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes

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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	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	No	No	Yes
29.	State Domestic Violence Coalition	No	No	No
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Churches	Yes	Yes	Yes
35.	Faith-based ministries	Yes	Yes	Yes

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).

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 Community Council (CC) invites all member agencies to participate in the CoC; there is information on joining the CoC on the Community Council website. The Community Council specifically invites new members to join the CoC at least annually through our e-newsletter and communicates weekly to over 5000 individuals in the region through an email list serve which anyone can join. CoC Partners assist in reaching out and inviting new members from minority communities; minority groups feel the most welcome when being personally asked to join by another member of their minority group. Formerly homeless people serve on our board of directors, work with outreach and Coordinated Entry staff, and are involved in CoC meetings and activities. CE and outreach staff provide low barrier services at community congregate meals and events and invite people to become involved in the CoC. 2) The CoC holds many of our member meetings and subcommittee meetings virtually, with inperson membership meetings scheduled in publicly accessible locations. We communicate through an email listsery, and the CoC meeting schedule with locations and/or virtual links on our project management website. Coordinated Entry (CE) added an email option for services access to our website and CE marketing materials; the email goes directly to CE staff who respond electronically to any requests for services. 3) CoC leaders, Community Council staff, and CE staff are strongly committed to including culturally specific communities in CoC leadership and actively engage them in being a part of the homeless solution. Our staff, including Coordinated Entry staff, are culturally and physically diverse. Staff ideas for ways to improve equity and engagement are solicited weekly in short staff meetings we call "keep the conversation going...". Mostly virtual CoC meetings have allowed even greater inclusion and participation of those who have experienced homelessness, persons with disabilities, community volunteers, and others who want to be part of ending homelessness. There is diversity throughout the CoC membership, including all CoC committees, including the Executive committee. The data & performance committee is chaired by a CoC member who is from a racial minority. Additional opportunities for leadership and inclusion are available through engagement in the Emergency weather response committee, the point-in time count, and focus groups to improve service delivery to stakeholders.

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.

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 Monthly CoC meetings are open to the public. Inclusive discussions are held around key topics related to preventing and ending homelessness, and members are encouraged to contribute ideas. Emerging issues are identified and discussed. CoC partners are encouraged to actively participate in CoC subcommittees, including our 13-member executive committee. Conversations and working groups with public health and local municipal governments have been expanded. CoC leadership has also proactively reached out to include individuals from minority groups and those with lived experience of homelessness and had them host training for CoC members & staff. 2) One local mayor holds public meetings to solicit input into services for persons experiencing homelessness and has a task force along with CoC leadership working on solutions. When the public learned that CoC members did not receive state ARPA funding to help support several local housing projects, they requested follow-up meetings to give feedback to state officials and strategize alternative ways to move forward. In addition to CoC meetings and subcommittee meetings, CoC members and staff participate in more than eight additional working groups monthly, most that meet virtually, to strengthen community input and collaboration around ending homelessness. 3) Listening sessions with over 30 church and civic organizations, in addition to community groups and not for profits, have helped to shape and focus homeless solution planning as well as helping secure funding commitments for operational support. Listening sessions have been held both electronically and in accessible locations. 4) Feedback from stakeholders has been incorporated into overall municipal housing plans, which are also committing HOME-ARP funding to affordable housing. A "basecamp" project management website is used for all CoC partners to provide an on-going forum for continuous engagement and participation of all stakeholders. Quarterly electronic communications of CE results and homeless needs are shared to strengthen community ownership and engagement in preventing and ending homelessness.

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.

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in the CoC.

(1) For the FY2023 NOFO, CoC staff, on July 18th, sent an email to all CoC members with a NOFO announcement, and posted the CoC NOFO on the Community Council CoC website, along with information regarding the NOFA timeline, deadlines, HUD application weblink, and a scheduled application information session. (2) The CoC held an information session (July 31st) for agencies to learn more about the application process for the FY23 NOFO, and also ran NOFO announcements in the Community Council e-newsletter on 7/25/23, 8/1/23, and 8/8/23. The CoC scoring sheets were shared and posted on the Community Council website on August 10th, as well as a link to the CoC application information power point. (See attached power point). Several new partners expressed interest in applying for funding. CoC staff offered to continue meeting with these potential applicants in developing project their projects. (3) Information on CoC unmet needs is shared twice annually on the CoC project management website. Information on the rank and review process was shared at the information meeting and posted with the NOFO informational materials. During the information session, it was explained that any projects that addressed CoC unmet needs and met the HUD threshold for funding would be scored and prioritized by the rank and review committee. The updated project scoring tool was posted to the Community Council website on Aug. 10th; however, the previous tool was available for review at the time of the NOFO posting. (4) Participation in our CoC is very inclusive and accessible to persons with disabilities. CoC meetings are physically accessible if in person, and electronically accessible for 75% of the meetings in the past 3 years.

Information on committees, subcommittees, CoC data and performance, and announcements are all shared through the CoC project management website, which is easily accessible electronically for anyone who would like to participate

# 1C. Coordination and Engagement

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.
	NOFO Section V.B.1.b.
	In the chart below:
	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. Fund	ling Collaboratives	Nonexistent
2. Head	d Start Program	Yes
3. Hous	sing and services programs funded through Local Government	Yes
4. Hous	sing and services programs funded through other Federal Resources (non-CoC)	Yes
5. Hous	sing and services programs funded through private entities, including Foundations	Nonexistent
6. Hous	sing and services programs funded through State Government	Yes
7. Hous	sing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8. Hous	sing and services programs funded through U.S. Department of Justice (DOJ)	Nonexistent
9. Hous	sing Opportunities for Persons with AIDS (HOPWA)	Nonexistent
10. India	n Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11. Orga	nizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12. Orga	nizations led by and serving LGBTQ+ persons	Yes
13. Orga	nizations led by and serving people with disabilities	Yes
14. Priva	ate Foundations	Nonexistent
15. Publi	ic Housing Authorities	Yes
16. Runa	away and Homeless Youth (RHY)	Yes
17. Temp	porary Assistance for Needy Families (TANF)	Nonexistent
Othe	r:(limit 50 characters)	

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18. TANF personnel not pe	rmitted; Coordinate with health providers, churches, first responders.	Yes
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)

ESG funding for our CoC comes from the Missouri-balance of state allocation, rather than a grant through our CoC. CoC members are very active in state committees, including the development and approval of statewide performance standards for ESG funding. Statewide ESG shelter standards, outreach standards, rapid rehousing standards, and homeless prevention standards have been approved by our CoC. (1) Potential ESG applicants from our CoC discuss the best applications to address needs in our Continuum; this year, recipients were notified that the state had reduced the percentage of our CoC ESG allocation, despite increased need and ESG state revenue. While our CoC establishes CoC funding priorities and communicates those priorities to the Missouri Housing Development Commission (MHDC), we have learned of a funding bias against more affluent communities, despite growing need. Our CoC is focused on advocacy at the state level for a fairer allocation of ESG funding. (2) Dedicated CoC staff quarterly monitor and report ESG recipient performance through HMIS uploads. We also share agency ESG program performance data with MHDC staff and provide feedback on ESG funding projects impacting our CoC performance. The state requests, the CoC score ESG applicant participation in our CoC; we provide the state the feedback requested. (3) Our CoC prioritizes homeless and housing needs and shares our information, along with systems performance reports, with local jurisdictions for Con Planning. The CoC shares PIT, housing inventory, system performance, and other data with the State of Missouri (MHDC), St. Charles County, St. Charles City, and the city of

O'Fallon, as well as other counties and local municipalities. (4) The CoC hosts Con Plan public hearings upon request of local jurisdictions. Local CDBG staff are a part of the CoC, and local municipalities financially support CoC staff, as well as allocating local CDBG funding for housing and homeless services. Con planning meetings and updates are held in collaboration with the CoC to give maximum stakeholder input in local and state planning efforts.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

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

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

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Our CoC has strong relationships with all our youth education providers. All providers, including Head start, participate in the CoC. Youth education providers regularly attend CoC meetings and share trends they are seeing with the needs of children and families experiencing homelessness. Youth educational providers are leaders in our CoC and serve on our CoC executive committee. Several youth education providers participate in our HMIS data system, and all have MOUs to work with our Coordinated Entry system. To strengthen service access for youth experiencing homelessness, CoC staff participate in the MO Interagency Council to end Homelessness, working directly with the SEA to improve communication and training for local homeless liaisons at the local level. SEA has worked with our CoC to solicit greater LEA participation in PIT homeless counts. All LEAs and school districts in our CoC have MOUs with our Coordinated Entry system, and CE staff have contact information for each district homeless liaison. Coordinated Entry staff, when assessing a homeless family, inform families of their educational rights. CE staff make electronic referrals to the homeless liaison of a child's identified school district for McKinney-Vento services when a family is initially assessed for housing, as appropriate. Our CoC collaborates with school districts by engaging them at all levels of CoC activities. Homeless representatives from each district have CoC voting privileges, and many actively participate. School personnel post student needs on the CoC project management website and solicit assistance. They collect data and serve on committees. CoC agencies help to advertise and promote school resources available to homeless students. Local districts have MOU's and shared Releases of information to coordinate services between CoC partner agencies and local school districts. High need youth are staffed with school district and CoC agency personnel, to better coordinate resources to help families to stabilize.

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.

Our CE and CoC Policy and Performance manual outlines expectations of agencies and school personnel to assist individuals and families to obtain and maintain educational services. Information on eligibility begins both at agency and coordinated entry levels. Posters in agency waiting rooms and at strategic locations in the community inform potentially eligible households about available school homeless services and how to access them. CE intake staff discuss eligibility for school resources when families first call for a housing assessment. Staff then send an electronic referral for services to the school district identified by the family, and the district homeless liaison reaches out to the family to offer services. The CoC educational policy states the following: All children experiencing homelessness need to be re-connected with, enrolled in, and attending school as soon as possible after they are identified. Coordinated Entry staff and/or CoC agencies are to make an immediate referral to the school of choice and assist the family in accessing McKinney-Vento educational services through the local district office. School enrollment is addressed as part of the Coordinated Entry and program intake processes. Housing providers and coordinated entry staff also screen and refer pre-school aged children as appropriate for early childhood education programs, including Head start, early Head start, and preschool. School homeless liaisons from all local districts are encouraged to become participating members of the St. Charles, Lincoln, and Warren County CoC. School homeless liaisons are encouraged to receive CoC electronic communications and attend CoC meetings as often as possible. School homeless liaisons may help homeless families' access immediate educational services and arrange transportation assistance for homeless youth to attend school, as well as providing other necessary supportive services to assist homeless students to remain in school.

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	Yes	No
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	Yes	No
4.	Early Head Start	Yes	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	Yes	Yes
7.	Healthy Start	No	No
8.	Public Pre-K	Yes	Yes
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.	Programs with "no" do not exist in our Community	Yes	No

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Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Collaboration with Federally Funded Programs and Victim Service Providers.
NOEO 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	Yes
2.	state sexual assault coalitions	Yes
3.	other organizations that help this population	Yes

	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)

(1)& (2) Our CoC regularly collaborates with providers who help provide housing and services to survivors of domestic violence (DV), dating violence, sexual assault, and stalking. DV providers are members of the Continuum of Care and serve on CoC committees. DV providers also offer regular training to CoC members and to Coordinated Entry (CE) staff on trauma informed care, in dealing with survivors of domestic violence, dating violence, sexual assault, and stalking. They also offer regular CoC staff training on fair housing and VAWA laws for this population. This year, our CoC implemented a new grant partnership between our primary DV provider and Coordinated Entry staff. Staff from both organizations reviewed and updated current CoC and Coordinated Entry policies to incorporate best DV practices. CE and DV staff initiated joint monthly case conferencing of persons fleeing from DV who have been assessed by Coordinated Entry and are seeking housing services both within and outside of the DV system. DV staff have been providing regular training and consulting for CE staff to improve housing services and outcomes for persons fleeing from domestic violence. They have developed new collaborative processes, including expedited referrals for DV services and strengthened policies for communication. Our partner DV provider has viewing access to the HMIS database to better understand the community housing history of persons fleeing DV who have accessed CoC services. The partnership has been extremely successful, with both DV staff and CE staff very excited about the foundation they have laid for improving the housing outcomes of persons fleeing from DV.

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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)

The CoC works with our DV providers on an on-going basis to strengthen both CoC and Coordinated Entry (CE) policies, procedures, and MOUs to ensure the safety and confidentiality of those seeking assistance. The CoC has safety and planning protocols for our Coordinated Entry process. CE staff are regularly (at least semi-annually) trained to deliver trauma-informed services, prioritizing safety of people calling for assistance first. (1) CoC providers, CE staff, and housing project staff receive regular monthly training on VAWA, and other laws, services, and best practices recommended for working with survivors of domestic violence and sex trafficking. Additional training is provided to CoC members at least annually in trauma-informed care. (2) CE staff receive ongoing training on assessing persons fleeing domestic violence as well as when to call 911 or other crisis responders to assist a caller in distress. This year, that training has been at least quarterly. The CE center has also strengthened the CE phone message to ensure safety of callers. Clients in a housing crisis calling Coordinated Entry are assessed using a trauma informed approach for domestic violence during an initial triage assessment, and if a person is identified as fleeing from domestic violence and needing safe shelter or wanting DV services, they are immediately connected with a local DV provider. Callers also have the option to seek services through CE. CE Staff are trained to assist callers with safety planning as needed. The callers are also instructed to call back if they have difficulty accessing DV services. CE staff receive at least semi-annual training on working with persons fleeing and/or surviving domestic violence, sex trafficking or stalking. They also receive regular training on safety planning with callers. Specific trauma informed protocols have been developed for responding to callers fleeing domestic violence, sex trafficking, or stalking. CE staff also receive on-going training in trauma informed care and client centered services. New CE staff receive training in safety protocols, handling DV callers, and trauma informed care within the first several weeks of employment.

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.	

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#### (limit 2,500 characters)

(1) Coordinated Entry staff conduct an initial, trauma informed triage assessment for all callers seeking housing assistance. As part of the triage, CE staff assess if a caller is fleeing from domestic violence. If the caller answers "yes", they are asked if they are safe to talk, and asked for a way to reach them if they are disconnected. The caller is also asked for the safest way to communicate. Callers are then immediately given the DV hotline number to access DV shelter and asked if they need assistance in getting to safety. If a caller is still with the abuser, callers are assisted with developing a safety plan. After encouraging callers experiencing DV to call the DV hotline, the CE assessment process is explained. If callers express an interest in wanting to continue a housing assessment, the caller is asked if they have any concerns about the safety of their information being entered into the HMIS database. Based on caller response, callers may be encouraged to seek DV sheltering first prior to a housing assessment, and to call Coordinated Entry for longer term housing assistance when they feel safer. (2) DV safety protocols ensure that no information concerning caller location is entered into HMIS. Depending upon caller need, additional safety/data protection measures are used as needed, including a last name alias, or a warning notification on the client record concerning the abuser. Housing planning protocols include feedback from clients on where they can live safely and helping them to secure a "safe at home" designated address to use when creating new public records. (3) Confidentiality protocols include (a) assuring client immediate safety (b) helping the client to develop a safety plan (c) determining safe ways to communicate with client (d) ensuring client is connected with DV resources (e) using address and/or client anonymity when entering data into HMIS (f) shielding client records in HMIS from other users as needed. (g) assisting clients to obtain "safe at home" address for public records. (h) and ensuring client receives housing support services from agencies with appropriate safety protocols for working with DV clients.

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.	

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(1)DV data from Coordinated Entry and Domestic violence (DV) providers indicated that 922 households served in the past year had experienced domestic violence, and of those, 198 households were currently fleeing a DV situation. This is a 19% increase over two years in the number of households fleeing DV. It represents sixteen percent of our total homeless population. Over the last year, 50% of those people fleeing were single, compared to 44% two years ago. 33% of those fleeing were in families with 2-3 people, compared to 37% two years ago. Seventeen percent were in families of 4 or more people, a reduction of 2% over two years. An equal number of families and singles fled from domestic violence during the past year. Households continue to show increased family stress and mental health issues. In looking at DV data through a racial lens, a significantly higher percentage (32%) of domestic violence fleers were black or African American than would be predicted by census comparisons (5.3%). Compared to census predictions of 89% whites in the county population, only 64% of domestic violence fleers were white. No other racial disparities were noted in the data. Among those fleeing from domestic violence, we continue to see the greatest increase in domestic violence among heads of households between 25 and 45 years of age, with a decreasing number of older and younger heads of households. We continue to see a high level of disability among those fleeing domestic violence; 69% of the households that were fleeing identified at least one disabling condition, and 45% identified two or more disabling conditions. (2) These findings continue to indicate a higher need for permanent supportive housing resources for many households fleeing, rather than just rapid rehousing assistance. Our CoC is sharing this information with stakeholders and working to secure more supportive housing and vouchers for this population. In addition, our Coordinated Entry staff and housing programs are working much more closely with our domestic violence providers. CE staff now hold specific case conferencing with DV providers to strategize how best to stabilize people fleeing DV in permanent housing.

#### &nbsp

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:	
whether your CoC has policies and procedures that include an emergency transfer plan;	
the process for individuals and families to request an emergency transfer; and	
the process your CoC uses to respond to individuals' and families' emergency transfer requests.	
	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:  whether your CoC has policies and procedures that include an emergency transfer plan; the process for individuals and families to request an emergency transfer; and

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(1) Emergency transfer plans are currently developed and implemented by each of our CoC housing providers, in partnership with the landlords they work with and other partner housing providers. Each agency transfer plan has some differences, based on the resources and alternative housing units available to that agency. Clients needing an emergency transfer who contact CE are coached on working with their housing provider. Our CoC is in the process of developing an overall CoC transfer policy and plan. (2) Households receiving housing services from partner agencies work with those agencies on a housing stability plan, which includes safety planning with the family as needed. Housing staff, at program entry, share policies and procedures around that agency's emergency transfer policy and whom to contact as part of their informed consent process. (3) CoC Coordinated Entry staff conduct an initial, trauma informed triage assessment for callers seeking housing assistance, and as part of the triage, CE staff assess if a caller is fleeing from domestic violence. If the caller answers "yes", they are asked if they are safe to talk, and asked for a way to reach them if they are disconnected. The caller is also asked for the safest way to communicate. Callers are then immediately given the DV hotline number and asked if they need assistance in getting to safety. If a caller is still with the abuser, callers are assisted with developing a safety plan. Based on caller response, callers may be encouraged to work with their current housing provider or be linked with a housing provider to develop an emergency transfer plan for that household. DV safety protocols ensure that no information concerning caller location is entered into HMIS, and additional safety/data protection measures are used as needed. After DV survivors are safe and have connected with housing providers, they continue to work closely both with DV providers and housing providers to safely stabilize in alternative housing. Persons housed through local public housing authorities also receive information on emergency transfer policies and procedures. Safety planning continues to be a key component in stabilizing DV survivors in alternative permanent housing when they need an emergency transfer. CE staff and DV providers are currently jointly working on case conferencing of DV survivors to continue to strengthen policies, procedures, and protocols to safely rehouse people fleeing from DV.

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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(1)Survivors of domestic violence, dating violence, sexual assault, or stalking can access housing and services either through the DV system by calling the local DV hotline, or through Coordinated Entry. When accessing services through the DV system, initial shelter and safety needs are addressed first. After a survivor household has stabilized their initial crisis, DV staff facilitate a housing assessment with Coordinated Entry from the shelter or safe location, to access the full range of community housing services. When a caller first calls Coordinated Entry, staff conduct an initial, trauma informed triage assessment for callers seeking housing assistance. As part of the triage, CE staff assess if a caller is fleeing from domestic violence. If the caller answers "yes", they are asked if they are safe to talk, and asked for a way to reach them if they are disconnected. The caller is also asked for the safest way to communicate. Callers are then immediately given the DV hotline number to access DV shelter and asked if they need assistance in getting to safety. If a caller is still with the abuser, callers are assisted with developing a safety plan. After encouraging callers experiencing DV to call the DV hotline, the CE assessment process is explained. If callers express an interest in wanting to continue a housing assessment, the caller is asked if they have any concerns about the safety of their information being entered into the HMIS database. Based on caller response, callers may be encouraged to seek DV sheltering first prior to a housing assessment, and to call Coordinated Entry for longer term housing assistance when they feel safer. Protocols have been established with DV shelters to guide DV staff in helping DV survivors to access the range of housing services and resources by connecting them with Coordinated Entry when they are ready. (2) Through our recent CE-SSO DV expansion grant, we are working proactively our DV partner agency on strengthening our DV policies and procedures, CE staff training, and service coordination for those fleeing domestic violence, dating violence, sexual assault, or stalking. Monthly Case conferencing is now held with DV providers to review the housing needs and rehousing progress of households served in both the DV system and the CoC system, and to break down barriers for survivors in accessing housing.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	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	
0	accounted for the unique and complex needs of survivors.	

(limit 2,500 characters)

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(1)CoC leadership proactively recruits survivors with a range of lived experiences to participate in CoC activities, meetings, and planning. The CoC has people of color involved in CoC leadership roles and who actively develop CoC programs and policies. People with lived experiences of homelessness and/or domestic violence and stalking are recruited as part of the professional staff at many of our CoC housing provider organizations. People with lived as well as racial minorities, are also on staff with our Coordinated Entry center and conduct street outreach. (2) Our community considers lived experience an asset, often equal to or greater than professional training, when it comes to staff recruitment. Since our Community has this reputation, we frequently have applicants with lived experience backgrounds applying for open staff and volunteer positions. Community Council, the CoC lead organization, has a long history of including marginalized populations as part of addressing community issues. As a result, there is a much higher level of trust between people experiencing homelessness, domestic violence, sexual assault, and stalking, and the providers, than in most similar communities. When people with lived experience are willing to get involved to improve services, CoC members are honored by their participation. We believe it is critical to respect their time, their family, needs, and other commitments, just as we do for each other. Equally important for all consumers and survivors is developing a trusting relationship at their first encounter with the CoC. Critical training with all staff involves training in client consent and trauma informed communication. Staff discuss any concerns about information sharing and give clients the option not to share any information they don't feel comfortable in sharing. (3) CoC members and staff solicit feedback from all stakeholders on operational policies and procedures as well as performance. This feedback is done through consumer surveys, informal conversations, focus groups, and through participation on CoC committees. When a CoC member gets feedback, especially negative feedback, it is usually shared with staff and the executive committee. The committee responsible for responding to the feedback brainstorms changes that should be made. The committee decides who is responsible for implementing the changes, then shares with the consumer what action has been taken to address their concerns.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+–Anti-Discrimination Policy and Training.		
	NOFO Section V.B.1.f.		
	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individual families receive supportive services, shelter, and housing free from discrimination?	uals and	Yes
2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the E to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Fin	Equal Access al Rule)?	Yes
	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equa Accordance With an Individual's Gender Identity in Community Planning and Development Programs Identity Final Rule)?	al Access in Gender	Yes
,			
1C-6a	. Anti-Discrimination Policy–Updating Policies–Assisting Providers–Evaluating Compliance–Addressing Noncompliance.		
	NOFO Section V.B.1.f.		

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Describe in the field below:

1. how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoCwide 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)

(1)Our CoC has a very inclusive process, with multiple ways for stakeholders to participate and give feedback to CoC leadership. We have a CoC wide antidiscrimination policy which was reviewed and updated this year along with our other CoC policies. Any CoC policy is reviewed upon request. (2) All of our CoC funded providers are required to demonstrate low barrier and anti-discrimination policies, as part of funding renewal requirements. Our CoC has also adopted state-wide ESG minimum standards for all our housing programs, which include anti-discrimination requirements. In addition, our CoC leadership has strong experience working with LGBTQ+ individuals and families and is a great resource for our CoC providers in helping them to strengthen their policies and procedures. (3) Our CoC takes a pro-active approach in communicating CE values of housing first and anti-discriminatory practices, while acknowledging the challenges of individual circumstances. Members make every effort to support each other in becoming better practitioners. CE staff or partner agencies generally receive concerns about program discrimination from clients and share with CoC leadership for further evaluation and response. Antidiscrimination and inclusion issues are addressed through one-on-one problem solving with agencies, regular training, role modeling, review of agency policies when agencies apply for funding, and during CoC membership discussions. (4) The CE team or partner agency are usually the first to receive a complaint or concern about discriminatory practices. In the event of a report, CoC staff will either receive or document the complaint through an incident report, and attempt to obtain collateral information about the concern, then bring the concern to the attention of the CoC executive committee. Several members of the CoC executive team will meet with agency staff to better understand the complaint and to help the agency to develop a remediation plan for concerns that arise. If there are repeated concerns, these concerns will be addressed at the CoC executive committee level, and an agency may not be recommended for community funding.

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:

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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?
MO227-St. Charles County	5%	No	No
MO199-LCPHA (Lincoln & Warren County)	5%	No	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)

(1)MO-503 Coordinated Entry staff have developed and implemented MOUs with our local housing authorities to prioritize and refer homeless clients for Foster Youth Initiative (FYI) vouchers, Mainstream (811) vouchers, HUD-VASH vouchers, and Emergency Housing Vouchers (EHV). However, our CoC has not been awarded any EHV vouchers to date. Our Coordinated Entry also works closely with our PHA to prioritize people on the Housing Choice waiting list for vouchers. Vouchers with a homeless preference have contributed to rehousing many persons experiencing homelessness in our community who need significant financial assistance to be rehoused and are one of the most effective tools for our CoC to reduce and end homelessness. CoC staff continue to successfully work with our local PHA's in securing housing preference vouchers and in prioritizing and referring persons experiencing homelessness for those vouchers. Our two PHA's notified us that they received a total of 15 vouchers for use of survivors of domestic violence or individuals or families who are homeless or at risk of homelessness. We have been working with them to use these vouchers to rehouse eligible households on our prioritization list. 30.5% of the people on the LCPHA list identify a HoH as homeless.

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:

Multifamily assisted housing owners			Yes
2. PHA			Yes
Low Income Housing Tax Credit (LIHTC) developments			Yes
4.	4. Local low-income housing programs		Yes
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Other (lin	nit 150 characters)		
5. Private la	andlords		Yes
1C-7d	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.		
	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)	No	
2.	Family Unification Program (FUP)	Yes	
3.	Housing Choice Voucher (HCV)	No	
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes	
5.	Mainstream Vouchers	Yes	
6.	Non-Elderly Disabled (NED) Vouchers	Yes	
7.	Public Housing	No	
8.	Other Units from PHAs:		
	FYI-Foster Youth to Independence vouchers	Yes	
1C-7d	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessnes     NOFO Section V.B.1.g.	ss.	
	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)?	Yes	
		Program Fu	Inding Source
2	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	mainstream	vouchers
1C-7e	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	g	
	NOFO Section V.B.1.g.		

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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?

Applicant: St. Charles, Lincoln, and Warren Counties CoC

Project: MO-503 CoC Registration FY 2023

MO-503 COC\_REG\_2023\_204711

1C-7e	.1. List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	
Г <u>р.</u>	and your CoO have an active Manageralium of Understanding (MOU) with any DUA to administration	Vac
EH	pes your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the HV Program?	Yes
le,	you calcut you to greation 10.75.1. You must use the list feature below to enter the name of event	٦
Pi	you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every HA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		
MO227 St. Charles		
MO199 LCPHA		
City of St. Charl		

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

Name of PHA: MO227 St. Charles County

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

Name of PHA: MO199 LCPHA

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

Name of PHA: City of St. Charles PHA

# 1D. Coordination and Engagement Cont'd

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

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

FY2023 CoC Application

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 discharged directly to the streets, emergency shelters, or other homeless assistance program	not
1. Foster Care		⁄es
2. Health Care	,	′es
3. Mental Health Care	Y	⁄es
4. Correctional Facilities	\	′es
1D-2.	NOFO Section V.B.1.i.	
1D-2	Housing First–Lowering Barriers to Entry.	
	NOTO GEOLUSI V.B. I.I.	
ent	ter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinatery, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC ogram Competition.	ed 4
l lent	ter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinatery, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC orgram Competition that have adopted the Housing First approach.	ed 4
Ent the	is number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordin try, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listi FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and pritizing rapid placement and stabilization to permanent housing.	nated 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.

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	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
	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)

(1)Our CoC has a small number of project applicants, so evaluating projects for housing first compliance is not difficult. All CoC providers have been trained in housing first principles and have completed housing first checklists to selfevaluate compliance. The past 2 years, CoC funded agencies were asked to complete the Housing First assessment tool, provided by HUD. Results of their responses are used to evaluate housing first compliance for rank and review. CE staff work closely with housing providers and are able to validate the ratings completed by providers based on the referrals made, and responses to referrals. In the same way, the service access committee validates the ratings completed by CE staff on the CE project. HUD projects are also asked to share their policies and procedures with CoC and CE staff, to insure a housing first orientation. (2) Housing First factors and performance indicators used in evaluating the Housing First orientation of projects include low barrier access, racial equity in access, client-centered focus, participant choice, participant education and input, housing not dependent on services, termination only for lease or occupancy violations, program policies and procedures, and program self-evaluation. (3) Projects are evaluated outside the competition through normal feedback from CE staff, community providers, provider trainings, and during regular program monitoring. When CoC staff or committee members hear of concerns about a project's Housing First orientation, CoC staff reach out to the organization to better understand the challenges they are facing and to offer staff training and support as appropriate.

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.

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Project: MO-503 CoC Registration FY 2023

Our CoC, while not receiving PATH funding, has two street outreach teams. (1) These teams coordinate closely with Coordinated Entry staff, mental health liaisons, CIT police officers, and other community service providers to find, support, and engage persons on the streets who are experiencing homelessness. In addition, all persons providing outreach in the three-county region meet monthly to staff clients on the streets, to develop plans for the most vulnerable to be housed, and to help each other locate persons who have not had recent contact with street outreach. (2) Our street outreach teams cover 100% of the geography of all three counties in our CoC, they visit different areas of the counties on different days, ensuring broad coverage. The teams also see people across the counties by appointment and help provide cell phones to increase access and communication. (3) Based on funding available, street outreach is currently conducted 2 days each week in St. Charles County, and one day a week in Lincoln and Warren Counties. Clients can be seen at other times upon request. (4) CE staff send referrals to street outreach when they receive calls either from a homeless individual, or someone who is concerned about a homeless person on the streets. CE staff also outreach to targeted feeding locations as frequently as possible, to help identify and engage persons who may not be receiving services. Street outreach teams regularly visit libraries, known encampments, rural agencies, first responders, and locations where homeless persons are found, to identify and to try to engage those individuals in services. Cell phones are provided as needed and available to individuals on the streets who need a way to keep in contact with street outreach staff.

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

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	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		
	Most of our local policy makers, law enforcement, and businesses work well with community providers to link persons experiencing homelessness with services rather than jail. Strong partnerships exist between first responders, mental health providers, and CE. A Crisis Access Program was launched because first responders had a need for a place, 24/7, to take a person experiencing homelessness to receive immediate services including mental health, food, shower, health care, and temporary shelter.	Yes	Yes

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

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reporte in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	Longitudinal HMIS Data	123	60

1D-6.	Mainstream Benefits-CoC Annual Training of Project Staff.	
	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:

		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	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	
	LIHEAP, WIC, COVID housing assistance	Yes

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.

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Information is provided to program participants through several methods. First, persons calling Coordinated Entry are automatically screened for benefit eligibility, receive assistance with obtaining identification, and are electronically connected with agencies for assistance to apply for benefits. Clients are also referred directly for substance use access and screening, and screeners contact clients to engage them in SA services. Second, mainstream benefit navigators are with several larger CoC agencies to help clients apply for food stamps, TANF, LIHEAP, and healthcare benefits. Agency social workers also help with benefit access, especially SSI, through benefit application web portals. Third, information on mainstream resources is shared through emails and postings on the CoC basecamp project management website. Fourth, information and short training sessions are held monthly at CoC meetings on mainstream benefits, laws impacting people experiencing homelessness and service providers, and other services provided by partner agencies. (2) CoC members and CE staff have strong collaboration with healthcare providers and can quickly link persons in need to health, mental health, and substance use treatment services. A new crisis access program provides 24/7 emergency room diversion by providing immediate mental health care access.(3) A homeless services liaison provided by the Department of Mental Health to our CoC is SOAR certified and provides hands on assistance to the most vulnerable unsheltered people experiencing homelessness to help them access SSI/SSDI benefits. The homeless services Liaison receives referrals from outreach service providers and CE staff and participates in outreach staffing of the unsheltered homeless. Other staff from our local mental health agency are also SOAR trained and help clients access SSI/SSDI benefits.

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

NOFO Section V.B.1.n.

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

During the pandemic, the CoC need for non-congregate shelter to help keep the virus from spreading and for fragile populations (including those who don't have a safe place to shower or meet their hygiene needs) expanded significantly. During the last couple of years, through specialized COVID funding, agencies in this tri-county area have sheltered people in hotels when Coordinated Entry identifies a fragile household needing shelter. The community has learned from clients that they feel safer and more clear-headed after having a safe place to sleep behind a door that they can lock. People are much more likely to accept a non-congregate shelter option for a variety of reasons including past trauma. CoC data from 2020-21 showed that length of time homeless for persons dropped significantly, demonstrating the value of this resource. However, motels are expensive, and a large inventory of motel rooms is not a realistic long-term option for the number of unsheltered people in our CoC. The St. Charles City development director, along with the mayor-appointed housing task force, applied for 7.5M in ARPA funding to support the purchase and renovation of a building for non-congregate shelter; however, the proposal was not funded by the state. Local municipalities have committed to financially supporting a housing project that will include non-congregate shelter when a suitable and affordable site can be identified. Our Housing task force in Lincoln County has been more successful; Bridges of Hope has secured land and local government funding for a shelter with 10 non-congregate rooms (20 beds) in that county; the shelter is under construction and expects to be operational in 2024. Motel funding has been reduced over the past year, but private funding has helped bridge part of the shelter gap for our most vulnerable unsheltered homeless. Additional efforts underway include application for local children's services funding for family motel sheltering to allow us to shelter 15 families where congregate sheltering is not appropriate or available, while we work with them on rapid rehousing. Another funding application has been submitted for 3-5 year-round motel rooms for our most fragile homeless.

ID-8.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	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.	

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(1) The CoC works closely with our local health department, emergency management, emergency communications and first responders, to keep providers updated on safety best practices to prevent and respond to infectious disease outbreaks based on CDC guidance. CoC members work closely with health officials to strengthen CoC and CE protocols for infectious disease assessment, screening, testing (as needed), and management for persons seeking shelter. CoC partners also continue to seek funding to expand noncongregate shelter services to reduce infectious disease spread and to provide safe shelter for fragile populations. The local health department works closely with area shelters on strengthening public health services and protocols, including providing access to NARCAN, developing shelter procedures to reduce infectious disease spread, and strengthening access to other public health services. Currently the CoC is working with the local health department and emergency communications to strengthen options for fragile people during heat warnings as well as freezing temperatures. (2) CoC leadership, in collaboration with public health and local nonprofits, shares information and resource updates through social media and e-newsletters. A non-congregate motel sheltering program was created in response to infectious disease outbreaks. Street outreach providers partner with the health department to provide NARCAN to people on the streets needing the resource. Street outreach also partners with a local hospital and has medical staff accompany them during outreach services, to address unmet health needs of people experiencing homelessness. Our local community health center also works closely with housing providers to prevent or eliminate infectious disease outbreaks and continues to make COVID vaccines and treatment available for people who need it. CoC partners continue to work with public officials to expand hygiene, health, laundry and sheltering options for unsheltered homeless to prevent disease spread through expanded drop-in centers, although a funding application through the special NOFO for addressing the needs of unsheltered homeless last year was not funded.

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.

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(1) Responding to COVID-19 was transformative to our CoC with how we now partner with first responders and health officials. First, we strengthened our partnership with public health officials, emergency personnel, and government officials. Clarifying professional roles, responsibilities, and resources while working together during the COVID pandemic gave each of us new respect for each other's roles and challenges. This partnership continues to today, as we develop protocols for new infectious disease outbreaks, especially in shelters and other congregate facilities. Community Council and CoC leadership, in collaboration with public health and local nonprofits, continue to share information and resource updates through social media, e-newsletters, the Community Council website, and the CoC Basecamp website. County health staff attend CoC membership meetings to share information and answer questions from service providers. Our CoC is chaired by the assistant director of emergency communications. (2) Our foundational partnership continues to benefit the community as we continue to plan for future public health emergencies and disasters by strengthening communication between public health agencies, Coordinated Entry, outreach staff, and shelter staff. Our CE staff gained credibility as a critical part of our emergency response infrastructure, taking on increased responsibilities and expanding significantly to support emergency personnel in responding to COVID-19 as well as several other recent flooding disasters. Several new disaster screening questions were added to our CE intake process. One question determines if and which disaster contributed to a household housing crisis, and identifies household needs due to the disaster. A second questionnaire developed with health department guidance screens clients seeking shelter for health symptoms to limit infectious disease spread and indicates if there is a need for testing and/or guarantine. Finally, public health personnel have increased understanding about the needs and challenges of unsheltered persons during public health emergencies. Our CoC is now chaired by the assistant director of emergency communications for St. Charles County, and we are working on response protocols for heat related emergencies.

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.

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(limit 2,500 characters)

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(1) Our Coordinated Entry (CE) process is a "one call" phone hotline. Anyone within the CoC geographic zip codes who calls 211 in a housing crisis is assessed by CE staff. CE can also be accessed through a publicized email link on our community website. CE staff are mobile; they co-locate at partner agencies in our rural counties at least one day per week and go to outreach locations to connect with people who may not be comfortable calling the hotline. The CE helpline is extensively marketed to churches, first responders, hospital and school personnel, social service agencies, area libraries, persons serving the elderly, those with disabilities, food pantries, municipal personnel, and others who may encounter persons in a housing crisis. (2) Hotline callers receive initial triage screening to determine (a) if they are in a housing crisis, (b) in the CoC geographic area and (c) safe from domestic violence. If callers completing the triage screening are found to be eligible for services, a standardized assessment is completed. Homeless callers are assessed and prioritized over people calling for prevention assistance. Homeless households receive a vulnerability screening, are prioritized, and referred for immediate assistance. (3) People experiencing homelessness are encouraged to maintain contact with the CE center until they are stabilized. They are encouraged to begin their housing plan immediately. Street outreach providers work closely with CE staff to help unsheltered persons engage in, and access services. CE staff review and follow-up with prioritized clients quarterly. Homeless clients are maintained on the housing prioritization list until housed or there is no contact with providers or CE staff for longer than 90 days. Clients are reactivated on the housing prioritization whenever they re-establish contact with any community agency. The CoC service committee evaluates CE and recommends improvements based on consumer feedback. A recent consumer survey was completed with 122 consumers over a two-month period; ninety-eight percent of respondents shared that they were treated with dignity and respect, and ninety percent shared that they were assisted with the following services: a plan for immediate shelter, developing a housing plan, connected with one or more agencies, and learning what assistance they were eligible for. Overall consumers gave positive feedback for our CE system, while suggesting several areas for improvement.

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

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 Coordinated Entry works closely with street outreach, mental health providers, and first responders to connect to unsheltered homeless who are reluctant to engage in services. Coordinated Entry staff also attend different events where clients who are unhoused also frequent. For example, Helping Hands (Christmas outreach), attending a community breakfast at a local church, and providing CE outreach at food pantries in a rural area are several outreach strategies. Sometimes people are reluctant to give info over the phone and so CE sets up a time to meet with the individual in person. Sometimes it takes multiple contacts for someone to eventually engage with services. 2) For permanent housing programs, CE prioritizes people by chronic homeless status, VI-SPDAT score, disability, cumulative time homeless, and veteran status. Families are prioritized separately since different resources are available. Social worker, street outreach, and first responder knowledge of vulnerability is considered as well since clients are not always forthcoming with information and social worker input can assist with more accurate prioritization. CE staff case conference homeless households on the by-name list with street outreach and other community partners in each county to see how the community can support persons who are unhoused and assist them in moving forward to housing. CE staff have open and transparent conversations with people who are unhoused, about their barriers to housing. CE staff then collaborate with them to create a plan connecting them with resources to break down barriers and move to stability. Clients are offered the resources that are available; if clients decline, CE staff will continue to offer or re-offer options as they become available. 4) Coordinated Entry staff make every effort to meet our unhoused neighbors and agencies where they are at. CE has an email option for more efficient communication with neighbors in need, or for agencies who identify needs or barriers. CE offers scheduled appointments; there is also an option on our website to reach out to CE directly. CE staff meet clients at congregate locations and in different communities. Emergency shelters now accept clients after hours and over the weekend and notify CE so their housing assessments can be done the next day, eliminating barriers to people being safely sheltered.

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.

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(1)CE is affirmatively marketed throughout the entire CoC region; CE information cards are distributed through first responders, churches, schools, food pantries, hospitals, civic organizations, social service organizations, social media, flyers, and at community events. CE staff also provide targeted outreach to locations where fragile people gather, especially at congregate meals and food distribution locations. A robust communication & complaint process is in place for callers who share that they may have experienced housing discrimination. (2) Our Coordinated Entry staff have developed referral partnerships with memorandums of understanding with fair housing organizations and legal assistance organizations to assist people who have experienced housing discrimination. When callers indicate that their housing situation may be due to discrimination or violation of housing laws, they receive information and resources to pursue any complaints they have. They are also electronically referred to our fair housing or legal assistance partners, who then follow-up with clients, assisting them to file a complaint, or provide more detailed information on client options to address their concerns. (3) Our CoC has strong partnerships with our municipalities that certify consistency with the Consolidated plan. Municipal staff overseeing CDBG and HOME funds participate in the CoC, hold public hearings with the CoC around fair housing concerns, and are proactive in reducing impediments to fair housing. Municipal staff also arrange fair housing training for CoC members. Concerns about fair housing within specific jurisdictions are brought to the staff in that jurisdiction; clients are also encouraged to file their own complaints. Providers regularly meet and brainstorm with municipal staff on strategies to reduce fair housing barriers and strengthen landlord participation in helping to house our vulnerable neighbors.

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?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	07/21/2023
		Г
1D-1	<ol> <li>Process for Analyzing Racial Disparities         –Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.</li> </ol>	
	NOFO Section V.B.1.q.	
		•
	Describe in the field below:	
	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)	-

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(1)CoC members give significant attention to ensure that our CoC Coordinated Entry processes are standardized, low barrier, non-discriminatory, clientcentered, and trauma informed. CE staff are intentionally racially diverse and provide regular input into modification of these processes. Weekly conversations with CE staff also encourage input in reducing racial disparities in our intake and service provision processes. Our CoC has expanded our executive committee to strengthen the voice of minority members, and minority members hold leadership roles, including chairing several CoC committees. Our CoC has developed a program level HMIS report to assist with identifying racial disparities in housing outcomes by program and conducts a racial disparity analysis annually based on our HMIS program performance tool and HUD racial equity analysis tools. (2) A focus group with racial minority stakeholders recommended regular training for case managers on understanding communication and cultural differences in providing services to unhoused persons with differing racial and ethnic backgrounds. Two training sessions have been held to strengthen understanding of cultural differences. Our most recent racial equity analysis identified the following issues and recommendations: a) Only 10% of the population of our CoC are racial minorities but make up 33% of the population experiencing housing instability and needing stabilization resources b) Individual shelter programs and transitional housing programs show significant disparities in program outcomes for different racial groups and c) As affordable housing and housing subsidies are less available in our community, racial disparity in program outcomes is increasing. Lack of affordable housing in our community creates the largest equity barrier, since racial minorities are disproportionately represented in low wage jobs, and face increased landlord discrimination. The CoC monitors community eviction rates and has strengthened relationships with the local courts and the sheriff's department to intervene with households at risk for eviction, assisting them to access homeless prevention funding. To date, our community eviction rate has stabilized at 60% lower than 2020 rates. CoC members have also visited low-income neighborhoods to share other financial and housing resources.

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.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes

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

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 CoC has intentionally focused on gathering additional information and input from community stakeholders on racial disparities. We have proactively worked to increase our minority representation in our membership and on all our CoC committees, as well as among our CE staff. Focus group meetings among ethnic minority stakeholders have recommended that the CoC offer training and discussions for different groups of stakeholders, clarifying minority perspectives on receiving services. The expected outcomes are (1) a greater understanding among service providers about why minorities accessing services might be distrustful of "the system" and (2) stakeholders to learn new strategies to build trust and improve outcomes among minority persons experiencing homelessness. The data and performance committee has now integrated racial disparity program monitoring as part of CoC performance monitoring. We will continue to engage minority stakeholders as we move forward in better understanding the reasons for disparities and look for their guidance in helping us move toward a more equitable system. Recommendations from our most recent equity analysis completed in July indicated significant racial disparities in program outcomes for different groups exiting individual shelter and transitional housing programs. CoC leadership will look more deeply at these disparities to identify support needed to reduce disparities. A second recommendation from the equity analysis suggested that leadership identify strategies to mitigate the impact of reduced availability of affordable housing to reduce disparity in program outcomes.

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.	

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#### (limit 2,500 characters)

(1)&(2) Our CoC uses the MO-503 Continuum of Care Annual Progress Report we developed to track and report on key performance results, including housing metrics and CoC committee key performance results. Two CoC committees have racial equity goals outlined in the progress report. The data and performance committee (DPC) has the responsibility of reviewing racial equity data quarterly and developing a process to monitor and strengthen equity in housing outcomes. Our service committee (SC) has the responsibility of evaluating Coordinated Entry and recommending strategies to improve services and racial equity for consumers. The CoC progress report is reviewed regularly with the CoC executive committee to track progress on CoC goals and performance metrics. Community Council, the CoC, HMIS and CE lead agency, is also committed to eliminating racial disparities. First, we have actively recruited and retained a diverse board of directors and CE staff. Coordinated Entry staff who are part of the assessment team are both ethnically diverse, as well as include people who have formerly experienced homelessness. Community Council staff have weekly and monthly educational sessions to create a climate for discussion and peer learning among staff. The CoC executive committee continues to recruit not only diverse committee members, but persons with lived experience who can participate in policy development focus groups and give CoC leadership feedback on developing a more inclusive homeless service system. At the agency level, the CoC has provided an HMIS program performance tool for agencies to evaluate their programs through a racial equity lens. This tool is a one-page project performance report which looks at clients at program entry and outcome measures at program exit. The report identifies as a glance any disparities in the racial composition of people entering the program and those who exit to permanent housing. We also encourage our agency partners to increase diversity among their boards and staff and evaluate these efforts as part of their CoC funding renewal application scoring. Our data and performance committee also uses the HUD provided racial equity analysis tool to look at specific racial populations where there is greater inequities.

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.

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The CoC approach to engaging people with lived experience has used several strategies to share lived experience of homelessness to inform service delivery and CoC decision making. First, Coordinated Entry staff include several staff with lived experience of homelessness. The CoC Executive Board and the Community Council board of directors also include people with lived experience who participate on committees and in decision making. Engagement of people with lived experience who are coming from unsheltered situations has primarily been through targeted outreach, and from feedback from service consumers. The CoC held two focus groups with individuals experiencing unsheltered homelessness to solicit their input and priorities on service development and housing options. A consumer satisfaction survey was completed in June by approximately 150 current and formerly homeless consumers to obtain feedback on their experiences in accessing services through Coordinated Entry and CoC partner agencies. Engaging people experiencing homelessness in dialogue about service improvement is also done through our emergency weather response (EWR) program, community outreach breakfasts, and other places where people experiencing homelessness gather with the community. An advisory group working group of formerly homeless people has also been established to informally advise CoC leadership on ways that CoC services can be improved.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
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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.	11	8
2.	Participate on CoC committees, subcommittees, or workgroups.	6	3
3.	Included in the development or revision of your CoC's local competition rating factors.	2	1
4.	Included in the development or revision of your CoC's coordinated entry process.	4	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.

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#### (limit 2,500 characters)

The Continuum of Care generally provides 15-30 minutes of professional development training at CoC monthly membership meetings. These meetings are open to the public. Anyone interested, including those with lived experience of homelessness, are welcome to attend and participate. CoC partner agencies also generally announce or post job openings at CoC meetings and/or in the Community Council weekly e-newsletter. Lived experience is considered by community stakeholders to be an asset in working with people experiencing homelessness. However, it is essential that workplace settings provide adequate policies, procedures, supervision, and professional development training for all employees so that they can be successful in their role. Without a strong support and communication structure, employees with or without lived experience are often set up for failure. The Coordinated Entry program currently has two staff with lived experience, and many other partner agencies also employ staff with lived experience. The Coordinated Entry and several partner providers hold reciprocal training opportunities, allowing staff from each agency to experience 1-2 professional development opportunities per month. The CoC executive committee is committed to professional development training for all homeless providers and front-line staff. They continue to promote best practices and create additional training opportunities on a regular basis for all CoC participants.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.
NOFO Section V.B.1.r.	
	Describe in the field below:
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.

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 While our CoC has always sought feedback from people with lived experience of homelessness, we have primarily collected program exit surveys for ESG and CoC programs. In the past two years, we have focused on being more intentional and systematic about inviting a racially diverse group of people with lived experience to participate in all our CoC committees and decision-making. We have also intentionally recruited and hired staff with lived experience and encouraged qualified minorities and people with lived experience to assume leadership roles in the CoC. Over the past year, we have begun to conduct focus groups with key stakeholders, especially the unsheltered homeless. We have asked these individuals if they would be willing to provide regular input. Several individuals have volunteered. The CoC now has "consultants" who have lived experience of homelessness that we can bring together to review CoC policies and new program plans. CoC leadership meets individually and in small groups with these individuals on a periodic basis as program and policy review needs arise. We want to respect the time and expertise of these individuals, so we prefer to convene them for specific CoC input. (2) Most recently, our CoC conducted a consumer satisfaction survey of 153 current and formerly homeless individuals. Most challenges raised by people with lived experience to housing providers are valid; most complaints by consumers relate to a lack of affordable housing and/or specific resources. (3) The best approach the CoC has identified to address consumer issues is to be honest, upfront, and realistic about what resources may or may not be available at the time people contact Coordinated Entry and/or first engage in services. Providers and staff are trained to clearly communicate how best to access resources that may be available, and to follow-up with consumers in writing if possible. Clear and direct communication has been the most effective way for us to address challenges to the system. When challenges do arise, consumers have the opportunity to address their issues with a supervisor, CoC staff, or CoC chair. Consumer concerns and the CoC or provider response is documented for both the consumer and the CoC and shared with the CoC executive committee to address concerns in future CoC planning.

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)

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(1)Over the past several years, our CoC has gained significant support and commitment from municipal leaders to invest in short-and long-term housing solutions for homeless in our community; they have proactively worked with us to remove regulatory barriers. Three organizations applied for \$20M in state ARPA funding for several housing development projects in partnership with municipal officials. Municipal leaders and the public were extremely disappointed to learn that our community did not receive any state ARPA funding to help support three well developed local housing projects for sheltering and rehousing. State bias in the allocation process resulted in none of the \$20M of regional funding coming into the counties served by our CoC, despite 35% of the regional unsheltered homeless; the funding all went to St. Louis City and County. Follow-up meetings with state and local officials were held to strategize alternative ways to move forward. CoC leadership has not found local zoning and land use policies to be a primary barrier to affordable housing; the barrier in this situation was the bias of state officials and consultants who did not believe the level of need in our community. Listening sessions with over 30 church and civic organizations, in addition to community groups and not for profits, have helped to shape and focus homeless solution planning as well as to secure funding commitments for operational support. (2) A housing task force in Lincoln County has secured and broken ground on a 12unit emergency shelter and drop-in Center called "Bridge of Hope". The Bridge of Hope shelter is projected to open in the first quarter of 2024. (3) A local housing provider is in the process of purchasing up to 10 houses and mobile homes to add to the county affordable housing inventory with 1.5M in private and public funding: A subdivision of 40 affordable homes was approved for development but was one of the projects not funded with state ARPA funding. Another 192-unit rental development is currently under construction in St. Peters.

Yes

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

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

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

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1	E-1. Web Posting of Your CoC's Local Competition Deadline–Advance Public Notice.	
	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.	
		2-4-222
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.	07/17/2023
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.	07/17/2023
1	E-2. Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section 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:	
1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes

4. Provided points for projects that addressed specific severe barriers to housing and services.

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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.	Yes
1E	-2a. Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section 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?	6
3.	What renewal project type did most applicants use?	PH-RRH
1E	-2b. Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	
		_
	Describe in the field below:	
	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;	]
	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	
	<ol> <li>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.</li> </ol>	

(1) Our CoC data and performance committee (DPC) generally meet every two months to review CoC performance progress. Members reviewed System Performance (SysPM) and LSA reports, APR and CAPER reports including client level data. We also reviewed agency program outcome reports which enable us to track performance metrics by program type and program over time. (2) Length of time to house people in permanent housing was based on three metrics: (a) CE data, from initial homelessness assessment until exit to PH; (b) length of time in shelter; (c) and length of time from program entry into RRH or PH housing programs to move-in date. The SysPM report provides the most reliable CoC measure for length of homelessness. (3) Our agency program performance report shows client profiles at entry and exit. At entry, it tracks client vulnerability by level of need measures including % of persons served with disabilities, % entering with 0 income, % entering from place not meant for human habitation, % with no health insurance, and average length of time homeless. The report provides year to year comparisons of need to outcomes by project type. Several of these measures are also included in our project scoring tool. Our project scoring tool also scores projects based on exits to, and retention of permanent housing. (4) Our project scoring tool adjusts scores for severe need populations. CoC projects are ranked with a scoring tool that gives bonus performance points for programs serving persons with higher severity of needs and vulnerability, to offset poorer outcomes. Using HUD's rating tool as a guide to develop our own CoC scoring, the CoC awards additional points based on the following metrics: % with 0-\$250 monthly income at program entry; % with disability (2 or more for PH), and % entering the project from places not meant for human habitation or ÉS. Scores for each metric were developed based on average vulnerability baseline scores across all projects, with bonus points awarded for serving more vulnerable populations than expected. Projects serving less vulnerable populations receive fewer points on each metric. Severity of needs and vulnerabilities experienced by program participants are also considered in renewal project performance. New projects are scored using the project review and ranking tool released by HUD, while considering an agency's history in serving high need populations.

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.	
		I
	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.	

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(1)Our CoC encourages persons of different races and ethnicities to participate in our CoC and all our committees, including persons who are homeless or formerly homeless. To promote racial equity in our rank and review, we included several equity metrics in the rank and review process, and had these metrics reviewed by several persons of different races and ethnicities. (2) The actual CoC Rank and review committee was diverse, representing the racial demographics of our homeless population. The committee completed the rank and review process, including evaluating and scoring new and renewal projects on equity factors. Input was sought from unsheltered homeless focus groups about key factors in helping people to get re-housed and to suggest improvements. This feedback was integrated into the project ranking process. "Population demographics mirrors the CoC demographic of population" was one of the equity factors scored in project applications. Other equity factors integrated into scoring were that "recipient regularly reviews internal policies with an equity lens and takes steps to eliminate barriers" and "at least 10% of persons exiting to permanent housing are BIPOC". (3) All CoC funding projects receive referrals directly from Coordinated Entry (and street outreach) only, so this helps to ensure equal access for clients referred. It also ensures that outreach is not required by programs to recruit participants. Agencies with program openings who turn away clients are required to record a reason for turn-away. CoC funded agencies are also required to complete a housing first review and submit it with their funding application. Identifying barriers to program participation is integral in all CoC planning, so is not a specific issue that needs to be addressed during rank and review. All funded projects are high performing and actively work to reduce client access barriers.

1E-4.	Reallocation–Reviewing Performance of Existing Projects.
	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.

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(1)Our CoC has a limited number of projects compared to need, and all current projects in the CoC are essential. Our committee updated our re-allocation policy this year to better clarify voluntary reallocation and expenditure expectations. We have received HUD TA to better help our agencies manage complete drawdowns of their grants. We have, in the past, reallocated underperforming projects. Past reallocation has occurred because of poor expenditure rates. One project lost significant funding during the 2019 competition, although project performance was good with people being served. (2) Our CoC identified one possible project for re-allocation this year, due to lower expenditure rates; however, this project was otherwise high performing and much needed by our CoC. (3) Our CoC did not re-allocate funding this year for any low performing or less needed projects. (4) CoC Project performance is monitored quarterly. No projects were identified as less needed, and all showed strong performance. For the one project identified for possible reallocation with low expenditure rates, CoC staff met with the project director and discussed whether the project anticipated spending all funding this year. Staff learned that the new project manager needed additional guidance on documentation of expenses under the supportive services line item. This project now anticipates being able to draw down all funds this year. Since the project is strongly needed, and project performance is otherwise very good.

1E- <del>4</del> a.	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?	Yes
1	E-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
1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
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.	09/08/2023
		•
1E	-5a. Projects Accepted-Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
		4

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app	ked on the New and R dicants on various date	notified project applicants that their project application enewal Priority Listings in writing, outside of e-snaps as, enter the latest date of any notification. For exam , 06/27/2023, and 06/28/2023, then you must enter 0	i. If you notified iple, if you notified	09/08/2023
1E-5b.	Local Competition Se	election Results for All Projects.		
	NOFO Section V.B.2	.g.		
	You must upload the Screen.	Local Competition Selection Results attachment to t	he 4B. Attachments	
1. P 2. P 3. P 4. P 5. R	es your attachment inc Project Names; Project Scores; Project accepted or rej Project Rank-if accepted Requested Funding An Reallocated funds.	ected status; ed;		Yes
	l			
1E-5c.		Approved Consolidated Application 2 Days Before C ion Submission Deadline.	OC Program	
1E-5c.	Competition Applicat		coC Program	
1E-5c.	NOFO Section V.B.2	ion Submission Deadline.  .g. and 24 CFR 578.95.  Web Posting—CoC-Approved Consolidated Applicati		
Ente part 1. tr	Competition Applicat NOFO Section V.B.2 You must upload the Attachments Screen.  er the date your CoC I tner's website—which in the CoC Application; ar	ion Submission Deadline. '	on attachment to the 4B.	09/26/2023
Ente part 1. tr	Competition Applicat NOFO Section V.B.2 You must upload the Attachments Screen.  er the date your CoC partner's website—which in the CoC Application; ar Priority Listings for Rea	ion Submission Deadline  .g. and 24 CFR 578.95.  Web Posting—CoC-Approved Consolidated Application consted the CoC-approved Consolidated Application concluded:	on attachment to the 4B.	09/26/2023
Ente part 1. tr	Competition Applicat NOFO Section V.B.2 You must upload the Attachments Screen.  er the date your CoC partner's website—which in the CoC Application; ar Priority Listings for Rea	con Submission Deadline.  .g. and 24 CFR 578.95.  Web Posting—CoC-Approved Consolidated Application concluded: and all New, Renewal, and Replacent Notification to Community Members and Key Stakeholders that the CoC-Approved	on attachment to the 4B.	09/26/2023
Ente part 1. tr	Competition Applicat NOFO Section V.B.2 You must upload the Attachments Screen.  er the date your CoC partner's website—which in the CoC Application; ar Priority Listings for Rea	ion Submission Deadline.  .g. and 24 CFR 578.95.  Web Posting—CoC-Approved Consolidated Application concluded: and allocation forms and all New, Renewal, and Replacen  Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	on attachment to the 4B.	09/26/2023

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

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

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

,				
2A-1.	HMIS Vendor.			
	Not Scored–For Information Only			
Ente	er the name of the HMIS Vendor your CoC is o	currently using.	CaseWorthy	
2A-2	HMIS Implementation Coverage Area.			
	Not Scored-For Information Only			
	Not Scored—For Information Only			
Sele	ect from dropdown menu your CoC's HMIS cov	verage area.	Single CoC	
			1	
2A-3.	HIC Data Submission in HDX.			
	NOFO Section V.B.3.a.			
Ente	er the date your CoC submitted its 2023 HIC d	ata into HDX.	04/06/2023	
00.4	Orange and by Detailed the DV Desident Oct	)		
ZA-4.	Comparable Database for DV Providers—CoC Data Submission by Victim Service Providers	, and fimis Lead Supporting Data Coil	ection and	
	NOFO Section V.B.3.b.			
l				
	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 provide comparable database–compliant with the FY	ers in your CoC are using a HUD-com 2022 HMIS Data Standards; and	pliant	
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3. state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

#### (limit 2,500 characters)

(1) Our CoC has worked very closely with our DV provider over the past year, through an SSO-CE DV expansion grant. The grant has helped our DV provider to become comfortable with our CoC HMIS and has strengthened data sharing through case conferencing and client data sharing agreements. Both of our DV providers use HMIS comparable databases for DV clients, and report DV outcomes to the CoC. DV providers are now able to collect the same data elements required in the 2022 HMIS data standards, and both providers now provide de-identified, aggregated data for CoC needs evaluation and performance planning. This year Coordinated Entry staff worked closely with DV staff to strengthen coordination of services and housing outcomes for persons fleeing domestic violence. DV staff and CE staff also strengthened CE policies and procedures for handling calls from people experiencing domestic violence, sex trafficking, or stalking. ČE staff and DV providers are now regularly case conferencing DV clients in both systems, and jointly tracking housing outcomes while maintaining client confidentiality and data security. (2) DV Housing and service providers are using a HUD compliant comparable database with FY2022 HMIS data standards. (3) Our CoC is fully compliant with the 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	63	30	33	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	23	0	23	100.00%
4. Rapid Re-Housing (RRH) beds	26	0	26	100.00%
5. Permanent Supportive Housing (PSH) beds	264	0	264	100.00%
6. Other Permanent Housing (OPH) beds	120	0	120	100.00%

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

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#### (limit 2,500 characters)

N/A

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	Yes
p.m. EST?	

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

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

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

(limit 2,500 characters)

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- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	
Ente	er the date your CoC conducted its 2023 PIT count.	01/25/2023
·		
2B-2.	PIT Count Data-HDX Submission Date.	
	NOFO Section V.B.4.a	
Ente	er the date your CoC submitted its 2023 PIT count data in HDX.	04/05/2023
I	•	
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.	

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(1)In planning for our 2023 PIT count, we engaged all CoC stakeholders, including youth serving organizations and school homeless liaisons in the planning and data collection process. Youth street outreach workers also participate in the count. All CoC members are asked to distribute surveys within their organizations, and to collect information on sheltered and unsheltered homeless adults or youth that they are aware of. Specifically, school homeless liaisons and youth serving organizations receive targeted outreach and followup to ensure that all data is collected. Youth Coordinated Entry is co-located with our CoC Coordinated Entry staff, and all CE data, including prioritization list data, is included in the PIT count. (2) Community volunteers, including youth, are recruited to participate in the unsheltered homeless count. Volunteers, including youth and youth serving organization staff and outreach workers, participate in the street count. Volunteers, including youth volunteers, also call everyone identified as homeless on our "by-name list" to get an update on their housing status on the day of the homeless count. (3) The number of youth experiencing homeless in our CoC is very low; the youth are generally employed or newly homeless, so it is difficult to engage them as counters at the time of the PIT count. However, formerly homeless youth are represented in our population of youth service providers, school homeless liaisons, youth ministry pastors, others serving youth who assist with the count. Because of this experience, CoC members can quickly identify homeless youth and reach out to offer services. Stakeholders also are proactive in connecting youth they identify, with a warm handoff to youth outreach staff and service providers. Our primary youth serving organization has a very strong reputation among youth for its support and advocacy, especially for LGBTQ youth as well as black, indigenous, and people of color. The agency proactively maintains a diverse staff, hires formerly homeless youth, and provides strong positive peer support training to the staff they hire.

2B-4.	-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.	

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(1)We made no significant changes to our sheltered 2022 and 2023 PIT homeless counts. (2) As part of both our CoC sheltered and unsheltered counts, since 2020 we have integrated a new step of calling everyone who has been identified as homeless that we have had contact with in the last 3 months, to update their housing status. With at least 3 attempted calls for each household, these calls have improved the accuracy of our understanding of who is unsheltered on the night of the PIT count, as well as learning who is temporarily sheltered. (3) Most changes in our PIT counts are tied to weather factors and/or resources available or not available, rather than methodology. Most people we encounter during our street counts have already been identified by street outreach and our Coordinated Entry team.

### 2C. System Performance

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

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

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.
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

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(1) The numbers of first-time homeless significantly dropped between FY21 and FY22. Analysis of homeless data reveals that the primary risk factors in first time homelessness in our community are (a) having an income below 50% of poverty level and/or (b) being a single parent female. The vast majority are low income, and 58% are female. Our CoC tries to identify these households before they become homeless, and to provide whatever community support is available to prevent homelessness. (2) Rental costs have increased dramatically over the past year, even among previous LIHTC properties; this has disrupted many formerly stable households; the number of households seeing rental and mortgage assistance is the highest ever. Our CoC's primary prevention strategies are (a) strong community outreach program to promote whatever state and local and rental assistance available, and (b) strong community advocacy among elected officials for development of affordable housing. (c) The CoC is also now working with our Courts and sheriff's office to monitor and prevent evictions. (d) In addition, Coordinated Entry staff was increased to strengthen assessment along with targeted resources and referrals to persons at imminent risk of losing housing. CoC focus on preventing evictions and resulted in a 61% reduction in evictions in 2021, and a 76% reduction in evictions from 2019-2021. However, numbers of first-time homeless are anticipated to increase due to the extreme lack of homeless prevention funding available over the past year. (3) Pinar Turker from St. Charles County government and chair of our data and performance committee, oversees this community metric. Our CoC was able to connect over 2100 households in our community with nearly 10 million dollars in prevention assistance during COVID.

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 2,50	0 characters)	

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(1) CoC strategies to reduce the average length of time homeless include (a) working to increase the availability of non-congregate shelter beds and affordable housing, (b) improving data quality on recording client move-in dates and timely exits to Permanent housing; (c) case conferencing difficult to house shelter clients to screen for voucher eligibility and improve housing exits, and (d) CE staff developing a housing plan with clients that they can initiate prior to entry into a housing program. (2) Housing prioritization lists for individuals and families are managed in our HMIS system; (a) persons who have the longest length of time homeless, and the highest vulnerability are sorted to the top of the list. (b) Agencies review the housing prioritization list weekly and case conference the top 20 households nearing the top of the list in each community. (c) Updates from street outreach are integrated in the case conferencing. (d) CE staff engage clients in re-housing planning at the time of intake, even if they are not in shelter or have a lower vulnerability score. Households are case managed by CE staff until they are connected to housing resources and secure housing. (3) The CE program manager (Delayna Theissen) is responsible for regular staffing of the housing prioritization list and other case conferencing to ensure referrals are timely and appropriate. CE staff also track and follow-up with people on the housing list. Nearly fifty percent of homeless people in our CoC secure permanent housing without entering a housing program. Our Service committee, chaired by Pam Struckhoff, is working on strategies to increase housing resources, along with our CoC committees: lack of affordable housing in our community has become the critical rehousing issue, so multiple committees are engaged in efforts to find units that will accept vouchers or subsidies and in working with elected officials on plans to produce additional affordable housing.

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.	

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(1)Multiple case conferences are held monthly around the tri-county area, working with providers and CE staff to reduce rehousing barriers. A homeless liaison from the department of mental health works intensively with the highest barrier clients to reduce barriers and move them into permanent housing. A housing locator works with our rapid rehousing programs to identify possible units for rehousing. Providers work very efficiently and effectively at creatively reducing barriers and celebrate each housing success. (2) Historically, our CoC permanent supportive housing has maintained a 95%-98% housing retention or exit to permanent housing rate. However, with limited permanent supportive housing available to our CoC, we have used mainstream vouchers to supplement our PSH. We are now beginning to see a higher recidivism rate with some of our mainstream voucher clients; some need longer term supportive services; our data committee is reviewing these cases and making recommendations to the CoC on securing funding to lengthen the time supportive services are available to these households. (3) The responsibility to increase the rate that families exit to, or retain permanent housing is ultimately the responsibility of our Executive Committee, chaired by Dawn Tegeler. However, the strategies of tracking rehousing rates is monitored by our Data and Performance committee, chaired by Pinar Turker. Other strategies are implemented by other CoC committees.

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)

(1) With a robust Coordinated Entry process, including homeless prevention, along with individual HMIS client housing histories, the CoC can often identify persons who are destabilizing and may return to homelessness. The Data and Performance committee also reviews HMIS data and identifies which individuals and families are returning to homelessness. The data and performance committee makes recommendations to providers on which programs and households are showing increased returns to homelessness. (2) CE staff build relationships with people while they are homeless and encourage them to call early if they are struggling with maintaining their housing. CE and CoC members proactively coach low-income persons on using community support, including food pantries, utility assistance, and employment services to increase income & reduce returns to homelessness. Current returns to homelessness average 12% over 2 years. The CoC's highest returns to homelessness are from persons voluntarily exiting shelter and transitional programs before attaining permanent housing; we are working with our shelter providers to better address permanent housing at shelter intake. Another high return population is people who have been homeless for a long time who are rapidly rehoused or receive mainstream vouchers without supportive services. One agency is seeking funding for a case manager to provide longer and more intensive aftercare services to this targeted population, to reduce returns to homelessness. (3) Pinar Turker, chair of the data and performance committee, along with Dottie Kastigar, CoC lead staff, evaluate HMIS performance data to better understand who returns to homelessness and why; recommendations are passed to the Service committee to develop further strategies to reduce returns to homelessness.

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.

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Project: MO-503 CoC Registration FY 2023 COC\_REG\_2023\_204711

(1) A conversation around securing an income to sustain housing begins with clients during the CE initial assessment. Clients are encouraged to develop a short-term crisis plan, and a long-term plan for housing & income sustainability. Electronic referrals are sent to workforce development if clients are looking for employment, and workforce development contacts the client for follow-up. The CoC is also implementing a two-pronged approach to support increasing client employment income. First, a program performance report has been developed in HMIS to give regular feedback to housing providers on what percentage of persons in their programs have increased their employment income and who needs to be linked with employment resources to keep the issue in front of providers. Second, we continue to strengthen our referral partnerships with employment providers. (2) A strengthened MOU partnership between Workforce Development and the Coordinated Entry clarifies that direct referrals for employment assistance are made to Workforce development for persons calling Coordinated Entry, and upon a referral, workforce development staff reach out engage the household. (b) Our emergency shelter now transports residents to workforce development for job search assistance. (c) CoC providers and CE staff get regular email updates from workforce development staff listing job fairs and employment openings to share with clients. (d) CE staff assess eligibility for mainstream benefits at intake and provide immediate referrals for assistance with accessing benefits. (3) Delanya Theissen, Coordinated Entry supervisor, works closely with workforce development and other community partners on MOUs and strengthening referral processes for employment assistance. Dawn Tegeler, the CoC chair, schedules speakers to promote job opportunities for persons who are housing insecure.

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.

(1) Efforts to increase client non-employment cash income begins during the CE intake assessment, while assessing client eligibility for programs and current receipt of benefits. CE staff assist clients to obtain IDs and transportation to apply for benefits, while connecting them with case management to provide further assistance in completing applications for any benefits for which they qualify. (a) CE staff assist persons at risk of homelessness in obtaining homeless prevention assistance, utility assistance, and food assistance. (b) Homeless people are screened for eligibility for several housing voucher programs at CE intake. (c) Street outreach workers assist clients on the streets to complete benefit applications and getting to benefit appointments. (d) CoC members work with local health care providers to assist with Medicaid enrollment as well as application for social security benefits. A Mental health homeless liaison is SOAR trained and receives referrals to reach out and help individuals with significant health impairment to access social security benefits and housing. Local hospitals also now assist people to apply for benefits who are uninsured and present at emergency rooms for medical assistance. (e) CoC leadership schedules mainstream benefit providers to educate CoC members on how to access benefits on a regular basis. (2) Dottie Kastigar, CoC staff, monitors CoC performance in increasing client cash and non-cash income and works with the executive committee to schedule mainstream benefit training. Dottie also represents the CoC on a statewide task force with state agencies to reduce barriers to connect persons experiencing homelessness with benefits.

## 3A. Coordination with Housing and Healthcare

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

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

3A-	-1. New Pl	H-PSH/PH-RRH Project-Leveraging H	lousing Resources.		
	NOFO	Section V.B.6.a.			
	You mu Screen		mmitment attachment to the 4B. Attacl	hments	
h	ousing uni	applying for a new PH-PSH or PH-RF ts which are not funded through the Co g homelessness?	RH project that uses housing subsidies oC or ESG Programs to help individual	or subsidized Is and families	Yes
	o   N 5		La Microso December 1		_
3A·	_	H-PSH/PH-RRH Project–Leveraging F	lealthcare Resources.		
	NOFO	Section V.B.6.b.			
	You mu	ust upload the Healthcare Formal Agre	ements attachment to the 4B. Attachm	nents Screen.	
ls ir	s your CoC ndividuals a	applying for a new PH-PSH or PH-RR and families experiencing homelessne	RH project that uses healthcare resour	rces to help	Yes
3A-3. L	everaging	Housing/Healthcare Resources-List of	f Projects.		
N	IOFO Sect	ions V.B.6.a. and V.B.6.b.			
L					J
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 7	Гуре

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### 3A-3. List of Projects.

1. What is the name of the new project? New Project FY2023 PH-RRH

2. Enter the Unique Entity Identifier (UEI): TX6VMQL5H364

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your 7 CoC's Priority Listing:

5. Select the type of leverage: Both

## 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

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

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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.	
proje	our CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component ects to serve families with children or youth experiencing homelessness as defined by other eral statutes?	No
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section 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:	
	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

1 12020 000 Application 1 age 00 00/20/2020
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# 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?	No
Applicant Name		
	This list contains no items	

# 4B. Attachments Screen For All Application Questions

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

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.			
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.			
3.	We prefer that you use PDF files, though other file types are supported–please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.			
4.	Attachments must match the questions they are associated with.			
5.	Only upload documents responsive to the questions posed-including other material slows down the review process, which ultimately slows down the funding process.			
6.	If you cannot read the attachment, it is likely we cannot read it either.			
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).			
	. We must be able to read everything you want us to consider in any attachment.			
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.			
8.	Only use the "Other" at	tachment option to	meet an attachment requirement that is	not otherwise listed in these detailed instructions.
Document Typ	е	Required?	Document Description	Date Attached
1C-7. PHA Ho Preference	1C-7. PHA Homeless Preference			
1C-7. PHA Mo Preference	1C-7. PHA Moving On Preference			
1D-11a. Lette Working Group	1D-11a. Letter Signed by Working Group		FY23 Lived Experi	09/22/2023
1D-2a. Housin	1D-2a. Housing First Evaluation		Housing First Eva	09/20/2023
1E-1. Web Posting of Local Competition Deadline		Yes	Web postion of Lo	09/20/2023
1E-2. Local Competition Scoring Tool		Yes	FY23 Project Scor	09/19/2023
1E-2a. Scored Forms for One Project		Yes	All scoring sheet	09/19/2023
1E-5. Notification of Projects Rejected-Reduced		Yes	Notification of p	09/19/2023
1E-5a. Notification of Projects Accepted		Yes	Notification of p	09/20/2023
1E-5b. Local Competition Selection Results		Yes	Local Competition	09/20/2023
1E-5c. Web Posting–CoC- Approved Consolidated Application		Yes		

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1E-5d. Notification of CoC- Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	MO-503 HDX Compet	09/19/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin	09/22/2023
3A-2a. Healthcare Formal Agreements	No	Compass Healthcar	09/22/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No	St.Charles CoC Pe	09/22/2023

#### **Attachment Details**

**Document Description:** 

#### **Attachment Details**

**Document Description:** 

#### **Attachment Details**

Document Description: FY23 Lived Experience Wkgrp letter of support

### **Attachment Details**

**Document Description:** Housing First Evaluation

#### **Attachment Details**

**Document Description:** Web postion of Local Competition Deadline

### **Attachment Details**

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**Document Description:** FY23 Project Scoring tool

#### **Attachment Details**

Document Description: All scoring sheets for YIN RRH project

#### **Attachment Details**

**Document Description:** Notification of projects rejected or reduced

### **Attachment Details**

**Document Description:** Notification of projects accepted

### **Attachment Details**

**Document Description:** Local Competition Selection Results

### **Attachment Details**

**Document Description:** 

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### **Attachment Details**

**Document Description:** 

#### **Attachment Details**

**Document Description:** MO-503 HDX Competition Report

### **Attachment Details**

**Document Description:** Housing Leveraging Commitments

### **Attachment Details**

**Document Description:** Compass Healthcare Leveraging

#### **Attachment Details**

**Document Description:** 

#### **Attachment Details**

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**Document Description:** St.Charles CoC Performance quarterly monitoring

# **Submission Summary**

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

Page	Last Updated
1A. CoC Identification	08/02/2023
1B. Inclusive Structure	09/22/2023
1C. Coordination and Engagement	09/22/2023
1D. Coordination and Engagement Cont'd	09/22/2023
1E. Project Review/Ranking	09/22/2023
2A. HMIS Implementation	09/22/2023
2B. Point-in-Time (PIT) Count	09/22/2023
2C. System Performance	09/22/2023
3A. Coordination with Housing and Healthcare	09/22/2023
3B. Rehabilitation/New Construction Costs	09/22/2023
3C. Serving Homeless Under Other Federal Statutes	09/22/2023

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4A. DV Bonus Project Applicants

09/22/2023

4B. Attachments Screen

Please Complete

**Submission Summary** 

No Input Required



September 22, 2023

Lived Experience Working group St. Charles, Lincoln & Warren County Continuum of Care C/O Community Council of St. Charles County 427 Spencer Road, St. Peters, MO 63376

RE: Services for Unsheltered homeless with Severe Service Needs

To whom it may Concern:

As representatives of the St. Charles Continuum lived experience working group, we are writing in support of this grant to support rapid rehousing of unsheltered homeless in St. Charles, Lincoln, and Warren Counties with severe service needs, and support the funding priorities outlined in the Collaborative application.

Upon receipt of this grant, the Lived Experience working group will meet quarterly to review grant implementation and progress in moving unhoused persons to housing stability. We will gather input from our neighbors who are unhoused to share with this group. We will also recruit others with experiences of homelessness to join our group. Lived experiences workgroup members will assist providers to evaluate the effectiveness of this grant and recommend changes to the delivery of services to better support persons who are unhoused.

As signers to this letter, we attest that each of us has a personal experience of being unhoused. Our goal to use our past experiences to inform CoC leadership and housing providers of strategies and programs to better help other persons experiencing homelessness become stably housed.

Please if you need any further information, please contact Amanda Brown at 314-972-3577 or a brown@communitycouncilstc.org

Sincerely.

Bruce Bergmann

# THE AND TO A HOUSING AND

# **Provider Information**

Please complete the information below on the organization being assessed.

Provider Information		
Provider's Legal Name	Sts. Joachim and Ann Care Service	
Acronym (If Applicable)		
Year Incorporated		
EIN		
Street Address	4116 McClay Road	
Zip Code		63304

P	roject Information
Project Name	Sts. Joachim and Ann PH-RRH CoC Bonus
Project Budget Grant Number	
Name of Project Director	Pam Struckhoff
Project Director Email Address	pstruckhoff@jacares.org
Project Director Phone Number	636-441-1302 x 6721
Which best describes the project *	Rapid Rehousing
If project is a Safe Haven, please choose proj housing, or permanent housing	ect type that it most operates like, e.g. shelter, transitional
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your	
assessment questions.	None of the above

<sup>\*</sup>Please note that when you select a project type, particular standards may not be relevant.

Management Information		
Name of CEO	Pam Struckhoff	

CEO Email Address	pstruckhoff@jacares.org
CEO Phone Number	636-441-1302 ex 6721
Name of Staff Member Guiding Assessment	Brittany Morgan, LBSW, MSW
Staff Email Address	bmorgan@jacares.org
Staff Phone Number	636-441-1302 ex. 6673

Assessment Information		
Name of Assessor	Brittany Morgan	
Organizational Affiliation of Assessor	Sts. Joachim & Ann Care Services	
Assessor Email Address	bmorgan@jacares.org	
Assessor Phone Number	636-441-1302 ex. 6673	
Date of Assessment	Sept. 14, 2023	



For each standard, please use the signifies full compliance for the sta

	No.	Standard
Access 1		Projects are low-barrier
Access 2		Projects do not deny assistance for unnecessary reasons
Access 3		Access regardless of sexual orientation, gender identity, or marital status

Access 4	Admission process is expedited with speed and efficiency
Access 5	Intake processes are person- centered and flexible
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry

Access 7 Exits to homelessness are avoided

#### Name

Participant Input 1 Participant education is ongoing

Projects create regular, formal
Participant Input 2 opportunities for participants to
offer input

#### **Housing First Standards**

drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" indard.

Access Definition / Evidence	Say It
Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source.	Always
Optional notes here	
Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.	Always

Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/

Optional notes here

Always

Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable.

**Always** 

#### Optional notes here

Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project.

Always

#### Optional notes here

Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented.

Always

Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies.

Somewhat

Participant Input Definition / Evidence	Say It
Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction.	Somewhat
Optional notes here	
Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services.	Somewhat
Optional notes here	

Document it	Do it
Always	Always
Always	Always
Always	Always

Always Always Always Always Always Always Always Always

Document it	Do it
Always	Somewhat
Somewhat	Somewhat



For each standard, please use the signifies full compliance for the sta

	Standard
Leases 1	Housing is considered permanent (not applicable for Transitional Housing)
Leases 2	Participant choice is fundamental
Leases 3	Leases are the same for participants as for other tenants

Leases 4	Participants receive education about their lease or occupancy agreement terms
Leases 5	Measures are used to prevent eviction
Leases 6	Providing stable housing is a priority

Leases 7	Rent payment policies respond to tenants' needs (as applicable)

## **Housing First Standards**

drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" indard.

Always
Always

# Optional notes here

Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants' and owner's choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market.

Always

Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities.

Somewhat

#### Optional notes here

Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.

Somewhat

#### Optional notes here

Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.

**Always** 

While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.

Always

Document It	Do It
Always	Always
Always	Always
Always	Always

Always	Somewhat
Somewhat	Somewhat
Always	Always

Always Always



For each standard, please use the a signifies full compliance for the sta

	Standard
Services 1	Projects promote participant choice in services
Services 2	Person Centered Planning is a guiding principle of the service planning process
Services 3	Service support is as permanent as the housing

Services 4	Services are continued despite change in housing status or placement
Services 5	Participant engagement is a core component of service delivery
Services 6	Services are culturally appropriate with translation services available, as needed

Services 7	Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)
	Standard
Housing 1	Housing is not dependent on participation in services
Housing 2	Substance use is not a reason for termination

Housing 3	The rules and regulations of the project are centered on participants' rights
Housing 4	Participants have the option to transfer to another project

# **Housing First Standards**

drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" undard.

Services Definition / Evidence	Say it
Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services.	Always
Optional notes here	
Person-centered Planning is a guiding principle of the service planning process	Always
Optional notes here	
Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing.	Always

Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays.

**Always** 

#### Optional notes here

Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time.

Always

#### Optional notes here

Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate, culturally-specific services. Translation services are provided when needed to ensure full comprehension of the project. Projects that serve families with children should have family-friendly rules that allow for different schedules based on work and school hours and have services that allow parents to participate in activities without having to constantly supervise their children themselves (i.e. can use the bathroom or take a shower without their children being in the bathroom with them).

Always

Services support a participant's ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and addiction are a part of some participants' lives. Participants are engaged in non-judgmental communication regarding their behavior and are offered education regarding how to avoid risky behaviors and engage in safer practices.

Always

Optional notes here

#### **Housing Definition / Evidence**

Say It

Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or demonstration of progress made on a service plan. Services must be offered by staff, but are voluntary for participants.

Always

#### Optional notes here

Participants are only terminated from the project for violations in the lease or occupancy agreements, as applicable. Occupancy agreements or an addendum to the lease do not include conditions around substance use or participation in services. If the project is a recovery housing model focused on people who are in early recovery from drugs or alcohol (as outlined in HUD's Recovery Housing Brief), different standards related to use and subsequent offer of treatment may apply. See HUD's Recovery Housing brief here: https://www.hudexchange.info/resource/4852/recovery-housing-policy-brief/

Always

Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets.

**Always** 

#### Optional notes here

Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.

Always

Document it	Do it
Always	Always
Always	Always
Always	Always

Always Always Always Always Always Somewhat

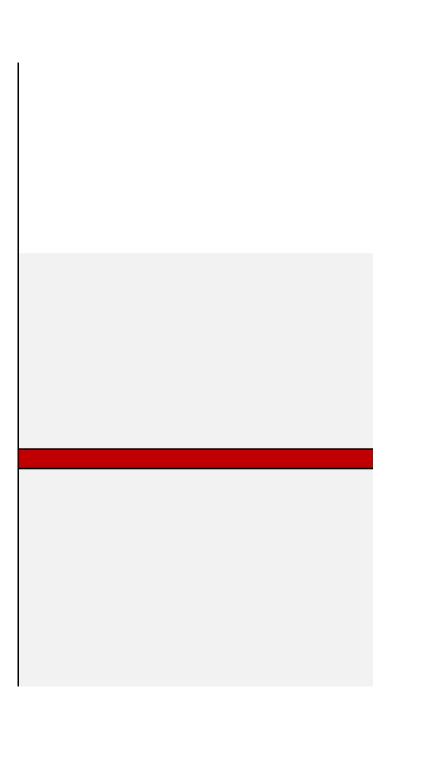
Always	Always
Document It	Do It
Always	Always
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Always	Always

Always	Always
Somewhat	Somewhat



For each standard, please use the signifies full compliance for the sta

_	
	Standard
Project 1	Quick access to RRH assistance
Project 2	RRH services support people in maintaining their housing
Project 3	Providers continuously assess a participant's need for assistance



# **Housing First Standards**

drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" undard.

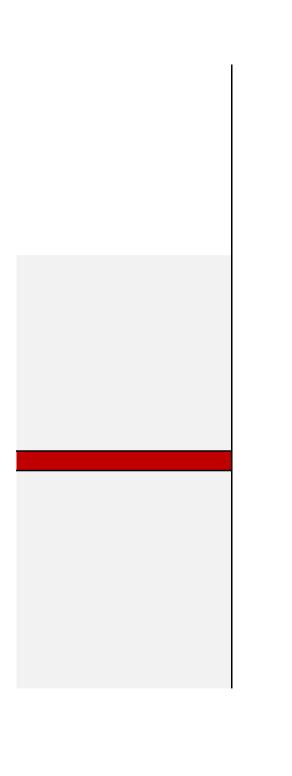
Optional notes here

Project -Specific Standards	Say It
A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice.	Always
Optional notes here	
Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers.	Always
Optional notes here	
On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments.	Always

No additional standards		
Optional notes here		
No additional standards		
Optional notes here		
No additional standards		
Optional notes here		

No additional standards			
Optional notes here			
No additional standards			
Optional notes here			
	Section is not applicable. Please see fo	llowing section.	

Document it	Do it
Always	Always
Always	Always
Always	Always







Sts. Joachim and Ann Care Service Sept. 14, 2023

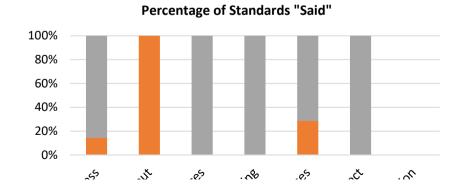
## Some standards have not been evaluated. Please return and complete all standards be

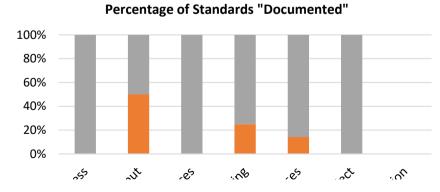
Your score:	165

Max potential score: 180

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



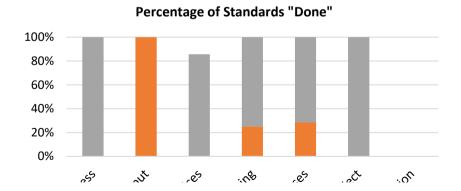


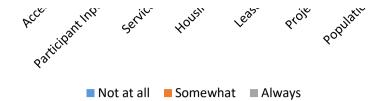




# fore finalizing report.







Non-Compliant Star	ndards ("Not a	t all" to Whether Standa	rd is Said)	
Category	No.	Name	Standard	

Non-Documented Stan	dards (	"Not at All" to Whether Sta
Category	No.	Name

andard is Documented)	
Standard	

# Non-Evidenced Standards ("Not at All" to Whether Stan

Category No. Name

idard is Done")	
Standard	

### http://www.communitycouncilstc.org/coc/coc-competition

Resources

Membership

community council Contact Coordinated Entry Resource Directory E-News Signup

Meeting Space

# **Notice of Funding: 2023 CoC Program** Competition

HUD FY23 CoC Program Competition is OPEN-CoC requests proposals for funding

The Notice of Funding Opportunity (NOFO) fir the Fiscal Year (FY)23 Continuum of Care Program Competition has been posted to the grants.gov website at https://www.grants.gov/web/grants/viewopportunity.html?oppId=349091

The MO-503 CoC is seeing applications to expand availability of housing for persons fleeing domestic violence, permanent supportive housing, and rapid rehousing. The application deadline for associate applications to be submitted with the MO-503 St. Charles, Lincoln and Warren County Collaborative Application through ESNAPS is Friday, August 25th, 2023. If you plan to apply for funding, please submit a letter of intent to: dkastigar@communitycouncilstc.org by Monday, August 14, 5pm.

Application information meeting highlights: CLICK HERE

For agencies who are submitting a new or renewal application, here is a timeline of key dates is: CoC 2023 Announcement and timeline

Project Scoring Tool CLICK HERE

About Us

HUD has not yet posted the amount of funding that will be available for either:

- · A domestic violence (DV) bonus, to provide permanent housing and services to survivors of domestic violence, dating violence, and stalking, or
- · The CoC bonus amount available this year for possible new funding for our CoC.

For more information about this funding opportunity, please attend the information session on July 31st or email dkastigar@communitycouncilst.org

#### Membership

Member Benefits	>
Member Listing	>
New Member Application	>
Membership Payment	>
Member Announcements	>
Announcement Guidelines	>
Membership Interest Form	>
Boardroom	>



#### Lunch, Learn & Network

Learn about what is happening in our community and get connected to others with a passion to serve.

Learn More

: Member/Community Events



































# There were no projects <u>rejected</u> for the MO -503 St. Charles, Lincoln, and Warren County CoC funding Competition

Notification that your PH-RRH project has been accepted and ranked for CoC submission





I have attached your official notification that both Sts. Joachim and Ann PH-RRH renewal project and the Rapid Rehousing new project were accepted and ranked for submission at the full funding level. If you have any questions, you are welcome to call me or Michelle Woods, the Rank and Review Committee chair. Thanks for your efforts to house and support persons experiencing homelessness in our community!



Dottie Kastigar
Fragile Families Program Director &
MO-503 CoC Lead staff
Community Council Phone 636-978-2277
Email dkastigar@communitycouncilstc.org

Visit us at 80 Twenty Studios located at 2528 Highway K in O'Fallon MO Suite 204

≪ Reply All

→ Forward

Fri 9/8/2023 2:57 PM

Reply

Notification that your Permanent Supportive Housing project has been accepted and ranked for CoC submission



#### Dear Danielle-

I have attached your official notification that your Permanent Supportive Housing renewal project was ranked for submission at the full funding level. If you have questions, you are welcome to call me or Michelle Woods, the Rank and Review Committee chair. Thanks for your efforts to house and support persons experiencing homelessness in our community!



Dottie Kastigar

Fragile Families Program Director &
MO-503 CoC Lead staff
Community Council Phone 636-978-2277
Email dkastigar@communitycouncilstc.org

Visit us at 80 Twenty Studios located at 2528 Highway K in O'Fallon MO Suite 204

# Notification of Project Acceptance for CoC Ranking





#### Erin and Robin-

I have attached your official notification that your YIN Youth RRH renewal project was accepted and ranked for submission at the full funding level. If you have any questions, you are welcome to call me or Michelle Woods, the Rank and Review Committee chair. Thanks for your efforts to house and support persons experiencing homelessness in our community!



Dottie Kastigar
Fragile Families Program Director &
MO-503 CoC Lead staff
Community Council Phone 636-978-2277
Email dkastigar@communitycouncilstc.org

Visit us at 80 Twenty Studios located at 2528 Highway K in O'Fallon MO Suite 204 Notification that your CoC projects have been accepted and ranked for CoC submission





#### Todd-

I have attached your official notification that Community Council's project applications for HMIS renewal, SSO-CE Coordinated Entry, and the CoC Planning project have all been accepted and ranked for submission at the full funding level. If you have any questions, you are welcome to call me or Michelle Woods, the Rank and Review committee chair. Thanks for all your efforts to support the rehousing of persons experiencing homelessness in our Community!



Dottie Kastigar
Fragile Families Program Director &
MO-503 CoC Lead staff
Community Council Phone 636-978-2277
Email dkastigar@communitycouncilstc.org

Visit us at 80 Twenty Studios located at 2528 Highway K in O'Fallon MO Suite 204

#### MO-503 Final FY23 Rank and Review Summary sheet with final rankings and recommended funding amounts

Signed: Michelle Woods/Chair of Rank and Review

Applicant	Project Name	Housing Type	Accepted for submission?Y /N**	Group final scores	Project final Ranking	Application Funding Amount	Funding reallocated? Y/N*
Community Council	CoC Planning Project	CoC Planning		Not scored	Not ranked	50,000	N/A
Community Council	SHP-HMIS 15 -renewal project	HMIS	У	100	1	67,678	No
Community Council	SHP-HMIS 15 expansion-renewal	HMIS	У	100	6	38,792	No
Community Council	SSO-CE renewal project	SSO-CE	у	100	2	169,612	No
Compass Health	SHP -renewal project	PSH	У	98	5	189,370	No
Sts. Joachim & Ann Care Service	PH-RRH renewal project	PH-RRH	У	112	4	38,792	No
Youth In Need	Rapid Rehousing -renewal project	PH-RRH	У	115	3	52,396	No
Sts. Joachim & Ann Care Service	RRH new project	PH-RRH	У	100	7	52,410	No

<sup>\*</sup> If funding has been reallocated, indicate project and amount here.

<sup>\*\*</sup> If "N" indicate reason on individual project scoring sheet

## PIT Count Data for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

### **Total Population PIT Count Data**

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	392	456	425	395
Emergency Shelter Total	242	324	301	213
Safe Haven Total	0	0	0	0
Transitional Housing Total	25	22	22	21
Total Sheltered Count	267	346	323	234
Total Unsheltered Count	125	110	102	161

## **Chronically Homeless PIT Counts**

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	18	23	16	29
Sheltered Count of Chronically Homeless Persons	8	23	9	15
Unsheltered Count of Chronically Homeless Persons	10	0	7	14

# PIT Count Data for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

#### **Homeless Households with Children PIT Counts**

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	66	66	59	45
Sheltered Count of Homeless Households with Children	61	55	54	41
Unsheltered Count of Homeless Households with Children	5	11	5	4

#### **Homeless Veteran PIT Counts**

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	9	6	15	12	6
Sheltered Count of Homeless Veterans	5	2	9	8	2
Unsheltered Count of Homeless Veterans	4	4	6	4	4

<sup>\*</sup>For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

## HIC Data for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

HMIS Bed Coverage Rates

Project Type	Total Year- Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year- Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year- Round Beds	Total Year- Round, Current VSP Beds in an HMIS Comparable Database	Total Year- Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	63	33	33	100.00%	16	30	53.33%	49	77.78%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	23	23	23	100.00%	0	0	NA	23	100.00%
RRH Beds	26	26	26	100.00%	0	0	NA	26	100.00%
PSH Beds	264	264	264	100.00%	0	0	NA	264	100.00%
OPH Beds	120	120	120	100.00%	0	0	NA	120	100.00%
Total Beds	496	466	466	100.00%	16	30	53.33%	482	97.18%

HIC Data for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

#### HIC Data for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

#### Notes

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

# **PSH Beds Dedicated to Persons Experiencing Chronic Homelessness**

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	33	53	40	50

# Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	14	10	14	7

#### **Rapid Rehousing Beds Dedicated to All Persons**

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	86	65	69	26

<sup>\*</sup>For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

<sup>\*\*</sup>For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

HIC Data for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

## **FY2022** - Performance Measurement Module (Sys PM)

#### Summary Report for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

#### **Measure 1: Length of Time Persons Remain Homeless**

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)				
	Revised FY 2021	FY 2022	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	
1.1 Persons in ES and SH	661	511	25	25	32	7	9	9	10	1	
1.2 Persons in ES, SH, and TH	673	531	32	32	42	10	10	10	11	1	

#### b. This measure is based on data element 3.17.

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

# FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)		,	Average LO (bed n	T Homeles ights)	S	Median LOT Homeless (bed nights)				
	Revised FY 2021	FY 2022	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	
1.1 Persons in ES, SH, and PH (prior to "housing move in")	777	663	172	172	211	39	48	51	44	-7	
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	788	683	178	176	216	40	58	60	50	-10	

## **FY2022** - Performance Measurement Module (Sys PM)

# Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less		Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years		
	Revised FY 2021	FY 2022	Revised FY 2021	FY 2022	% of Returns	Revised FY 2021	FY 2022	% of Returns	Revised FY 2021	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	30	25	1	1	4%	2	3	12%	3	3	12%	7	28%
Exit was from ES	118	186	4	8	4%	9	3	2%	4	8	4%	19	10%
Exit was from TH	9	18	1	1	6%	0	0	0%	0	4	22%	5	28%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	221	180	3	5	3%	2	0	0%	11	13	7%	18	10%
TOTAL Returns to Homelessness	378	409	9	15	4%	13	6	1%	18	28	7%	49	12%

### **Measure 3: Number of Homeless Persons**

Metric 3.1 – Change in PIT Counts

# FY2022 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	456	425	-31
Emergency Shelter Total	324	301	-23
Safe Haven Total	0	0	0
Transitional Housing Total	22	22	0
Total Sheltered Count	346	323	-23
Unsheltered Count	110	102	-8

### Metric 3.2 - Change in Annual Counts

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	668	673	531	-142
Emergency Shelter Total	656	661	511	-150
Safe Haven Total	0	0	0	0
Transitional Housing Total	32	32	33	1

# FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	11	11	6	-5
Number of adults with increased earned income	0	0	2	2
Percentage of adults who increased earned income	0%	0%	33%	33%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	11	11	6	-5
Number of adults with increased non-employment cash income	2	2	3	1
Percentage of adults who increased non-employment cash income	18%	18%	50%	32%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	11	11	6	-5
Number of adults with increased total income	2	2	4	2
Percentage of adults who increased total income	18%	18%	67%	49%

# FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	29	29	29	0
Number of adults who exited with increased earned income	6	6	4	-2
Percentage of adults who increased earned income	21%	21%	14%	-7%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	29	29	29	0
Number of adults who exited with increased non-employment cash income	6	6	6	0
Percentage of adults who increased non-employment cash income	21%	21%	21%	0%

#### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	29	29	29	0
Number of adults who exited with increased total income	11	11	10	-1
Percentage of adults who increased total income	38%	38%	34%	-4%

# FY2022 - Performance Measurement Module (Sys PM)

### Measure 5: Number of persons who become homeless for the 1st time

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	641	643	475	-168
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	89	88	98	10
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	552	555	377	-178

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	884	882	690	-192
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	133	129	163	34
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	751	753	527	-226

## **FY2022** - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

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

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	69	207	94	-113
Of persons above, those who exited to temporary & some institutional destinations	0	7	8	1
Of the persons above, those who exited to permanent housing destinations	2	17	19	2
% Successful exits	3%	12%	29%	17%

Metric 7b.1 – Change in exits to permanent housing destinations

# **FY2022 - Performance Measurement Module (Sys PM)**

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	465	772	635	-137
Of the persons above, those who exited to permanent housing destinations	166	255	250	-5
% Successful exits	36%	33%	39%	6%

#### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	145	316	381	65
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	142	306	374	68
% Successful exits/retention	98%	97%	98%	1%

# FY2022 - SysPM Data Quality

## MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

	All ES, SH			All TH		All PSH, OPH		All RRH			All Street Outreach				
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non- DV Beds on HIC	77	59	42	25	24	23	150	257	334	86	65	69			
2. Number of HMIS Beds	77	59	42	25	24	23	150	257	334	86	65	69			
3. HMIS Participation Rate from HIC ( % )	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	328	672	535	42	32	51	178	334	403	496	203	134	233	232	237
5. Total Leavers (HMIS)	302	620	499	31	14	31	9	33	20	414	139	100	111	115	95
6. Destination of Don't Know, Refused, or Missing (HMIS)	14	264	14	1	0	5	5	9	0	24	21	17	63	76	3
7. Destination Error Rate (%)	4.64	42.58	2.81	3.23	0.00	16.13	55.56	27.27	0.00	5.80	15.11	17.00	56.76	66.09	3.16

# FY2022 - SysPM Data Quality

# Submission and Count Dates for MO-503 - St. Charles City & County, Lincoln, Warren Counties CoC

#### **Date of PIT Count**

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/25/2023	

## **Report Submission Date in HDX**

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/5/2023	Yes
2023 HIC Count Submittal Date	4/6/2023	Yes
2022 System PM Submittal Date	2/8/2023	Yes



9/22/2023

St. Charles, Lincoln & Warren County Continuum of Care C/O Community Council of St. Charles County 2528 Highway K Suite 204 O'Fallon MO 63368

RE: FR-6700-N-25

To Whom It May Concern:

Sts. Joachim and Ann Care Service (Care Service) is pleased to offer a letter in support of funding opportunity FR-6700-N-25. The Care Service serves the Tri-County area (MO-503) with a mission to serve those in crisis and to prevent homelessness and hunger. Services include street outreach, case management, housing navigation and direct financial assistance in the form of deposit, rent, emergency shelter, and utilities to those who are literally homeless or at imminent risk of homelessness. The Care Service operates 6 affordable housing units and 6 transitional housing units.

The Care Service is a recipient of MHTF, ESG Rapid Rehousing, and COC Rapid Rehousing funds as well as many other foundation and City/County grants. Upon receipt of this grant the Care Service will provide at least \$15,000 in housing navigation services, assistance obtaining necessary documentation, medical costs, and direct financial assistance in the form of deposits and rent to ensure individuals move from homeless to housed.

Respectfully,

Pam Struckhoff LMSW

**Executive Director** 

Sts. Joachim & Ann Care Service

4116 McClay Road

St. Charles MO 63304

636-441-1302 x)6721

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#### **CENTRAL ADMINISTRATION OFFICE**

16 NORTH COURT STREET, P.O. BOX 470 BOWLING GREEN, MISSOURI 63334-0470

North East Community Action Corporation (NECAC) is pleased to offer this letter of support to Sts. Joachim & Ann Care Service (Care Service) as they pursue funding through the Continuum of Care Homeless Assistance Competition, funding number FR-6700-N-25.

Our agencies have collaborated using Care Service housing navigation services, case management, and direct financial service assistance and NECAC's Housing Voucher program to provide housing and services to vulnerable Tri-County residents for several years.

NECAC strives to make a difference by empowering people, improving lives and building communities. NECAC operates the Housing Choice Voucher Program, and works with the USDA, Missouri Housing Development Corporation as well as HUD. NECAC owns 14 apartment complexes across the state of Missouri.

Our continued partnership with the Care Service regarding housing navigation, case management, direct financial assistance and NECAC housing vouchers will provide additional supportive housing resources for the COC program. We look forward to collaborating with the Care Service on utilizing housing vouchers, leveraging the Coordinated Entry system for submitting eligible referrals, and collaborating with other stakeholders for supportive services.

Again, NECAC enthusiastically supports the Care Service's application and believes that continued partnership with them will maintain a critical housing and service provider resource for the Tri-County area.

Respectfully,

Dianna Clair

Dianna Clair

Rental Assistance Programs Director







September 21,2023

St. Charles, Lincoln & Warren County Continuum of Care C/O Community Council of St. Charles County 2528 Highway K Suite 204
O'Fallon MO 63368

RE: Services for Unsheltered homeless with Severe Service Needs grant

To Whom It May Concern:

Compass Health, a federally qualified health center, commits health services support to the MO-503 Continuum of Care Plan for Services for unsheltered homeless in St. Charles, Lincoln, and Warren Counties with severe service needs.

Upon receipt of this grant, Compass Health commits to provide Behavioral Health Crisis Center 23-hour services for 2024. Compass Health may provide other support and services, as available and appropriate, for which an estimated dollar amount cannot be provided at this time. Compass Health partners with Sts. Joachim & Ann's homeless Street outreach and case management program, providing crisis access point, psychiatric, dental, and medical care to those in need.

Compass Health staff also participate with the Community Council on the Mayor's short- and long-term housing task force. It is our understanding that this grant will fund staffing to increase case management services to people living on the streets. Funding will also assist with expansion of rehousing services for this population.

Compass Health system looks forward to working with community partners to better serve the unhoused in our community. Please support the MO-503 Continuum request for funding for this population. Please contact me if you need any further information at dharshaw@compasshn.org or 636-887-1839.

Sincerely,

Peter Lyskowski

Chief Administrative Officer

Peter Lyskowski

## **MO-503 Continuum of Care Progress Report 2021-2023**

			Annual	<b>Q1</b> (10/1/22-12/31/23)	<b>Q2</b> (1/1/23-3/31/23)	<b>Q3</b> (4/1/23-6/30/23)	<b>Q4</b> (7/1/23-9/30/23)	Annual
Key result	Lead Committee	Key Results	Result	Result	Result	Result	Result	Result
1	Executive	Reduce and Prevent homelessness among households in a housing crisis  Develop CoC strategies to best capture and use federal funding available. (ARP, CoC, Etc.)  Promote need for funding for shelter, housing, prevention, and transportation needs of persons in a housing crisis  Set goals to increase shelter and affordable housing to improve CoC performance  Strengthen CoC capacity through monthly Exec. planning sessions, 10 monthly information sharing meetings, and basecamp. Recruit and maintain a strong, diverse CoC leadership team. Engage new community partners.	24.4 M in rent & mortgage funding assisted 5271 HH in St. Charles, Lincoln, and Warren Counties over 2 yrs (avg cost \$4,500 per HH). Over 6221 HH	CE assessed 1003 persons; Agencies accepted 323 referrals. 3 agencies applied for ARPA funding	CE assessed 1081 persons; agencies accepted 335 referrals; PIT count & debriefing held; 15 EWR weather activations, of 181 shelter bed nights to 76 HH.	CE assessed 1173 persons; agencies accepted 302 referrals; regular Ex. Meetings held; Recommende d Fragile Family funding alert prepared and shared with stakeholders	emergency resources with Emergency Management; updating & sharing CoC subcommittee lists and structure for recruitment of new members	
			Annual	<b>Q1</b> (10/1/22-12/31/23)	<b>Q2</b> (1/1/23-3/31/23)	<b>Q3</b> (4/1/23-6/30/23)	<b>Q4</b> (7/1/23-9/30/23)	Annual
Key result	Lead Committee	Key Results	Result	Result	Result	Result	Result	Result
2	DPC	Monitor & evaluate the performance of the homeless response system through use HMIS data; oversee HMIS implementation  Use data to monitor and track changes in persons requesting housing assistance. Share needs with CoC  Review racial equity data and develop a process to monitor and strengthen equity in housing outcomes	HMIS oversight and review CoC performance; strongly endorsed need for PH; maintain emergency	Reviewed CoC performance, unmet needs and funding priorities, CoC plan for serving unsheltered homeless; need for ES, PH, and housing stability case- management	Reviewed Stella modeling tool for predictive CoC modeling; met 3/8/23 & reviewed CoC SPM and LSA reporting for CoC as well as HUD data strategy	PowerBI integrated into HMIS database; 3 yr contract renewal with CaseWorthy; racial equity training for CC and CE staff	Racial equity evaluation for next steps; reviewed and approved CaseWorthy 3	
3	Service	Evaluate Coordinated Entry and recommend strategies to improve services and racial equity for consumers  Conduct a survey of current and former homeless persons on their experiences with Coordinated Entry  Educate agencies on strategies to more rapidly procure needed documentation for rental and rehousing assistance  Recommend strategies to improve staff training and racial disparities in homeless service delivery	Consumer survey completed for distribution in Jan-Feb.; 2 consumer focus groups held; CE staff more engage/onsite in Warren & Lincoln Co.; reg. training held for staff	Conducted consumer survey on CE	Completed consumer survey on CE effectiveness - secured 153 surveys from CE consumers	Consumer survey results compiled & reviewed; recommendations made to CE staff; CE and CoC Policy & perf. manual updated.	reports  Supported funding applications for increased shelter and services for the unhoused	

			Annual	<b>Q1</b> (10/1/22-12/31/23)		<b>Q3</b> (4/1/23-6/30/23)	<b>Q4</b> (7/1/23-9/30/23)	Annual
Key result	Lead Committee	Key Results	Result	Result	Result	Result	Result	Result
4	EWR/ Public relations	Educate stakeholders about homelessness, need for warming shelters, lack of CoC resources. Support for people impacted by COVID. Share landlord resources, connections & efforts toward shelter and affordable housing development  Promote understanding of each CoC member agency role and objectives – encourage "2-minute commercials" to	EWR Committee recruited additional churches for EWR participation. Lincoln Co Housing task force and Waren Co Fragile and homeless groups actively working to expand services; St. Charles Housing task force engaging service groups and churches and municipal leaders in addressing homeless needs. Flood resources shared.	collaborative applications were submitted for ARPA funding from City of St. Charles, J&A, and Habitat for nearly \$10M in funding. Funding application for unsheltered	warming sites; 200 volunteers trained, EWR manual updated. Funding application for drop-in centers for unsheltered	All three applications for \$10M in ARPA funds denied by DED; Information compiled on inequitable CoC funding; Funding equity issues shared with stakeholders; Ongoing plans to share CoC funding needs with political leaders.	committee members for next year;	
5	Short & Long term housing committee & Housing	Emergency shelter and affordable permanent Share updates on shelter and affordable housing initiatives with the CoC Raise awareness about community unmet need for shelter	Multiple efforts in progress across the region to addres this issue; visibility raised among local government leaders; strengthened community partnerships. Applied for special funding NOFO for unsheltered homelessness.			Bridges of Hope (BOH)shelter; housing	192 unit LIHTC project under construction in St. Peters; continued efforts to secure funding and location for sheltering	
	team	# of new emergency shelter beds goal - 12 units by 12/23	4 habitat homes; funding apps submitted for new development 3-4 motel units funded with ESGCV and CDBG-CV funding; Faith Haven +6 beds	J&A raising funds to purchase 8-10 hms with CDBG, & private funding resources purchased units  Bridge of Hope (Lincoln Co.) broke ground on 10 room, 20 be shelter; J&A CCRB funding request to support Em. shelter for families & other funding for 2-3 year-round ES beds				

	Summary of Key metric results 6-12					Annual	Q1 (thru	Q2 (thru	Q3 (thru	Q4 (thru	Annual
	Key result	Metric	Community System Performance		10/1/20- 9/30/21	10/1/21- 9/30/22	12/31/22)	3/31/23)	6/30/23)	9/30/23)	10/1/22- 9/30/2023
	6	SPM 5.1	% of people experiencing First time homelessness	Target (2021-23)	Result	Result	Result	Result	Result	Result	Result
	7	SPM 1.a	Average length of time persons remain homeless (in Emergency shelter)	90%	86%	81%	81%	86%	85%		
	7a	LSA	Average length of time homeless for families	24 days	25 days	30 days	30 days	29 days	19 days		
	8	SPM 7b.1 and LSA	% of households in Emergency Shelter (ES), Transitional Housing (TH), and Rapid Rehousing (RRH) obtaining permanent housing	50%	36%	41%	43%	44%	32%		
Out-	8a	SPM 7b.2	% of households in permanent housing retaining permanent housing	95%	98%	99%	99%	98%	96%		
comes	9	SPM 2.a and LSA	% of persons/households returning to homelessness over a 12 month period	3%	3%	1%	2%	2%	3%		
	9a	SPM 2.a	% of persons/households returning to homelessness over a 6-month period	2%	2%	4%	9%	8%	16%		
	10	SPM 4.4	% of adult leavers with increased earned income	22%	21%	23%	22%	27%	26%		
	10a	SPM 4.5	% of adult leavers with increased non-employment cash income	22%	21%	19%	19%	15%	4%		
	11	MOHIP CE	# of households prevented from becoming homeless		2957	3264	685	760	832		
	12	Tableau-exits to PH	# of households rehoused		348	422	80	106	25		