## Sacramento Continuum of Care (CoC) Board Agenda Wednesday, June 8, 2022 || 8:00 AM – 10:00 AM



# Zoom Meeting Meeting ID: 899 2915 5766 Passcode: 168104

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| I. Welcome & Introductions   | I. Welcome & Introductions: Erin Johansen, CoC Board Chair   |                  |         |  |  |  |  |
|--|--|------------------|---------|--|--|--|--|
| II. Review & Approval of Ma  | y 2022 Minutes: Pixi   | e Popplewell, Se | cretary |  |  |  |  |
| III. CoC Board Chair's Repo  | <b>rt:</b> Erin Johansen   |                  |         |  |  |  |  |
| IV. Sacramento Steps Forwa   | ard (SSF) CEO's Rep  | oort: Lisa Bates |         |  |  |  |  |
| V. Announcements:<br>(Upcoming Events &<br>Recent Actions)   | (Upcoming Events & Members, SSF (5 minutes)  |                  |         |  |  |  |  |
| <ul> <li>A. Authorize SSF to Submit Application Due June 28</li> <li>B. Transition Business Con representing the Sacram</li> </ul>                                   | <ul> <li>VI. Consent Agenda - Action Items:</li> <li>A. Authorize SSF to Submit Youth Homelessness Demonstration Project<br/>Application Due June 28, 2022</li> <li>B. Transition Business Community Representative Jenna Abbott to<br/>representing the Sacramento Metro Chamber</li> <li>C. Family Permanent Housing Assessment &amp; Prioritization Tool Pilot</li> </ul> |                  |         |  |  |  |  |
| VII. New Business:   | 1  | 1                |         |  |  |  |  |
| A. Local Homeless Action<br>Plan & HHAP-3<br>AllocationsYa-Yin Isle, SSF<br>Chief Strategic<br>Initiatives Officer8:20 AM<br>(45 minutes)Information &<br>Discussion |  |                  |         |  |  |  |  |
|  |  |                  |         |  |  |  |  |

| b. HHAP-3 CoC<br>Funding<br>Allocations<br>Approval                         |  |                         |             |
|---|--|-------------------------|-------------|
| B. FY2022 HUD CoC NOFO<br>Review & Rank Policies<br>and Scoring Tools       | Sarah Bontrager<br>and Angel Uhercik,<br>PRC Co-Chairs,<br>Maddie Nation,<br>Homebase &<br>Michele Watts | 9:05 AM<br>(30 minutes) | Action      |
| C. Cal-AIM  | Lisa Bates, SSF<br>CEO & Manage<br>Care Partners   | 9:35 AM<br>(20 minutes) | Information |
| D. 2022 PIT Local Report<br>Update  | Michele Watts  | 9:55 AM<br>(5 minutes)  | Information |
| VIII. Meeting Adjourned<br>Next CoC Board Meeting: Wednesday, July 13, 2022 |  |                         |             |

For any questions or concerns, please contact <u>Michele Watts</u>, SSF Chief Planning Officer.

Ending Homelessness. Starting Fresh.

# **Recording of Zoom Meeting**. The meeting chat is below the minutes.

#### Attendance:

| Member                     | Area of Representation                | Present |
|----------------------------|---------------------------------------|---------|
| Alexis Bernard             | Mental Health Service Organization    | Yes     |
| Amani Sawires Rapaski      | Substance Abuse                       | Yes     |
| Amber Kemp                 | Healthcare                            | Yes     |
| Angela Upshaw - Vice Chair | Veterans                              | Yes     |
| April Marie Dawson         | People with Disabilities              | No      |
| Christie M. Gonzales       | Substance Abuse Service Organizations | Yes     |
| Deisy Madrigal             | Social Services                       | Yes     |
| Elyah "Eroz" Williams      | Youth with Lived Experience           | No      |
| Emily Halcon               | County of Sacramento                  | Yes     |
| Erin Johansen - Chair      | Mental Health                         | Yes     |
| Fatemah Martinez           | Shelter Provider                      | Yes     |
| Jameson Parker             | Business Community & Street Outreach  | Yes     |
| Jenna Abbott               | Business Community                    | Yes     |
| Jenine Spotnitz            | Mental Health                         | Yes     |
| John Kraintz               | Lived Experience                      | No      |
| Joseph Smith               | Coalition/Network                     | Yes     |

| Julie Davis-Jaffe       | Employment Development          | Yes |
|-------------------------|---------------------------------|-----|
| Juile Hirota            | Shelter and/or Housing Provider | Yes |
| Kimberley Rae Berry     | Person with Lived Experience    | No  |
| MaryLiz Paulson         | Housing Authority               | No  |
| Mason Gizard            | Person with Lived Experience    | Yes |
| Mike Jaske              | Faith Community Advocate        | Yes |
| Monica Rocha-Wyatt      | Mental Health                   | Yes |
| Nicholas Golling        | City of Sacramento              | Yes |
| Paul Jbeily             | Law Enforcement                 | Yes |
| Pixie Pearl - Secretary | Homeless Youth                  | Yes |
| Sarah Bontrager         | City of Elk Grove               | Yes |
| Stefan Heisler          | City of Rancho Cordova          | Yes |
| Stephanie Cotter        | City of Citrus Heights          | No  |
| Tara Turrentine         | Education                       | Yes |

| SSF Staff         | SSF Title                        |
|-------------------|----------------------------------|
| Christina Heredia | Referral Specialist              |
| Janet Rice        | Chief Financial Officer          |
| Jesse Archer      | CoC Analyst                      |
| Jillyan McKinney  | Racial Equity Specialist         |
| Josh Lowy         | Programming Analyst              |
| Kathreen Daria    | Volunteer & Training Coordinator |
| Kaylin Jones      | CoC Coordinator                  |
| Lisa Bates        | Chief Executive Officer          |
| Michele Watts     | Chief Planning Officer           |

| Peter Bell     | CE Manager                          |
|----------------|-------------------------------------|
| Rolf Davidson  | Director of Programs                |
| Scott Clark    | Data Analysis Manager               |
| Tanesha Travis | PLE Coordinator                     |
| Theresa Bible  | Outreach Navigator – Meadowview     |
| Ya-yin Isle    | Chief Strategic Initiatives Officer |

## Guests

Alisa Osunfunke Orduna, Alyxe Lett, Andrew Geurkink, Brandon Wirth, Brian Heller De Leon, Cynthia Pimentel, Danielle Foster, Dawn Angelo, Dawn Basciano, Emily Zelaya, Erica Plumb, genesis white, HART of Folsom, Ivonne Ellis, James Trout, JesseWilliams, John Foley, Julie Field, Karisa Hyppolite, Kasia Elijah, Kate Hutchinson, Kathy Simms, Kia Phillips, Kris Kuntz, Kristin Kane, LeeAnn Brown, Lee Sorrell, Liz Pazdral, nathan arianeh, Mike Fitzgerald, Noel Kammermann, Quinn Jones-Hylton, Robynne Rose-Haymer, Rose, Sarah's iPhone, Sher Singh, Sierra Edwards, Stephanie Henry, Susan Lal, Tim Koehler, Tom Albanese, Troy Lynch, Waking the Village, Zuri K, 15102958675, 19165490373, 19168793439

### I. Welcome & Introductions: Erin Johansen, CoC Board Chair

Erin called the meeting to order around 8:04 AM. Attendance of 73 participants.

# II. Review & Approval of March 9th, 2022 Minutes: Pixie Popplewell, Secretary

Motioned for approval: 1st -Tara Turrentine / 2nd - Nick Golling

Motion approved.

# III. CoC Board Chair's Report: Erin Johansen

IV. Sacramento Steps Forward (SSF) CEO's Report: Lisa Bates

Lisa Bates shared that:

- Information from the Annual Meeting is on the <u>SSF website</u> and thanked all for their participation.
- There was a possibility that the June Board meeting may be moved up a week from its current June 8th date but that discussions needed to happen first in order to confirm the change.

| U                         |                |              |             |
|---------------------------|----------------|--------------|-------------|
| V. Announcements:         | CoC Board      | 8:15 AM      | Information |
| (Upcoming Events & Recent | Members, SSF   | (10 minutes) |             |
| Actions)                  | Staff & Guests |              |             |
|                           |                |              |             |

- Jenna Abbott shared that the River District is still recruiting for an Executive Director, as well as a Program Manager.
- Kate Hutchinsn mentioned that they have started leasing up for Lavender Court and that the referrals will come through Coordinated Entry.

#### VI. Consent Agenda - Action Items:

#### A. Coordinated Entry System Committee new member slate

#### **B.** Point in Time Committee new member appointment

#### C. Coordinated Entry System PSH Transfer Policy & Procedures and PSH Termination of Assistance Policy & Procedures

Consent items motioned for approval: 1st -Emily Halcon / 2nd - Alexis Bernard

Motion approved.

# VII. New Business: A. Local Homelessness Ya-Yin Isle, SSF 8:25 AM Information

| A. Local Homelessness                       | Ya-Yin Isle, SSF    | 8:25 AM      | Information |
|---|---------------------|--------------|-------------|
| Action Plan & HHAP-3                        | Chief Strategic     | (60 minutes) | &           |
| Allocations                                 | Initiatives Officer |              | Discussion  |
| <ul> <li>Draft plan presentation</li> </ul> | Michele Watts,      |              |             |
| <ul> <li>Allocations discussion</li> </ul>  | SSF Chief           |              |             |
| <ul> <li>Plan for approving</li> </ul>      | Planning Officer    |              |             |
| plan and allocations in                     | Alisa Orduna,       |              |             |
| June  | Consultant, & Tom   |              |             |
|   | Albanese,           |              |             |
|   | Consultant          |              |             |
|   |                     |              |             |

- Ya-Yin Isle introduced Tom Albanese and thanked all that attended the Annual Meeting and explained that the gaps analysis information would be shared in greater detail.
- Tom Albanese walked through the Gaps Analysis information in greater detail and explained that it is an ongoing project and how the Point-In-Time Count information and the annual HMIS data would influence it. Please view the slides Tom shared <u>here</u>, pages three through six and fifteen.The HHAP-3 Local Homelessness Action Plan will come back to the CoC Board for approval in June.
- Emily Halcon representing the County of Sacramento discussed HHAP-3 allocations and continuing with HHAP-1 investments. She expressed that the Board is not interested in closing down programs but looking at continuity of programs already established.
- Danielle Foster representing the City of Sacramento spoke about shelter expansion through the use of HHAP funds.
- Michele Watts shared an initial discussion of potential areas of the CoC's HHAP-3 funding.

Questions were asked and answered. Please see the chat and recording.

| <ul> <li>B. CalAIM and HHIP<br/>Program</li> </ul> | Lisa Bates | 9:25 AM<br>(20 minutes) | Information<br>&<br>Discussion |
|--|------------|-------------------------|--------------------------------|
|  |            |                         |                                |

• Amber Kemp with Health Net discussed the process for the application submission of the Housing and Homeless Incentive Program now that the state has released its final guidance. The focus of the plan is on individuals experiencing homelessness and connecting medical members that are needing housing. This is a two year program where funds are not promised but earned. The State requires certain measures be met and improvement seen in order to draw down the available funds. There are four key elements of the plan that the State is looking for along with a strong collaboration with the CoC and the incorporation of HHAP 3 goals so that duplications that may result are reduced. Slides from the presentation may be found <u>here</u>.

| C. Actions taken by<br>CoC Executive<br>Committee on behalf<br>of the CoC Board |  | 9:45 AM<br>(10 minutes) | Information |
|---|--|-------------------------|-------------|
|---|--|-------------------------|-------------|

| <ul> <li>State Family<br/>Homelessness<br/>Challenge Grant:<br/>Authorized SSF to<br/>apply for the state<br/>family grant</li> <li>Wilton Rancheria:<br/>Approved the addition<br/>of Wilton Rancheria to<br/>the Sacramento City &amp;<br/>County CoC via the<br/>HUD FY2022 NOFO<br/>Registration</li> </ul>   |   |  |                       |  |
|---|---|--|-----------------------|--|
| <ul> <li>Michele Watts shared that<br/>for the State Family Homel<br/>addition of Wilton Rancheri<br/>Executive Committee on be<br/>deadline prior to the Board</li> </ul>  | essness Challenge (<br>ia to the Sacramento<br>ehalf of the CoC Boa | Grant and the appr<br>CoC were approv<br>ard as those decision | oval of the ed by the |  |
| D. 2022 Unsheltered<br>PIT Report Update  | Michele Watts   | 9:55 AM<br>(5 minutes)   | Information           |  |
| <ul> <li>Michele Watts brought attention to the next PIT Committee meeting on May 19th<br/>and that the report from the 2022 PIT Count would be coming out at the end of<br/>June. At the May 19th meeting there would also be discussion of the plan for the<br/>next PIT Count and the pros and cons to hold the optional 2023 PIT Count or the<br/>mandated 2024 PIT Count would be weighed, then would be brought back to the<br/>CoC Board for final decision making.</li> </ul> |   |  |                       |  |
| VIII. Meeting Adjourned at 10<br>Next CoC Board Meeting: We   |   | 2022   |                       |  |
| For any questions or concerns, p<br>at <u>mwatts@sacstepsforward.org</u>  |   |  | ef Planning Officer,  |  |

# **CoC Board Meeting Chat**

08:00:08 From Christina H SSF Referral Specialist (she, her) to Everyone: Good morning everyone.

- 08:00:52 From Joseph Smith to Everyone: I'm here
- 08:01:05 From Monica Rocha-Wyatt, she/her, Sac Co Behavioral Health to Everyone: I'm here but not on the list
- 08:01:26 From Pixie Popplewell to Everyone: That was my bad Monica!
- 08:01:29 From Nick Golling to Everyone: off cam while getting kiddos set up and off to school! good morning everyone!
- 08:01:34 From Pixie Popplewell to Everyone: I'll get you added!
- 08:02:25 From Monica Rocha-Wyatt, she/her, Sac Co Behavioral Health to Everyone: No worries :)
- 08:04:50 From Tara Turrentine, SCOE to Everyone: Welcome, Mason! Good to "see" you.
- 08:08:43 From Pixie Popplewell to Everyone: Sacramento CoC Board March Meeting Minutes
- 08:08:47 From Julie Davis-Jaffe (she/her) SETA to Everyone: Yes
- 08:08:49 From Sarah Bontrager to Everyone: Yes
- 08:08:50 From Tara Turrentine, SCOE to Everyone: Yes
- 08:08:50 From Mike Jaske, SacACT to Everyone: yes
- 08:08:50 From Erin Johansen to Everyone: yes

08:08:51 From Stefan Heisler to Everyone: Yes

- 08:08:51 From Joseph Smith to Everyone: yes
- 08:08:51 From Pixie Popplewell to Everyone: yes
- 08:08:51 From Emily Halcon to Everyone: yes
- 08:08:52 From Alexis Bernard, Turning Point Community Programs to Everyone: yes
- 08:08:52 From Julie Hirota, Saint John's to Everyone: yes
- 08:08:53 From Jenna Abbott to Everyone: aye
- 08:08:54 From Amani Sawires -VOA to Everyone: yes
- 08:08:54 From Christie Gonzales to Everyone: yes
- 08:08:58 From AngelaUpshaw to Everyone: yes
- 08:09:56 From Michele Watts, she/her/hers, SSF Chief Planning Officer to Everyone: no minutes for the annual meeting. sorry, I was stuck on mute, we did post online. I will add to the chat.
- 08:11:02 From Michele Watts, she/her/hers, SSF Chief Planning Officer to Everyone: annual meeting materials: https://sacramentostepsforward.org/2022-sacramento-continuum-of-care-annual-meeting/
- 08:13:34 From Jenna Abbott to Everyone: Here is the link to the jobs we have open.

- 08:13:38 From Jenna Abbott to Everyone: https://riverdistrict.net/res/downloads/JobPost-Program-Manager.pdf
- 08:14:09 From Jenna Abbott to Everyone: <u>https://riverdistrict.net/res/downloads/JobPost-Public-Space-Team-Member.pdf</u>
- 08:14:38 From Jenna Abbott to Everyone: https://riverdistrict.net/res/downloads/JobPost-Public-Space-Team-Leader.pdf
- 08:14:52 From Pixie Popplewell to Everyone: Approve Consent Agenda
- 08:14:55 From Amani Sawires -VOA to Everyone: yes
- 08:14:55 From Emily Halcon to Everyone: yes
- 08:14:56 From Jenna Abbott to Everyone: aye
- 08:14:56 From Erin Johansen to Everyone: yes
- 08:14:57 From Nick Golling to Everyone: yes
- 08:14:58 From Alexis Bernard, Turning Point Community Programs to Everyone: yes
- 08:14:58 From Sarah Bontrager to Everyone: Yes
- 08:14:58 From Mike Jaske, SacACT to Everyone: yes
- 08:14:58 From Stefan Heisler to Everyone: Yes
- 08:14:58 From Mason Gizard to Everyone: yes

- 08:14:59 From Jenine Spotnitz to Everyone: Yes
- 08:14:59 From Pixie Popplewell to Everyone: yes
- 08:15:01 From Joseph Smith to Everyone: yes
- 08:15:01 From AngelaUpshaw to Everyone: yes
- 08:15:01 From Deisy Madrigal, She/Her to Everyone: Yes
- 08:15:05 From Tara Turrentine, SCOE to Everyone: Yes
- 08:15:08 From Julie Hirota, Saint John's to Everyone: yes
- 08:15:17 From Christie Gonzales to Everyone: yes
- 08:15:32 From Julie Davis-Jaffe (she/her) SETA to Everyone: Yes
- 08:18:10 From Amani Sawires -VOA to Everyone: are these numbers unduplicated?
- 08:27:12 From Amani Sawires -VOA to Everyone: when you talk about "other communities" are these communities similar to sacramento in size, ami, cost of living, rental costs, vacancy rate, etc?
- 08:36:18 From Jenine Spotnitz to Everyone: This is great, thank you. Is the number who are projected to need housing subsidies but not supportive services available, or is this what you said you're working on?

08:39:12 From Jenna Abbott to Everyone:

Please for the love of all that's good and holy someone get this man in front of the City Council and County Supes. They need to hear all of this

08:39:44 From Jenna Abbott to Everyone:

Specifically the need for flexibility in what we build and how we use it as an ongoing asset

08:40:53 From Erin Johansen to Everyone:

CalAim ECM can be a great match to provide services to those in subsidized housing

- 08:41:13 From Alexis Bernard, Turning Point Community Programs to Everyone: Thank you!
- 08:41:13 From Amani Sawires -VOA to Everyone: thank you. very informative
- 08:41:55 From Emily Halcon to Everyone: BRB
- 08:42:35 From Tom Albanese to Everyone:

Credit to Mark Silverbush, my colleague for doing much of the heavy lifting with the gaps analysis, as well as Josh and Scott from SSF

- 08:46:51 From Monica Rocha-Wyatt, she/her, Sac Co Behavioral Health to Everyone: brb
- 08:49:49 From Waking the Village to Everyone:

This is a great presentation! Such thanks to all who worked on it. How will we avoid what happened in the past where we push to get everyone into coordinated entry, but (with nowhere to navigate folks to) we quickly have a list of names that no one is connected to and we build mistrust in clients in the effectiveness of engagement? We slowed down the system in the past as we worked through names that no providers had connection to any longer.

08:52:38 From Erin Johansen to Everyone:

Thank you for lifting up and prioritizing the need for more subsidized housing!!

08:53:48 From Monica Rocha-Wyatt, she/her, Sac Co Behavioral Health to Everyone: back

- 08:54:05 From Emily Halcon to Everyone: back
- 09:04:17 From Peter Bell (he/him) to Everyone: Hi WTV, I think case conferencing will be a key strategy to minimize people "falling off" the by-name list - but we will also need to continue to push for more resources to be available through a coordinated process.
- 09:06:04 From Mike Jaske, SacACT to Everyone: Will these slides be emailed or posted quickly? Especially the goals?
- 09:10:07 From Lisa Bates (She/Her) SSF to Everyone: We can make available. Still draft until the CoC approves in June
- 09:23:35 From Pixie Popplewell to Everyone: Our data showed that youth actually make up over 20% of homelessness in Sacramento
- 09:24:46 From Robynne Rose-Haymer to Everyone: Thanks Deisy, for continuing to raise this important issue!
- 09:27:39 From Waking the Village to Everyone:

Just want to amplify what Deisy is saying. The priority for chronically homelessness means that a youth needs to free fall for quite awhile before eligible for many HUD funded programs. HUD also has research that points to the ways youth homelessness looks different (i.e. couch bouncing) and thus gets missed.

- 09:29:22 From Peter Bell (he/him) to Everyone: We have made strides to improve access to housing programs for TAY (e.g. EHV included TAY couch bouncing as an eligible population) - but we have more work to do
- 09:31:05 From Zuri K CLAP to Everyone: thank you Bridgette! great points
- 09:32:03 From Mason Gizard to Everyone: I just wanted to echo what Bridget said. I share that experience with youth as well.
- 09:32:06 From Nick Golling to Everyone: thank you for the feedback Bridget!

09:35:29 From Kate Hutchinson to Everyone:

Lending my support for the comment by Deisy, Bridget, Robynne and Mason.

- 09:35:47 From Jenna Abbott to Everyone: Excellent presentations today
- 09:54:16 From Julie Davis-Jaffe (she/her) SETA to Everyone: Great meeting. I need to leave to attend another meeting.
- 09:56:53 From Emily Halcon to Everyone:

As a reminder, the Board of Sups authorized \$10 million to create a new landlord engagement and re-housing program which is intended to help fill some of these gaps with CalAIM and other housing programs. We are working to scope that program out now for a hopeful RFP for provider(s) in the early fall. We certainly see this as one part of helping to fill this gap in CalAIM

09:58:25 From Erin Johansen to Everyone:

Landlord engagement will not solve for this by itself. Vacancy rates are still seriously low and many of the CalAim ECM recipients do not have income. Employment of course is a key strategy but that takes time. Also, landlord engagement also requires a voucher to accompany, is that a plan?

09:59:14 From Emily Halcon to Everyone:

The program is called "landlord engagement" but includes funding for flexible rental subsidies We need a new name!

- 09:59:50 From Erin Johansen to Everyone: Ok that is great!
- 10:00:08 From Alyxe Lett (she/her)-OHI to Everyone: need to jump to another call. Thanks all!
- 10:01:23 From Amber Kemp to Everyone: I need to hop off for another meeting. Thanks, everyone!
- 10:01:30 From Jenine Spotnitz to Everyone: I need to hop off as well, thank you for a very informative meeting!
- 10:01:41 From Danielle Foster to Everyone: Thanks all!!

- 10:02:31 From Kristin Kane (she/her) Kaiser Permanente to Everyone: I need to hop off for another meeting. Thank you for all that you are doing. I look forward to joining future meetings.
- 10:02:41 From Nick Golling to Everyone: so sorry everyone I'm late for another meeting. thank you all for your great work!
- 10:03:45 From Ivonne Ellis, DHA to Everyone: Thank you everyone!
- 10:03:47 From Tara Turrentine, SCOE to Everyone: Thank you, all.
- 10:04:01 From Tom Albanese to Everyone: Thanks all
- 10:04:05 From Ya-yin Isle (she/her), SSF to Everyone: Thank you everyone!
- 10:04:08 From Julie Hirota Saint John's to Everyone: thanks



- TO: CoC Board Members
- FROM: Michele Watts, Chief Planning Officer
- DATE: June 8, 2022
- RE: Permission to submit the Youth Homelessness Demonstration Program (YHDP) NOFO on behalf of the CoC- ACTION (Consent Agenda)

This memo summarizes the background on this topic and the action requested by the Board for submission. YHDP is due June 28, 2022.

#### Background

YHDP, a program of the US Department of Housing and Urban Development (HUD), seeks communities that are ready to end and prevent youth homelessness though the development and implementation of a coordinated community approach.

If awarded, the Sacramento CoC would be given six (6) months to develop and refine a coordinated effort to end youth homelessness. Based on the plan, the CoC then funds projects with YHDP funding through a competitive award process. The award amount is a minimum of \$1 million but is calculated based on a HUD formula. If the programs and plan are successful, the award amount is added to the yearly CoC NOFO competition to continue funded programs.

#### Action Requested

SSF is requesting approval from the Sacramento CoC Board to submit the YHDP NOFO on their behalf.



TO: CoC Board Members

FROM: Michele Watts, Chief Planning Officer

DATE: June 8th, 2022

RE: Transition Business Community Representative Jenna Abbott to representing the Sacramento Metro Chamber

The Sacramento Continuum of Care (CoC) Board is a <u>30 member Board</u> that includes representatives from a variety of stakeholders working to address homelessness in our community. Jenna Abbott, CoC Board member representing the Business Community is transitioning from her role as Executive Director at The River District to Senior Vice President of Strategic Initiatives at the Sacramento Metro Chamber. She will continue to represent the Business Community for the CoC Board in her new role, starting June 1st, with the Sacramento Metro Chamber.

#### Action Requested

Approve the transition of the Business Community Representative Jenna Abbott representing the Sacramento Metro Chamber.



TO: The Continuum of Care Board

- FROM: Jenna Abbott & John Foley, Coordinated Entry System Committee Co-Chairs Peter Bell, SSF CES Manager Vivan Nguyen, SSF CES Referral Specialist
- DATE: June 8th, 2022
- RE: Coordinated Entry System Pilot Assessment Tool for Permanent Housing for Families- ACTION (Consent Calendar)

This memo outlines the development of a Coordinated Entry System (CES) Permanent Housing (PH) assessment tool for families and the prioritization criteria for permanent housing. This assessment and prioritization schema will be tested with referrals to Vista Nueva and Sunrise Pointe. The assessment and schema are recommended for approval by the CoC Board by SSF staff and the CES Committee.

### Background

Goal: to equitably assess and prioritize families for available permanent housing (PH) opportunities.

PH is a new category of housing that is considered long-term and designed to serve people experiencing homelessness, fleeing domestic violence, and at-risk of homelessness. Unlike PSH, PH does not require chronicity or a disabling condition to be eligible. The current assessment tool used for PSH, the VI-SPDAT, is only approved for use with households experiencing homelessness and fleeing DV. Furthermore, based on numerous studies and SSF's own data analysis, the VI-SPDAT has been found to produce racialized outcomes. This new PH assessment tool presents an opportunity to pilot a potential alternative to the VI-SPDAT.

The initial assessment draft was created by coordinated entry staff with feedback from a small working group comprised of members of the racial equity committee and the racial equity coordinated entry core team. Between April 13th, 2022 and May 12th, 2022 additional feedback was collected from various stakeholders, including: homeless services providers, survivor organizations, racial equity and coordinated entry committee members, TAY providers and tribal members from Wilton Rancheria. SSF amended the assessment based on their feedback. The prioritization schema was developed based on current CES prioritization and stakeholder feedback.

#### Summary

The Permanent Housing Assessment for Families consists of 24 questions, nine eligibility questions that are unweighted and 15 vulnerability assessment questions that are weighted and scored for a max score of 15 points. The assessment was designed specifically with a racial equity lens and focus. The end of the assessment includes an optional housing preference questionnaire and needs assessment to assist with housing placement and developing case plans.

### **Prioritization Schema**

Families completing the PH assessment will be prioritized for available permanent housing in the following way:

- 1. PH assessment score (high to low),
- 2. Families located within prioritized zip codes (see table below), and
- 3. Total length of homelessness in their lifetime

#### Prioritized Zip Codes

In total, 14 Sacramento County zip codes have been prioritized. The zip codes were prioritized based on criteria selected from published research, data, and community goals. Zip codes that met at least three criterions were prioritized. 117 zip codes were not prioritized.

The 5 factors:

1. Highest Rate of Poverty:

- a. Zip codes below per capita income average (\$32,751) in Sacramento County.
- 2. Zip codes in which Black Child Legacy Campaign was involved:
  - b. Zip codes with the highest number of African American child deaths in Sacramento County.
- 3. 2-1-1 Call Volume:
  - a. Zip codes with the highest 2-1-1 call volume from (November 2021-April 2022).
- 4. Healthy Place Index:
  - a. Zip codes with less healthy community conditions than over 70% of other California zip codes
  - b. Based on access to healthcare, housing, education, clean air and water, life expectancy, pollution, etc.
  - c. Based off data collected in 2021
- 5. Food Insecurity Index

a. Zip codes that experience the highest rates of food insecurity within Sacramento County.

b. Measures of food-related stress such as CalFresh and SNAP enrollment. Index values above 80 out of 100. Above 30% of the national average.

c. Based off data collected in 2021

| Zip   | Highest Rate of | Black Child | 2-1-1 Call | Healthy Place | Food       | Total       |
|-------|-----------------|-------------|------------|---------------|------------|-------------|
| codes | Poverty         | Legacy      | Volume     | Index         | Insecurity | Factors Met |
| 95660 | yes             | yes         | yes        | yes           | yes        | 5           |
| 95815 | yes             | yes         | yes        | yes           | yes        | 5           |
| 95820 | yes             | yes         | yes        | yes           | yes        | 5           |
| 95823 | yes             | yes         | yes        | yes           | yes        | 5           |
| 95828 | yes             | yes         | yes        | yes           | yes        | 5           |
| 95838 | yes             | yes         | yes        | yes           | yes        | 5           |
| 95842 | yes             | yes         | yes        | yes           | yes        | 5           |
| 95824 | yes             | yes         | Х          | yes           | yes        | 4           |
| 95832 | yes             | yes         | Х          | yes           | yes        | 4           |
| 95825 | yes             | yes         | yes        | Х             | yes        | 4           |
| 95817 | yes             | yes         | yes        | Х             | Х          | 3           |
| 95821 | yes             | yes         | yes        | Х             | Х          | 3           |
| 95822 | yes             | yes         | yes        | Х             | Х          | 3           |
| 95841 | yes             | yes         | Х          | Х             | yes        | 3           |

Table 1: Prioritized Zip Codes based on selected Criteria

The final version of the Permanent Housing Assessment for Families can be found here:

#### Permanent Housing Assessment for Families

CES staff and the CES Committee will evaluate the assessment tool and prioritization schema results over the next several months and report back to the CoC Board in September or October of 2022.

#### **Requested Action**

Approve the use of the Permanent Housing Assessment for Families and prioritization schema as recommended by the Coordinated Entry System Committee and SSF staff for use with the new classification of permanent housing units.



Ending Homelessness. Starting Fresh.

| TO:   | CoC Board Members  |
|-------|--|
| FROM: | Ya-yin Isle, SSF Chief Strategic Initiatives Officer<br>Michele Watts, SSF, Chief Planning Officer   |
| DATE: | June 3, 2022   |
| RE:   | Sacramento Local Homeless Action Plan and Homeless<br>Housing, Assistance and Prevention Program Round 3 (HHAP-<br>3) CoC Funding Allocation Approval and Public Comment |

## Background

The Homeless Housing, Assistance and Prevention Program Round 3 (HHAP-3) is a \$1 billion block grant program authorized by AB 140, which was signed into law by Governor Gavin Newsom on July 19, 2021. Administered by the California Interagency Council on Homelessness (Cal ICH) this third round of funding has been made available to support building regional coordination and a unified response to reduce homelessness across California. As with the previous two rounds of HHAP funding, eligible applicants include California's 13 largest cities, 58 counties, and 44 Continuums of Care with allocations set by Cal ICH based on their proportionate share of the state's homeless population as reported by the HUD in the 2019 Point-In-Time (PIT) count. Different from previous rounds of funding, not all HHAP-3 funding is being allocated now; \$180 million is bonus funding which will be available to grantees who meet funding obligations and achieve outcome goal requirements.

The HHAP-3 Notice of Funding Availability was released on December 17, 2021, and the application is due June 30, 2022. State awards are anticipated to be made within 90 days of a completed application, with funding released upon completion of a standard contract with Cal ICH.

HHAP-3 requires grantees to expend funds on evidence-based solutions that prevent, reduce and end homelessness. Grantees may not use HHAP grant funding to supplant existing local funds for homeless housing, assistance, or prevention, and funds must be expended in compliance with Housing First requirements per Health and Safety Code Section 50220.7(g). HHAP-3 funds must be expended on one or more of the following eligible uses:

- 1. Rapid rehousing, including rental subsidies and incentives to landlords, such as security deposits and holding fees.
- 2. Operating subsidies in new and existing affordable or supportive housing units, emergency shelters, and navigation centers. Operating subsidies may include operating reserves.
- 3. Street outreach to assist persons experiencing homelessness to access permanent housing and services.
- 4. Services coordination, which may include access to workforce, education, and training programs, or other services needed to promote housing stability in supportive housing.
- 5. Systems support for activities necessary to create regional partnerships and maintain a homeless services and housing delivery system, particularly for vulnerable populations, including families and homeless youth.
- 6. Delivery of permanent housing and innovative housing solutions, such as hotel and motel conversions.
- 7. Prevention and shelter diversion to permanent housing, including rental subsidies.
- 8. Interim sheltering, limited to newly developed clinically enhanced congregate shelters, new or existing non-congregate shelters, and operations of existing navigation centers and shelters based on demonstrated need. Any new interim sheltering funded by round 3 funds must be low barrier, comply with Housing First, and prioritize interventions other than congregate shelters.
- 9. Improvements to existing emergency shelters to lower barriers and increase privacy.

# **Local Homeless Action Plan**

The Sacramento Local Homeless Action Plan (LHAP) was initiated in early 2022 to 1) meet the requirement of the HHAP-3 application, but more importantly 2) to create a cross-jurisdictional unified approach to addressing homelessness across Sacramento County. This three-year plan beginning on July 1, 2022 through June 30, 2025 was developed in partnership with SSF, Sacramento City and County Continuum of Care, Sacramento County, City of Sacramento and the Sacramento Housing and Redevelopment Agency.

The LHAP (Attachment 1) is actionable, relatable, and provides a roadmap for future funding. Outlined in the plan are key system components that are in alignment with national best-practices and if resourced and implemented consistently across funders and providers, will bring the local response system to scale with capacity to move the needle on homelessness. Through these efforts, homelessness in the County over time will become preventable whenever possible, brief, and non-recurring.

The plan is organized around five core strategies that facilitate a systemfocused, equitable framework:

- Strategy #1: Build and scale a Countywide Coordinated Access System
- Strategy #2: Ensure current and new emergency shelter and interim housing is focused on rehousing
- Strategy #3: Increase permanent housing opportunities
- Strategy #4: Expand prevention and diversion resources
- Strategy #5: Invest in community capacity-building & training

These strategies were designed to be scaled up (or back) over time within the confines of local resources including funding, workforce availability, and stakeholder agreement. At present, they are presented as a framework that will require additional community conversations to identify supporting activities on an annual basis that will shape the implementation of these five strategies. The LHAP strategies and sub-strategies are based on the recent gaps analysis and needs assessment (Appendix A of the LHAP), The key takeaways from the gaps analysis are as follows:

- Investments in prevention, diversion, and permanent housing solutions (e.g., housing navigation, rapid rehousing, permanent supportive housing) will directly reduce the number of people experiencing homelessness, the time people spend homeless, and returns to homelessness. When funded, developed, and operated consistently, these responses can eliminate the need for additional emergency shelter capacity.
- Alternatively, without significant additional prevention and rehousing capacity ("business as usual"), more people will experience homelessness, requiring more emergency shelter and other costly crisis services.
- Near-term investment in additional shelter capacity is needed to ensure safety and access to rehousing assistance but should be flexible to allow for later repurposing/use for housing.
- Efforts are needed to *increase positive turn-over* (and openings) among current PSH units, *increase the overall number of PSH units* funded with homeless assistance and other resources, and *increase other community-based affordable housing and service solutions* to address gaps.
- The need for rehousing supports and affordable, supportive housing options cannot be met by the homeless crisis response system alone. Cross-sector collaborations to develop sustainable housing and service supports for people with needs beyond housing are needed, such as for people with severe and persistent disabling conditions, returning citizens (following incarceration), and for older adults.

Implementation of this plan is supported by guiding principles and includes a commitment to racial equity; inclusion of partners with lived expertise; improved data collection; a person-centered, trauma-informed county-wide response system which provides access to immediate and on-going supportive service needs (i.e. mental health, substance use, housing retention); and continuation of collaborative planning and decision-making across jurisdictions. Once adopted by local governing bodies, the plan's partners will continue to work with the community to develop an annual slate of activities that offer strong action steps toward the advancement of the strategies and sub-strategies and quantify the First Steps milestones. The LHAP will be measured through consistent review of system level performance goals and implementation of action steps.

# HHAP-3 Application Tables

As part of the HHAP-3 application requirements, Cal ICH has provided an application template table (Attachment 2) required to be agendized at the local governing board meetings and available for public comment as stated in Health and Safety Code Section 50220.7(b)(2). The required sections include:

**Table 1:** A local landscape analysis that assesses the current number ofpeople experiencing homelessness and existing programs and fundingwhich address homelessness. The figures provided are annualized.

**Table 2:** Identification of the number of individuals and families served, including demographic information and intervention types provided, and demographic subpopulations that are underserved relative to their proportion of individuals experiencing homelessness. The numbers provided in this table are annualized and an estimate of the need for each intervention and population group.

**Table 3:** Identification of funds providing housing and homelessness-related services to persons experiencing homelessness, how this fundingserves subpopulations, and types of interventions funded.

**Table 4:** Outcome goals for system performance measures based on 2020 baseline data provided by Cal ICH. Reviewed at the May 11, 2022 CoC Board meeting, these goals were set to be achievable given the current baseline in several of the performance measures as the ability to receive bonus funding will be based on whether the outcome goals in this table are met. Table 4 also includes trackable data goals as they apply to underserved populations and populations disproportionately impacted by homelessness.

**Table 5:** Actionable strategies to be implemented to meet the Outcome

 Goals identified in Table 4. These strategies are based on the Sacramento

Local Homeless Action Plan and indicate all the outcome goals for which the strategy will help drive progress.

These tables must be approved as part of the HHAP-3 application. However, members should note that the CoC is relying on more up-to-date and accurate data for local planning purposes.

#### **CoC HHAP-3 Funding Recommendation**

Collectively, the Sacramento region will be receiving a total of approximately \$32.76 million in HHAP-3, with allocations to the City of Sacramento, Sacramento County, and the Sacramento Continuum of Care (via SSF).

Building upon the direction provided with HHAP-1 and HHAP-2 funding allocations, recent CoC Board discussions, and the gaps analysis and Sacramento Local Homeless Action Plan, SSF staff presents these HHAP-3 funding allocation recommendations:

| CoC HHAP Total Allocation                       | \$8,323,101.56 |
|---|----------------|
| Administration 7% max                           | \$582,591.40   |
| Programs/Projects Fund Total                    | \$6,348,200.00 |
| Coordinated Access System                       | \$4,698,200.00 |
| Outreach  | \$800,000      |
| System Support                                  | \$600,000      |
| Diversion – Problem Solving                     | \$3,298,200    |
| HMIS and Data Analytics                         | \$1,000,000.00 |
| Racial Equity and Partners with Lived Expertise | \$450,000.00   |
| Strategic Planning and Plan Implementation      | \$200,000.00   |
| Youth Programs/Projects Fund Total              | \$1,392,310.16 |
| Youth Sheltering                                | \$832,310.16   |
| Coordinated Access System                       | \$560,000.00   |
| TAY Service Coordination                        | \$150,000      |
| TAY Delivery of PH                              | \$150,000      |
| TAY Problem Solving Fund                        | \$260,000      |

# **Coordinated Access**

- SSF staff, subcontracts for direct services, problem-solving funds
- \$4,698,200
- HHAP-3 Eligible Funding Categories:
  - o Outreach- subcontract(s) \$800,000
  - o Systems Support- SSF staff \$600,000
  - o Diversion- Problem Solving \$3,298,200

The CoC HHAP-3 allocation recommendations to contribute support to the system-level Coordinated Access proposal above are only part of the funding plan, which also includes commitments from the City and County of Sacramento, as well as potential commitments from the cities of Citrus Heights, Elk Grove, Folsom, and Rancho Cordova. The Coordinated Access proposal was developed in response to system issues identified in the coordinated entry evaluation and two gaps analyses and aligns with established CoC priorities around access.

# **HMIS & Data Analytics**

- SSF staff and HMIS licenses
- \$1,000,000
- HHAP-3 Eligible Funding Category Systems Support

This investment will provide additional stability for SSF HMIS & Data Analytics staffing and help to cover the increasing HMIS licensing costs associated with the growth in system users that is essential to better coverage and improved data quality. The growth in users and the staff necessary to successfully support them go hand-in-hand. With the increased investment in outreach across the system, and the Cal-AIM investments, a \$1M allocation of CoC HHAP-3 funds is appropriate and aligns with the CoC's goals around HMIS coverage and data quality and use of data to inform system improvements.

# **Racial Equity & Partners with Lived Expertise**

- SSF staff
- \$450,000
- HHAP-3 Eligible Funding Category Systems Support

In support of the August 2021 CoC Racial Equity Action Plan, SSF hired a Racial Equity Specialist and a Partners with Lived Expertise Coordinator. These positions support the CoC's racial equity and lived experience engagement work essential to implementation of the action plan.

# **Strategic Planning & Plan Implementation**

- Consultants and SSF staff
- \$200,000
- HHAP-3 Eligible Funding Category Systems Support

The Sacramento CoC has invested in multiple reports and analyses to inform system-level improvements, including gaps analyses, evaluation of coordinated entry, the Racial Equity Action Plan, and the Local Homelessness Action Plan being finalized now. The funding recommended will help support the CoC's future strategic planning work, including Local Homelessness Action Plan implementation activities.

# Youth Projects/Programs

- Youth Sheltering (continuation of existing projects)
- \$832,310.16
- HHAP-3 Eligible Funding Category- Operating Subsidies
- Coordinated Access
- \$560,000
- HHAP-3 Eligible Funding Categories:
  - o System Support- TAY Service Coordination \$150,00
  - o System Support- TAY Delivery of PH \$150,000
  - o Diversion- TAY Problem Solving Fund \$260,000

HHAP-3 regulations set aside a minimum of 10% of funds for homeless youth populations, which are defined as unaccompanied youth who are between 12 and 24 years old and experiencing homelessness. The CoC requested recommendations for youth program funding from the Youth Homelessness Task Force (YHTF) and two recommendations are reflected in the allocation recommendations: The YHTF recommended the continuation of HHAP funding for currently funded projects, and increased funding to support new housing coordination and retention staff for existing prevention & intervention teams, plus client problem solving funding. CoC staff support these recommendations, with the new funding being implemented through TAY-designated resources within the system-level CAS initiative.

#### Recommendations

A. Provide Opportunity for Public Comment

Staff recommends the CoC Board take the following actions:

- B. Adopt the Sacramento Local Homeless Action Plan
- C. Approve the CoC HHAP-3 funding recommendations as outlined in this staff report
- D. Approve the submittal of the HHAP-3 application to Cal ICH by Sacramento Steps Forward on behalf of the CoC by the June 30, 2022 deadline

Attachments:

- 1. Sacramento Local Homeless Action Plan
- 2. HHAP-3 Application Tables 1-5
- 3. Youth Funding Recommendations document submitted by the Youth Homeless Task Force

# SACRAMENTO Local Homeless Action Plan

Developed in partnership with the City of Sacramento, Sacramento County, Sacramento Continuum of Care, and the Sacramento Housing and Redevelopment Agency

# **Strategies to Achieve Change**

The local homeless action plan is comprised of five core strategies that represent essential components to build an effective and coordinated homelessness response system with capacity to move the needle and make homelessness rare, brief, and non-recurring within the Sacramento community. Each strategy is supported by sub-strategies to provide additional strategic direction.



Ensure Emergency Shelter and Interim Housing is Focused on Rehousing Develop additional units (congregate and new

non-congregate) of flexible, emergency shelter and interim housing that focuses on permanent housing.

#### Increase Permanent Housing Opportunities

Expand housing opportunities and capacity dedicated to meet the rehousing needs of persons experiencing homelessness.



#### Expand Prevention and Diversion Programs

Prevent at-risk households from falling into homelessness and/or divert from entry into the homeless response system.

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3

# 5

#### Invest in Community Capacity-Building and Training

Attract and retain a robust and diverse workforce to deliver homelessness services across the response system.

#### One strategic plan outlining the countywide approach to ending homelessness in the Sacramento region that is:



#### Actionable

**Results Oriented** 

**Roadmap for Future Funding** 

Implementation of this plan is supported by guiding principles and includes a commitment to racial equity, inclusion of partners with lived expertise, improved data collection, a person-centered, trauma-informed county-wide response system, which provides access to immediate and on-going supportive service needs (i.e. mental health, substance use, housing retention), and continuation of collaborative planning and decision-making across jurisdictions.



# **First Steps**

Increase dedicated coordinated access navigators to support diversion and system access

Increase emergency shelter, interim, and transitional housing full-service beds dedicated to rehousing

#### Click here for the full plan: sacramentostepsforward.org

Increase housing exits for households through landlord engagement and increased coordinated rehousing resources Increase availability of housing problemsolving and diversion services for all people engaged with the Coordinated Access System

Develop and provide educational materials that explains how to access services and navigate the homeless crisis response system

# **Sacramento Local Homeless Action Plan**

Developed in partnership with: Sacramento Steps Forward Sacramento City and County Continuum of Care Sacramento County City of Sacramento Sacramento Housing and Redevelopment Agency

> Draft Version 6.0 May 27, 2022

#### TABLE OF CONTENT

- Land Acknowledgement
- Introduction
- Background
- Methodology
- National Best Practices for Optimal Homeless Response Systems
- **Guiding Principles**
- **Strategies and Activities**
- Conclusion
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- Appendix B Summary of Strategies, Sub-Strategies, and Activities
- Appendix C Glossary of Terms

#### LAND ACKNOWLEDGEMENT:

In our pursuit of addressing homelessness within the Sacramento region, we wish to acknowledge that Sacramento is the homeland of the Southern Maidu, Valley, and Plains Miwok, the Nisenan people, the Patwin Wintun people, and members of the Wilton Rancheria Tribes, who have inhabited this landscape since time immemorial.

We extend our gratitude to the ancestors of all California Native American Tribes and their descendants, as we recognize that wherever we are joining from in our virtual community, we are all on California Native American land.

We recognize the systemic inequities created by the negative impacts of colonization, past and present. We stand committed to dismantle ongoing legacies of oppression that have dispossessed California Native Americans of their lands and denied their rights to self-determination.

Written by the Wilton Rancheria Tribe

#### INTRODUCTION:

This local homeless action plan creates a cross-jurisdictional unified approach to addressing homelessness across Sacramento County. This is a three-year plan beginning on July 1, 2022 through June 30, 2025. It is actionable, relatable, and provides a roadmap for future funding. Outlined in the plan are key system components that are in alignment with national best-practices and if resourced and implemented consistently across funders and providers, will bring the local response system to scale with capacity to move the needle on homelessness. Through these efforts, homelessness in the County over time will become preventable whenever possible, brief, and non-recurring.

Specifically, this plan envisions making a collective impact in the following performance measures:

- Reducing the number of people experiencing homelessness.
- Reducing the number of people who become homeless for the first time.
- Increasing the number of people exiting homelessness into permanent housing.
- Reducing the length of time persons remain homeless.
- Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.
- Increase successful placements from street outreach.

The plan is organized around five core strategies that facilitate a system-focused, equitable framework:

- Strategy #1: Build and scale a Countywide Coordinated Access System
- Strategy #2: Ensure current and new emergency shelter and interim housing is focused on rehousing
- Strategy #3: Increase permanent housing opportunities
- Strategy #4: Expand prevention and diversion resources
- Strategy #5: Invest in community capacity-building & training

These strategies were designed to be scaled up (or back) over time within the confines of local resources including funding, workforce availability, and stakeholder agreement. At present, they are presented as a framework that will require additional community conversations to identify supporting activities on an annual basis that will shape the implementation of these five strategies.

Implementation of the plan is supported by guiding principles identified by the broader community and includes a commitment to racial equity, inclusion of partners with lived expertise, improved data collection, and continuation of collaborative planning and decision-making across jurisdictions.

Initial seed funding to begin implementation of the plan include state allocations from the Homeless Housing, Assistance and Prevention (HHAP) program, a recognition of emerging opportunities with CalAIM, leveraged with federal, county, city, and private funding sources.

This plan was developed in partnership between Sacramento City and County Continuum of Care, the City of Sacramento, the County of Sacramento and Sacramento Housing and Redevelopment Agency (SHRA). These entities, and in close collaboration with the neighboring cities will be the primary stewards of this plan.

# BACKGROUND:

A recently completed gaps analysis indicates that the estimated number of persons experiencing homelessness <u>annually</u> in Sacramento County ranges from 16,500 to 20,000 people. Falling into homelessness is often described by partners with lived expertise as a downward spiral of broken safety nets. In Sacramento, rising rents and limited affordable housing options is a leading driver into homelessness. This dynamic may have been exacerbated during the Coronavirus Pandemic due to loss of employment and/or COVID related health conditions. Other drivers include histories of foster care and domestic/intimate partner violence.

By most observations, unsheltered homelessness continues to increase. At the time of this writing, it is anticipated that the 2022 Point-in-Time Count data (available later in June 2022) will likely show an increase from 2019. This trend reflects communities statewide who are also grappling with post-pandemic increases in the number of households experiencing homelessness. Solutions to addressing homelessness, however, are locally driven.

# 2022 Needs Assessment and Gaps Analysis

Among people who experience literal homelessness annually, it is estimated that<sup>1</sup>:

- One out of four people (~23%) are adults and children in family households.
- Almost half of all people (~45%) are unsheltered (1 or more days) and do not *or* cannot access shelter.

<sup>&</sup>lt;sup>1</sup> 2022 Needs Assessment and Gaps Analysis report

- Two out of three (~ 66%) access homeless assistance (outreach, shelter, rehousing, etc.) but the remainder do not due to insufficient capacity, access, quality of services, or other issues.
- Black and African American people are significantly overrepresented among people who experience homelessness: 39% of all people experiencing homelessness compared with 11% overall in Sacramento County<sup>2</sup>.
- Just over half of all adults (~54%) report having one or more severe and persistent disabling condition.
  - One out of five adults (~22%) report having a severe mental illness.
  - One out of ten adults (~11%) report having a substance use disorder.
  - One out of four adults (~24%) adults are chronically homeless (disabled and homeless for 12 months or more), most are adult only households.

The gaps analysis approach involved the following:

- 1. Estimating the *annual* number of people who experience literal homelessness in Sacramento County.
- 2. Estimating the annual service needs of those who experience literal homelessness based on an optimal range and availability of services that result in homelessness being prevented or quickly and successfully ended.
- Examination of current and planned (i.e., funded and under-development) capacity expected to be available currently and in the next three years in Sacramento County to address service needs.
- 4. Estimating the service gaps remaining after accounting for current and planned capacity. Additional work is ongoing to better understand and quantify the service needs of people who experience literal homelessness, including physical and behavioral health needs.

The gaps analysis estimates that among people who experience homelessness each year in Sacramento, approximately 15% of individual and family households experience only a brief episode of homelessness and are able to self-resolve and return to housing with limited assistance, if any. An additional approximately 38% *could* avoid homelessness with timely and targeted homelessness prevention assistance or could otherwise be diverted from the homeless response system with one-time or short-term problem-solving, financial assistance and/or housing navigation services.

Among the 47% who cannot avoid or quickly exit homelessness, it is estimated that 65% of all households will need individualized short- to medium term housing navigation and financial assistance, while 33% will need ongoing rental assistance and supportive

<sup>&</sup>lt;sup>2</sup> American Community Survey, Sacramento County Population Estimates, July 2021 (V2021)

services to quickly resolve their homelessness and remain stably housed. Overall, over 90% of all households experiencing literal homelessness *also* need temporary housing (emergency shelter or interim/transitional housing) while they are working to resolve their homelessness.

This data reveals a need for increased investments in and expanded access to prevention, rehousing assistance, and affordable housing, including permanent supportive housing and other forms of ongoing housing and service assistance outside of the homeless response system. When fully scaled and available, such investments can effectively reduce homelessness and the need for more costly crisis responses, including emergency shelter.

In the near-term however, until prevention and rehousing resources are more fully scaled, more emergency shelter is needed to reduce harm experienced by people who are unsheltered and to provide a safe, stable, and temporary shelter to access rehousing assistance and address other critical health and wellness needs more readily.

The Sacramento Continuum of Care Needs Assessment and Gaps Analysis: Summary Findings can be found in **Appendix A** 

# Addressing Racial Disparities

Nationally and locally, race and ethnicity are additional risk factors of homelessness. Several national organizations such as the National Alliance to End Homelessness and the federal Housing and Urban Development (HUD) have developed toolkits to assist local continuum of cares to identify and mitigate racial disparities within their homelessness programs. Addressing racial disparities within the countywide homeless response system is a priority for all the sponsoring partners and further advances the County's *Resolution Declaring Racism a Public Health Crisis*<sup>3</sup> and the City's *Race & Gender Equity Action Plan 2020-2025*<sup>4</sup>.

In Sacramento, the CoC formed a Racial Equity Committee in 2020 after reviewing the local data that revealed persons identifying as Black and American Indian/Alaskan Native communities experience homelessness at disproportionate rates.

While persons identifying as Black only represent 11% of the population in our CoC's geographic area, they represent approximately 39% of individuals who are experiencing homelessness and approximately 39% of families with children experiencing homelessness have a Black head of household<sup>5</sup>. Additionally, local data reflecting

<sup>&</sup>lt;sup>3</sup> https://www.saccounty.gov/news/Documents/RES\_-\_Racism\_Public\_Health\_Crisis.doc.pdf

<sup>&</sup>lt;sup>4</sup> https://www.cityofsacramento.org/-/media/Corporate/Files/CMO/RGEAP-20202025-Overview-

v710012020.pdf?la=en#:~:text=Racial%20Equity%20Statement8%20%E2%80%93%20The,service%20all%20our%2 0diverse%20communities.

<sup>&</sup>lt;sup>5</sup> HUD' CoC Racial Equity Analysis Tool and Gaps Analysis CA-503 Sacramento City and County CoC: https://www.hudexchange.info/resource/5787/coc-analysis-tool-race-and-ethnicity/

persons identifying as American Indian/Alaskan Native are not accessing homeless services in proportion to the number of people believed to be experiencing homelessness from that community.

The Racial Equity Committee conducted a community analysis including quantitative and qualitative date that identified contributing factors that highlighted a wide range of disparities that culminated into an action plan titled, *The Findings & Recommendations from the CoC Racial Equity Committee*<sup>6</sup>. Key report findings included: disparities in access to homeless services, undercounting and poor data collection within historically under-resourced communities, negative impacts of racial biases across the system including the assessment and prioritization processes for the allocation of resources, implementation of a trauma-informed and racial equity approach to engage landlords to reduce historical discriminatory tenant leasing practices, and a lack of racial/ethnic, and lived expertise participation across all levels of the homelessness workforce.

The Racial Equity Action Plan also identified a number of initial steps to begin redressing systemic harm. These include increasing access points in historically under-resourced communities; diversifying language and literacy levels on key documents to improve participants' understanding and consent for services; increase hiring of diverse staff including partners with lived expertise across all organizational levels within the homeless response system; engaging in practices of restorative justice; and replacing the current common assessment tool with a culturally responsive design. These recommendations may become activities under one or more strategies within the plan.

# Cross-Jurisdictional Coordination under the Coronavirus Pandemic

During the Coronavirus pandemic, the County, Sacramento Steps Forward on behalf of the Continuum of Care (CoC), City of Sacramento, neighboring cities, and Sacramento Housing and Redevelopment Agency (SHRA) came together in unprecedented coordination to provide safe sheltering to Sacramento's most vulnerable experiencing homelessness<sup>7</sup>. These leaders leveraged an infusion of state and federal relief dollars to operate 522 units of temporary sheltering that served nearly 2,000 people through Project Roomkey; reduced evictions for over 12,000 people from falling into homelessness through the Sacramento Emergency Rental Assistance program; and deployed an additional 30+ regional outreach workers. The plan sustains this demonstration of cross-jurisdictional planning, decision-making, and action.

<sup>&</sup>lt;sup>6</sup> https://sacramentostepsforward.org/wp-content/uploads/2021/08/10\_SSF-Racial-Equity-Action-Plan-12-copy.pdf

<sup>&</sup>lt;sup>7</sup> Persons aged 65 and older and/or with a chronic health condition.

# **METHODOLOGY:**

The development of this plan leveraged existing efforts to address homelessness and included the following process:

- Reviewed current City, County, and CoC plans including:
  - City of Sacramento Comprehensive Siting Plan (2021)
  - County of Sacramento Homeless Plan (2018)
  - County Programs exclusively Serving Homeless Population (May 2021, February 2022)
  - Sacramento CoC Action Plan: Findings & Recommendations from the CoC Racial Equity Committee (2021)
  - Sacramento CoC Gaps Analysis (2021)
- Synthesized key points and created an inventory of all current and planned programs and activities.
- Designed a recommended theory of change in alignment with national bestpractices to meet required state and national system performance outcomes by clustering activities into five key strategies.
- Held an in-person visioning session with strategic partners to further refine the theory of change model.
- Sought input from select CoC Committees and the larger community during the Annual CoC public meeting held on April 21, 2022.

Concurrent to these steps, the Continuum of Care also commissioned the 2022 Needs Assessment and Gaps Analysis referenced above. Emerging data from this effort has been integrated into this plan. See **Appendix A** for a summary of the 2022 Needs Assessment and Gaps Analysis.

# NATIONAL BEST PRACTICES FOR OPTIMAL HOMELESS RESPONSE SYSTEMS:

Communities across the country are implementing national best practices identified by leading entities such as the U.S. Interagency Council on Homelessness and the National Alliance to End Homelessness to optimize their homeless response systems. Key elements supported by evidence-based research include the following components:

- Coordinated Access System (CAS)
- Prevention, diversion, and problem-solving resources
- Crisis Response focused on rehousing participants
- Permanent housing opportunities dedicated to persons exiting homelessness
- A robust, diverse workforce reflective of participants experiencing homelessness and inclusive of partners with lived expertise
- Quality HMIS data with participation and coverage of all homelessness programs
- Collaborative & coordinated cross-jurisdictional planning and implementation process

These system elements were considered in the development of the proposed countywide strategies and activities outlined in the plan.

# **GUIDING PRINCIPLES:**

Stakeholders identified several qualitative principles in addition to the quantitative measures to apply across all proposed strategies in support of a shared vision for a more collaborative, accessible, equitable, and transparent homeless response system.

These principles include:

- Strive to make homelessness in Sacramento rare, brief, and non-recurring
- Implement a person-centered, trauma-informed countywide response system, which provides access to immediate and on-going supportive service needs (i.e., mental health, substance use, housing retention)
- Promote housing-first policies and practices
- Address racial disparities across programs and system outcomes
- Create partnerships that value the experience, voice, and contribution of Partners with Lived Expertise
- Collect quality data and use to inform decisions on program prioritization and resource allocation

• Facilitate collaborative planning & decision-making across jurisdictions

# STRATEGIES:

The local homeless action plan is arranged into five core strategies that represent essential components to build an effective and coordinated homelessness response system with capacity to move the needle and make homelessness rare, brief, and nonrecurring within the Sacramento community. Each strategy is supported by substrategies to provide additional strategic direction.

Strategies can be thought of as strategic initiatives or focus points to guide investments by local decision-makers in the deployment of resources including funding, workforce, capital investments, and cross-jurisdictional planning. The five strategies presented in this plan are offered as foundational steps and create a transitional roadmap towards the development of an optimal Countywide response system that can be scaled up over time, while creating measurable impact during these first three years of implementation.

The sub-strategies support the strategies and are designed to evolve each year with increased understanding of local needs through processes of continual feedback, system refinement, and improved data-collection. First Steps are presented as a year one guidepost to track progress. As data is collected during the first-year numerical targets may be added to the First Steps to measure progress over years 2 and 3 of the plan. The partners will continue to work with the community to identify annual activities that will advance these strategies.

These core strategies and sub strategies listed below align with national best practices to address homelessness, integrate in the guiding principles, and provide a critical path toward making a collective impact in addressing homelessness.

- Strategy #1: Build and scale a Countywide Coordinated Access System
  - Sub-strategy 1.a: Increase targeted participation in homeless crisis response services.
  - Sub-strategy 1.b: Grow and embed problem-solving/diversion in all system access sites, safe grounds, respite centers and emergency shelters.
  - Sub Strategy 1.c: Provide comprehensive and aligned outreach Countywide.

# • Strategy #2: Ensure current and new emergency shelter and interim housing is focused on rehousing

 Sub Strategy 2.a: Align the Cities' and County's current and emerging shelter and interim housing programs with the Coordinated Access System to increase access and occupancy of available units. • Sub Strategy 2.b: Increase permanent housing exits across all emergency shelter & interim housing programs.

### • Strategy #3: Increase permanent housing opportunities

- Sub Strategy 3.a: Increase rehousing assistance and improve access to existing and new units in market and subsidized programs.
- Sub Strategy 3.b: Increase the stock of permanent supportive housing units and other dedicated affordable housing units for people experiencing homelessness.
- Sub Strategy 3.c: Develop a regional landlord engagement partnership program to increase the number of participating landlords across all homelessness rehousing programs.

#### • Strategy #4: Expand prevention and diversion resources

- Sub Strategy 4.a: Coordinate and leverage prevention resources across jurisdictions to connect households at imminent risk of homelessness to stabilization resources to avoid literal homelessness.
- Sub Strategy 4.b: Scale existing prevention and diversion programs into a countywide rehousing program.
- Strategy #5: Invest in community capacity-building & training
  - Sub Strategy 5.a: Create an inclusive & supportive working environment to retain the current workforce and attract new staff from historically underresourced communities and partners with lived expertise.
  - Sub Strategy 5.b: Increase community stakeholder support for countywide homelessness activities through increased engagement.

A matrix of all strategies and sub-strategies can be found in **Appendix B**.

# Strategy #1: Build and scale a Countywide Coordinated Access System (CAS)

Sub-strategy 1.a: Increase targeted participation in homeless crisis response services

**Sub-strategy 1.b:** Grow and embed problem-solving/diversion in all system access sites, safe grounds, respite centers and emergency shelters

# Sub Strategy 1.c: Provide comprehensive and aligned outreach Countywide

Currently, a person seeking homeless services in Sacramento County must potentially navigate over 100 "front-doors" to find the right assistance to meet his/her/their need. There is not one single access point at this time that can connect a person experiencing homelessness to the right shelter and/or housing resource and there is not sufficient capacity that results in a positive exit from homelessness even if the person could find the right door. Instead, programs are siloed, and services are limited to the offerings of a particular service provider without a systemwide mechanism for uniform assessment and to make referrals to or directly provide crisis services, including temporary housing, and rehousing assistance based on identified client needs. Additional barriers to services include limited or no access points in key under-resourced communities and mono-lingual materials on homelessness services that are not inclusive of all the key languages reflective of the diverse demographics of people experiencing homelessness.

A countywide coordinated access system is a mechanism and national best practice that will centralize access to and improve the efficacy of homeless and rehousing services across a variety of geographically and virtual access points and within all existing and future shelter sites. When fully implemented, it will: increase access to immediate housing crisis screening, problem-solving, and navigational support through expansion of 211 and partnerships with trusted cultural community partners; allow for more streamlined and standardized assessment, prioritization, triage and intake processes across all available forms of rehousing assistance currently and as new rehousing capacity is added; and improve accuracy and timeliness in matching the right person to the right resourced pathway for successful rehousing.

# First Steps:

- Increase dedicated coordinated access navigators to support diversion and system access
- Increase dedicated 211 coordinated access staff

# Strategy #2: Ensure current and new emergency shelter and interim housing is focused on rehousing

**Sub Strategy 2.a**: Align the Cities' and County's current and emerging shelter and interim housing programs with the Coordinated Access System to increase access and occupancy of available units.

**Sub Strategy 2.b:** Increase permanent housing exits across all emergency shelter & interim housing programs.

According to the 2019 Point-in-Time Count, approximately 70% of people experiencing homelessness within the County are unsheltered, residing in places not meant for human habitation such as vehicles and street encampments, increasing visibility and raising concern over the health and safety of all. Unsheltered homelessness was exacerbated by the Coronavirus pandemic when traditional safety-nets closed or transferred services to online platforms, leaving many under-resourced homeless communities without access to basic needs.

Local jurisdictions have responded with investments in temporary sheltering initiatives including safe grounds and safe parking programs, Respite Centers, increased use of motel vouchers, and plans to open and/or expand emergency shelters and navigation centers. An estimated 2,200 to 2,700 total emergency shelter and transitional housing beds for individuals and 300 to 350 units for families will be needed once the system has fully developed prevention, diversion, and various forms of rehousing assistance. This is roughly equal to the amount of shelter and transitional housing currently available in Sacramento County. In the near-term, current shelter and transitional housing capacity is only available for approximately one out of four individuals and families in need. Investments are needed in the short-term to meet local crisis response needs for shelter and other forms of temporary housing, while investments to increase prevention and permanent housing options are secured that will reduce this need.

This strategy highlights the need to identify additional resources required to ensure that current and new emergency shelter options have access to and/or provide pathways to rehousing opportunities for all clients. It also outlines a plan to develop additional units (congregate and non-congregate) of flexible, emergency shelter and interim housing in the near-term that can later be repurposed into permanent housing options as the demand for shelter falls when new permanent housing options come online.

#### First Steps:

- Increase emergency shelter, interim, and transitional housing full-service beds dedicated to rehousing
- Increase dedicated housing navigators in contracted shelters

# Strategy #3: Increase permanent housing opportunities

**Sub Strategy 3.a:** Increase rehousing assistance and improve access to existing and new units in market and subsidized programs.

**Sub Strategy 3.b**: Increase the stock of permanent supportive housing units and other dedicated affordable housing units for people experiencing homelessness.

**Sub Strategy 3.c**: Develop a regional landlord engagement partnership program to increase the number of participating landlords across all homelessness rehousing programs

Access to affordable housing is a central reason why many people fall into homelessness in the Sacramento region. The homeless response system cannot solve the County's affordable housing crisis on its own; however, it can leverage homelessness funding to expand rehousing opportunities dedicated to this population. Housing opportunities include ongoing rental assistance, permanent supportive housing, time-limited rehousing services and rental assistance (including individualized housing navigation) and other forms of affordable permanent housing dedicated or prioritized for people experiencing homelessness.

According to the Gaps Analysis, the County's homeless response system optimally needs 2,800 to 3,400 short/medium term rehousing service slots for individuals and 250 to 320 service slots for families, leaving a current gap of 600-750 total rehousing service slots. Additionally, approximately 5,900 to 7,100 total units of permanent supportive housing (PSH) are needed for individuals and families with at least one severely and persistently disable household member, particularly for people who are disabled and experience chronic homelessness. This capacity would address PSH needs among households who are currently chronically homeless, as well as those who become chronic homeless each year. After accounting for current and planned PSH capacity coming online in the next three years, it is estimated that an additional 2,700 to 3,300 PSH units are needed.

For other disabled individuals and families with a disabled adult or child, approximately 1,600 to 2,000 annual placements in permanent housing that is subsidized and provides access to supportive services (e.g., assisted living, service-enriched housing, skilled nursing facility) are needed beyond what individuals and families are currently able to access.

Housing discrimination remains a barrier to housing for many persons identifying with historically under-resourced communities. Landlord engagement programs coming online under this initiative will implement a trauma-informed and racial equity lens in working with participating landlords.

#### First Steps:

• Increase housing exits for households connected to outreach, shelter, and other

crisis response programs through a landlord engagement & rehousing initiative

# Strategy #4: Expand prevention and diversion resources

**Sub Strategy 4.a**: Coordinate and leverage prevention resources across jurisdictions to connect households at imminent risk of literal homelessness to stabilization resources to avoid literal homelessness.

**Sub Strategy 4.b**: Sub Strategy 4.b: Scale existing prevention and diversion programs into a countywide rehousing program.

Investment in the expansion of prevention and diversion resources presents the greatest opportunity to reduce inflow into homelessness and minimize cost in crisis services, including the unnecessary trauma caused by loss of housing. It is estimated that there are approximately 3,200 individuals and 350 families that could be prevented from becoming homeless if the homeless response system had at least 29 FTEs and at least \$7.5M annually in financial assistance for prevention and diversion resources. These resources will need to grow over time and coordinated with other system components for maximum effectiveness.

As funding for the expansion of prevention and diversion resources is sought, this strategy seeks action steps that can prevent at-risk households from falling into homelessness and/or divert from entry into the homeless response system.

#### First Steps:

• Increase availability of housing problem-solving and diversion services for all people engaged with the Coordinated Access System.

#### Strategy #5: Invest in community capacity-building & training

**Sub Strategy 5.a:** Create an inclusive & supportive working environment to retain the current workforce and attract new staff from historically under-resourced communities and partners with lived expertise.

# **Sub Strategy 5.b:** Increase community stakeholder support for countywide homelessness activities through increased engagement.

Successful implementation of this plan relies on the local homelessness workforce and support from the broader community. During the Coronavirus pandemic, homeless response system staff at all levels of leadership and stature demonstrated incredible resilience on the frontlines with an all-hands-on-deck approach to ensure necessary services for the community's most vulnerable residents. Sacramento residents were

also gracious in support of new crisis models such as Project RoomKey and expansion of safe parking and safe ground initiatives. Despite the tremendous show of commitment from the homeless provider community during COVID, higher turnover rates and difficulty filling vacancies has become commonplace. As the community seeks to adapt to its new post-pandemic normal, there is a concern that the response system will continue to lose workers through the burnout, competition with higher-paying industries, and compassion fatigue.

This strategy seeks to reinvigorate the workforce and workplace culture to retain and advance current staff while leveraging position vacancies to attract an increasingly diverse workforce more reflective of participants being served from historically underresourced communities, including partners with lived experience. Embracing workforce strategies that support employees from under-resourced communities improves the workplace culture for all staff. This strategy also seeks to engage trusted community organizations who may not provide direct homeless services but would make great partners to increase awareness and access to this expansion of homelessness services. Finally, this strategy seeks to work with homeless service providers, faith-based, and grassroots organizations to develop community education strategies and volunteer opportunities to engage the community at-large in the implementation of these solutions.

# First Steps:

- Implement workforce recruitment and retention activities to support all employees, targeting staff from under-resourced communities including partners with lived expertise.
- Develop a standard high-quality annual training agenda for homelessness services staff
- Develop and provide general educational materials that explains how to access services and navigate the homeless crisis response system.

# **CONCLUSION:**

The Sacramento community is at the crossroads of an incredible opportunity to harness existing homelessness efforts and bring them to scale to address this urgent crisis. Investment and implementation of the strategies and sub strategies outlined in this local homeless action plan will transform the status quo and generate visible and meaningful change to make homelessness in Sacramento rare, brief, and non-recurring.

This plan sets a unifying strategy for optimal homeless response and enhances current crisis response investments made by cities and the County. With current and additional funding opportunities on the horizon, this plan opens pathways to future funding by presenting an assessment of need and gaps that new dollars can fill. It demonstrates

the cost effectiveness in pivoting from investments in crisis-only-responses to additional investments in homeless prevention, diversion, and problem-solving services to make them accessible for all people at-risk and/or seeking emergency shelter. The plan also identifies additional rehousing opportunities that are needed to create a streamlined flow so that system-users can exit homelessness in an efficient and streamlined manner, hopefully matched to an appropriate rehousing resource to mitigate their return to homelessness.

Additional efficiencies that this plan may generate upon successful implementation include increased HMIS participation with improved data collection and analysis; expansion of shelter and rehousing programs participating with the coordinated access system; increased coordination among funders and providers for staff recruitment and provision of staff training initiatives; and collaborative cross-regional planning and decision-making.

Success of this plan requires real commitment to implementation; additional investments; collective action; transparent progress reports and impact measurements and engaged stakeholders. It will require expanding the circle to include increased participation by the local healthcare, philanthropic, and business sectors. It will also require the ongoing support of the local community including creating additional opportunities for volunteerism and education on homelessness programs and services.

The plan will be measured through consistent review of the system level performance goals and presentation of these in a public-facing dashboard to be managed by Sacramento Steps Forward.

Once adopted by local governing bodies, the plan's partners will continue to work with the community to develop an annual slate of activities that offer strong action steps toward the advancement of the strategies and sub-strategies and quantify the First Steps milestones.

All together we can make a collective impact on addressing homelessness in Sacramento.

# Appendix A

# Sacramento Continuum of Care Needs Assessment and Gaps Analysis: Summary Findings

The following are summary findings from a comprehensive gaps analysis conducted by Sacramento Steps Forward, in consultation with the Sacramento Continuum of Care, City of Sacramento, and Sacramento County. The gaps analysis approach involved the following:

- 1. Estimating the *annual* number of people who experience literal homelessness in Sacramento County.
- 2. Estimating the annual service needs of those who experience literal homelessness, including need for targeted prevention assistance, based on an optimal range and availability of services that result in literal homelessness being prevented or quickly and successfully ended.
- 3. Examination of current and planned (i.e., funded and under-development) capacity expected to be available currently and in the next three years in Sacramento County to address service needs.
- 4. Estimating the service gaps remaining after accounting for current and planned capacity.

A complete description of gaps analysis methods, assumptions, and results will be provided in a separate report, pending availability of 2022 point-in-time (PIT) count data and any resulting adjustments to the gaps analysis findings reflected below.

# Estimated Annual Number of People who Experience Literal Homelessness in Sacramento County:

# 16,500 to 20,000

It is estimated that between 16,500 and 20,000 people in any given year experience literal homelessness in Sacramento County.<sup>8</sup>

# **Key Characteristics**

Among people who experience literal homelessness annually, it is estimated that:

- One out of four people (~23%) are adults and children in family households.
- Almost half of all people (~45%) are unsheltered (1 or more days) and do not *or* cannot access shelter.
- Two out of three (~66%) access homeless assistance (outreach, shelter, re-housing, etc.), but the remainder do not due to insufficient capacity, access, quality of services, or other issues.
- Black and African American people are significantly over-represented among people who experience homelessness: 39% of all people experiencing homelessness compared with 11% overall in Sacramento County<sup>9</sup>.

<sup>&</sup>lt;sup>8</sup> The range is based on -5% and +15% of the specific estimate of 17,355 people annually. A range is used as the exact estimate is used only as a baseline for system modeling. The annual estimate was calculated using a combination of Homeless Management Information System (HMIS) data for calendar year 2021 and the 2019 Point-in-Time (PIT) count for the Sacramento CoC geographic area (Sacramento County).

<sup>&</sup>lt;sup>9</sup> American Community Survey, Sacramento County Population Estimates, July 2021 (V2021)

- Just over half of all adults (~54%) report having one or more severe and persistent disabling condition.
  - One out of five adults (~22%) report having a severe mental illness.
  - One out of ten adults (~11%) report having a substance use disorder.
  - One out of four adults (~24%) adults are chronically homeless (disabled and literally homeless for 12 months or more currently or over four episodes in three years); most are in adult only households.

#### **Estimated Annual Prevention and Homeless Assistance Needs**

The following service estimates are based on documented or otherwise assumed needs among those who experience literal homelessness annually. The estimates assume a much higher use of services than currently (91% vs 66%) due to greater availability of services, improved community-wide and equitable access, and adherence by providers to evidence-based practices. The gaps included in the table are estimates and assume that each type of service is generally available when needed and desired by qualifying populations.

| Assistance Type<br>(among those using the system)  | Individuals<br>(12,010)      | Family<br>Households<br>(1,184)                  | Estimated Total System Capacity<br>NEED   | Estimated Total System Capacity<br>GAP<br>(additional capacity needed)  |  |  |
|--|------------------------------|--|---|---|--|--|
| Targeted Homelessness Prevention (including one-time and short-term prevention assistance for highest risk)              | ~ 36%<br>(3,200 individuals) | ∼ 36%  |   | ~ 16 Full-Time Equivalent (FTE) staff @ 20<br>cases/FTE<br>≥ \$11.3M Annual Financial Assistance<br>(above current levels)  |  |  |
| Among those not prevented  |                              |  |   |   |  |  |
| <b>Diversion</b> (including housing problem-solving and diversion provided through Coordinated Access System)            | 100%<br>(6,500 individuals)  | pending implementation of new Coordinated Access |   | Pending further analysis of needed capacity.<br>There is little diversion assistance currently<br>available.  |  |  |
| Among those not diverted   |                              |  |   |   |  |  |
| Street Outreach (providing individualized engagement and<br>connection to shelter, rehousing assistance, other services) | ~ 55%<br>(4,700 individuals) | ~ 36%<br>(300 families)                          | ~ 21 FTEs @ 40 cases/FTE  | Pending further analysis of current and planned<br>capacity.  |  |  |
| <b>Temporary Housing</b> (emergency shelter, transitional housing, interim housing)                                      |                              |  |   | Near-term: pending further analysis of current<br>capacity<br>Future: -0- gap for families assuming fully developed<br>prevention, rehousing assistance. TBD singles<br>pending further analysis. |  |  |
| Short/Medium-Term Rehousing Assistance (including rapid rehousing, other individualized rehousing assistance)            | ~ 64%<br>(5,600 individuals) | ~ 66%<br>(500 families)                          | IND: 2,800 to 3,400 service slots (avg daily active<br>cases)<br>FAM: 250 to 320 service slots<br>~ 150 FTEs@ 22 cases/FTE<br>≥ \$18M Annual Financial Assistance | COMBINED: 600-750 service slots<br>~ 29 FTEs @ 22 cases/FTE<br>≥ \$3.6M Annual Financial Assistance   |  |  |
| Permanent Supportive Housing and other Dedicated<br>Permanent Housing Assistance with Ongoing Services                   | ~ 34%<br>(3,000 individuals) | ~ 17%<br>(120 families)                          | PSH Units COMBINED: 5,900 to 7,100 units<br>Other PH w/Services COMBINED: 1,600 to 2,000<br>annual placements   | PSH Units COMBINED: 2,700 to 3,300 units<br>Other PH w/Services COMBINED: 1,600 to 2,000<br>annual placements   |  |  |

# Key Takeaways

- ✓ Estimates will be adjusted as more current data is available (e.g., forthcoming 2022 PIT data).
- ✓ Investments in prevention, diversion, and permanent housing solutions (e.g., housing navigation, rapid rehousing, permanent supportive housing) will directly reduce the number of people experiencing homelessness, the time people spend homeless, and returns to homelessness. When funded, developed, and operated consistently, these responses can eliminate the need for additional emergency shelter capacity.
- ✓ Alternatively, without significant additional prevention and rehousing capacity ("business as usual"), more people will experience homelessness, requiring more emergency shelter and other costly crisis services.

- ✓ Near-term investment in additional shelter capacity is needed to ensure safety and access to rehousing assistance but should be flexible to allow for later repurposing/use for housing.
- ✓ Efforts are needed to increase positive turn-over (and openings) among current PSH units, increase the overall number of PSH units funded with homeless assistance and other resources, and increase other community-based affordable housing and service solutions to address gaps.
- ✓ The need for rehousing supports and affordable, supportive housing options cannot be met by the homeless crisis response system alone. Cross-sector collaborations to develop sustainable housing and service supports for people with needs beyond housing are needed, such as for people with severe and persistent disabling conditions, returning citizens (following incarceration), and for older adults.

# Factors Influencing Future Need

#### Population growth and demographic changes:

Although the Sacramento County general population growth is just under 1% on average per year over the past ten years, changes in demographic makeup (e.g., higher rate of growth among low- and very low-income households) of the County can directly affect the number of people experiencing homelessness and potentially needing prevention or shelter and rehousing assistance. The gaps analysis assumes no marked changes in population growth or characteristics will occur over the next five years.

# Availability of affordable housing and other forms of assisted/supportive housing in the community:

The severe lack of naturally occurring and subsidized affordable housing options directly impacts the number of households that are precariously housed and inherently at-risk of literal homelessness. The average rent in Sacramento County has increased 16.7% since 2019, increasingly pricing out lower-income households, while at the same time vacancy rates are declining, directly decreasing viable housing options for lower-income households, and increasing risk for housing insecurity and homelessness. According to the latest Out of Reach report from the National Low-Income Housing Coalition, a full-time worker would have to earn at least \$28.75 to afford a two-bedroom apartment at current fair market rental rates (\$1,495).<sup>10</sup> The gaps analysis assumes housing market conditions will not materially improve.

#### Landlord partnerships:

Landlord partners are essential the success of homeless crisis response system, both to support and prevent households who are facing eviction, as well as to increase access to housing options in the rental market that might otherwise not be available to people experiencing homelessness and systemic racism. Increased investment in landlord partnerships and the capacity to maintain and grow partnerships can indirectly and directly influence the success of prevention and rehousing efforts, particularly with owners and property managers willing to consider applicants with potential credit, rental history, or criminal justice system involvement. The gaps analysis assumes growing investment

<sup>&</sup>lt;sup>10</sup> Fair Market Rents are often not fully representative of typical rental costs and likely understate actual rental costs in many areas.

and partnerships will occur as part of the natural evolution of the homeless crisis response system, consistent with other communities around California and the U.S.

#### Fidelity to evidence-based and best practices:

There is a growing body of empirical research on program practices and interventions, and documented evidence-based practices that prevention and homeless assistance providers can adopt to improve service quality, equity, and outcomes. Adherence to practices such as Housing First, motivational interviewing, harm reduction, and positive youth development, are key to improving system performance while ensuring efficient and, when needed, targeted use of resources. The gaps analysis assumes local providers will continue to adopt and iterate evidence-based and best practices, while local public and private funders continue to further standardize such practices and requirements in program funding, monitoring, and compliance activities.

#### Funding availability and strategic allocation

Funding availability and strategic allocation for prevention and homeless services is a critical ingredient to developing a comprehensive, coordinated, and community-wide approach to preventing and ending homelessness. Coordinated approaches to determining local priorities, allocating resources, and monitoring investments for intended outcomes are hallmarks of high functioning, equitable, and effective homelessness prevention, and crisis response systems. The gaps analysis assumes that local entities – the City of Sacramento, Sacramento County, other Sacramento County municipalities, and the Continuum of Care – will continue to align funding priorities and allocation decisions toward achieving the regional plan, closing gaps, and achieving better outcomes for Sacramento residents.

#### Appendix B: Summary of Strategies and Sub-Strategies

Strategy #1: Build and scale a Countywide Coordinated Access System (CAS)

Sub-strategy 1.a: Increase targeted participation in homeless crisis response services

Sub-strategy 1.b: Grow and embed problem-solving/diversion in all system access sites, safe grounds, respite centers, and emergency shelters

Sub Strategy 1.c: Provide comprehensive and aligned regional outreach

Strategy #2: Ensure current and new emergency shelter and interim housing is focused on rehousing

Sub Strategy 2.a: Align the Cities' and County's current and emerging shelter and interim housing programs with the Coordinated Access System to increase regional access and occupancy of available units.

Sub Strategy 2.b: Increase permanent housing exits across all emergency shelter & interim housing programs.

Strategy #3: Increase permanent housing opportunities

Sub Strategy 3.a: Increase rehousing assistance and improve access to existing and new units in market and subsidized programs.

Sub Strategy 3.b: Increase the stock of permanent supportive housing units and other dedicated affordable housing units for people experiencing homelessness.

Sub Strategy 3.c: Develop a regional landlord engagement partnership program to increase the number of participating landlords across all homelessness rehousing programs.

Strategy #4: Expand prevention and diversion resources

Sub Strategy 4.a: Coordinate and leverage prevention resources across jurisdictions to connect households at imminent risk of literal homelessness to stabilization resources and avoid literal homelessness

Sub Strategy 4.b: Scale existing prevention and diversion programs into a countywide rehousing program.

Strategy #5: Invest in community capacity-building & training

Sub Strategy 5.a: Create an inclusive & supportive working environment to retain the current workforce and attract new staff from historically under-resourced communities and partners with lived expertise.

Sub Strategy 5.b: Increase community stakeholder support for countywide homelessness activities through increased engagement.

### Appendix C – Glossary of Terms

**Cal-AIM**, the California Advancing & Innovating Medi-Cal (Cal-AIM) initiative sponsored by the state Department of Health Care Services is a long-term commitment to transforming and sustaining Medi-Cal, offering Californians, including persons experiencing homelessness, a more equitable, coordinated, person-centered approach to maximizing their health and life trajectory.

#### **Chronically Homeless Individual**

refers to an individual with a disability who has been continuously homeless for one year or more or has experienced at least four episodes of homelessness in the last three years where the combined length of time homeless on those occasions is at least 12 months.

Chronically Homeless People in Families refers to people in families in which the head of household has a disability and has either been continuously homeless for one year or more or has experienced at least four episodes of homelessness in the last three years where the combined length of time homeless on those occasions is at least 12 months.

**Congregate Shelter** is an emergency shelter where the residents share a common sleeping area.

**Continuum of Care (CoC)** is the local planning body responsible for coordinating the full range of homelessness services in the Sacramento region and may cover the cities, county, and unincorporated geographic areas. Coordinated Access System (CAS) -

CAS is a regionally based system that connects new and existing programs into a "no wrong-door network" by assessing the needs of individuals/ families/youth experiencing homelessness and linking them with the most appropriate housing and services to end their homelessness.

**Diversion Services** is a client-driven approach designed to immediately help a person or household who just lost housing find safe alternative housing, rather than entering shelter or experiencing unsheltered homelessness.

**Emergency Shelter** is a facility with the primary purpose of providing temporary shelter for homeless people.

**Homeless** describes a person who lacks a fixed, regular, and adequate nighttime residence.

Homeless Management Information System (HMIS) A computerized data collection system designed to capture client information over time on the characteristics, service needs and accomplishments of homeless persons. Implementation of an HMIS is required by the federal department Housing and Urban Development (HUD) for programs receiving federal funding through the Continuum of Care (CoC).

**Homelessness Prevention** refers to policies, practices, and interventions that reduce the likelihood that someone will experience homelessness.

Housing First is an approach that offers permanent housing as quickly as

possible for people experiencing homelessness, particularly for people with long histories of homelessness and co-occurring health challenges, while providing the supportive services people need to keep their housing and avoid returning to homelessness.

**Individual** refers to a person who is not part of a family with children during an episode of homelessness. Individuals may be homeless as single adults, unaccompanied youth, or in multipleadult or multiple-child households.

**Non-congregate Shelter** is an emergency shelter that provides private sleeping space, such as a hotel or motel room.

**Other Permanent Housing** is housing with or without services that is specifically for people who formerly experienced homelessness but that does not require people to have a disability.

**People in Families with Children** are people who are experiencing homelessness as part of a household that has at least one adult (age 18 and older) and one child (under age 18).

#### Permanent Supportive Housing (PSH)

is a housing model designed to provide housing assistance (project and tenantbased) and supportive services on a long-term basis to people who formerly experienced homelessness. Participants are required to have a disability for eligibility.

**Rapid Rehousing** is a housing model designed to provide temporary housing assistance to people experiencing homelessness, moving them quickly out of homelessness and into permanent housing.

**Street Outreach** is defined as the activity of engaging unsheltered homeless individuals through the process of rapport building with the goal of linking that individual to a permanent housing resource.

**Sheltered Homelessness** refers to people who are staying in emergency shelters, transitional housing programs, or safe havens.

#### **Transitional Housing Programs**

provide people experiencing homelessness a place to stay combined with supportive services for up to 24 months.

#### **Unaccompanied Homeless Youth**

(under 18) are people in households with only children who are not part of a family with children or accompanied by their parent or guardian during their episode of homelessness, and who are under the age of 18.

#### Unaccompanied Homeless Youth (18-

**24)** are people in households without children who are not part of a family with children or accompanied by their parent or guardian during their episode of homelessness and who are between the ages of 18 and 24.

**Unsheltered Homelessness** refers to people whose primary nighttime location is a public or private place not designated for, or ordinarily used as, a regular sleeping accommodation for people (for example, the streets, vehicles, or parks). **Veteran** refers to any person who served on active duty in the armed forces of the United States. This includes Reserves and National Guard members who were called up to active duty. {END}

| Table 1. Landscape Analysis                                       |                                     |  |
|---|-------------------------------------|--|
|   | People Experiencing<br>Homelessness | Source and<br>Date Timeframe of Data   |
| Population and Living Situations                                  |                                     |  |
| TOTAL # OF PEOPLE EXPERIENCING HOMELESSNESS                       | 17,355                              | 2019 Point-In-Time (PIT) Unsheltered<br>Count and<br>2021 Housing Inventory Count (HIC)<br>Sheltered (annualized)                  |
| # of People Who are <b>Sheltered</b> (ES, TH, SH)                 | 9,557                               | CY 2021 HMIS Data (adjusted and annualized)  |
| # of People Who are <b>Unsheltered</b>                            | 7,798                               | 2019 Unsheltered Count and<br>2021 HIC Sheltered (annualized and<br>adjusted)  |
| Household Composition   |                                     |  |
| # of Households without Children                                  | 10,122                              | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella Performance Module<br>(annualized) |
| # of Households with At Least 1 Adult & 1 Child                   | 1,171                               | Source derived from above "Population<br>and Living Situations" estimates<br>(annualized)  |
| # of Households with Only Children                                | 95                                  | Source derived from above "Population<br>and Living Situations" estimates<br>(annualized)  |
| Sub-Populations and Other Characteristics                         |                                     |  |
| # of Adults Who are Experiencing Chronic Homelessness             | 3,495                               | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)                     |
| # of Adults Who are Experiencing Significant Mental Illness       | 3,211                               | Source derived from above "Population<br>and Living Situations" estimates<br>and 2019 PIT Count (annualized)                       |
| # of Adults Who are Experiencing <b>Substance Abuse</b> Disorders | 1,583                               | Source derived from above "Population<br>and Living Situations" estimates<br>and 2019 PIT Count (annualized)                       |
| # of Adults Who are <b>Veterans</b>                               | 1,094                               | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)                     |
| # of Adults with <b>HIV/AIDS</b>                                  | 254                                 | Source derived from above "Population<br>and Living Situations" estimates<br>and 2019 PIT Count (annualized)                       |
| # of Adults Who are Survivors of Domestic Violence                | 4,001                               | Source derived from above "Population<br>and Living Situations" estimates<br>and 2019 PIT Count (annualized)                       |
| # of Unaccompanied Youth (under 25)                               | 1,464                               | Source derived from above "Population<br>and Living Situations" estimates<br>(annualized)  |
| # of Parenting Youth (under 25)                                   | 192                                 | Source derived from above "Population<br>and Living Situations" estimates<br>(annualized)  |
| # of People Who are Children of Parenting Youth                   | 304                                 | Source derived from above "Population<br>and Living Situations" estimates<br>(annualized)  |
| Gender Demographics   |                                     |  |
| # of Women/Girls  | 8,268                               | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)                     |

| # of <b>Men/Boys</b>  | 8,907  | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
|---|--------|---|
| # of People Who are <b>Transgender</b>                        | 108    | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
| # of People Who are Gender Non-Conforming                     | 71     | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
| Ethnicity and Race Demographics                               |        |   |
| # of People Who are Hispanic/Latino                           | 3,039  | Source derived from above "Population<br>and Living Situations" estimates<br>and June 2021 CoC Racial Equity<br>Committee Draft Action Plan<br>(annualized) |
| # of People Who are Non-Hispanic/Non-Latino                   | 14,316 | Source derived from above "Population<br>and Living Situations" estimates<br>and June 2021 CoC Racial Equity<br>Committee Draft Action Plan<br>(annualized) |
| # of People Who are Black or African American                 | 6,810  | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
| # of People Who are <b>Asian</b>                              | 278    | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
| # of People Who are American Indian or Alaska Native          | 479    | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
| # of People Who are Native Hawaiian or Other Pacific Islander | 286    | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
| # of People Who are <b>White</b>                              | 8,504  | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |
| # of People Who are Multiple Races                            | 960    | Source derived from above "Population<br>and Living Situations" estimates<br>and FY 2021 Stella P (annualized)  |

|   | Pormanont                                   |                             |                                 |   | dscape Analysis of Diversion        | of People Being Serve                                    | ed<br>Outreach and              |                   |  |
|---|---|-----------------------------|---------------------------------|---|-------------------------------------|--|---------------------------------|-------------------|--|
| Household Composition   | Permanent<br>Supportive<br>Housing<br>(PSH) | Rapid<br>Rehousing<br>(RRH) | Transitional<br>Housing<br>(TH) | Intermin Housing or<br>Emergency Shelter<br>(IH / ES) | Services and<br>Assistance<br>(DIV) | Homelessness<br>Prevention Services<br>& Assistance (HP) | Engagement<br>Services<br>(O/R) | Other: [Identify] | Source(s) and Timeframe of Data  |
| # of Households without Children                                | 5,101                                       | 5,503                       | 778                             | 6,934   | 6,279                               | 3,316  | 4,719                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Households with At Least 1<br>Adult & 1 Child              | 537   | 469                         | 106                             | 589   | 682                                 | 437  | 310                             | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Siluations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Households with <b>Only Children</b>                       | 0   | 51                          | 16                              | 48  | 75                                  | 18   | 7                               | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| Sub-Populations and Other<br>Characteristics                    |   |                             |                                 |   |                                     |  |                                 |                   |  |
| # of Adults Who are Experiencing<br>Chronic Homelessness        | 0   | 1,921                       | 0                               | 3,318   | 0                                   | 0  | 3,480                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of A dults Who are Experiencing<br>Significant Mental Illness | 0   | 1,323                       | 198                             | 1,666   | 1,550                               | 894  | 1,109                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Adults Who are Experiencing<br>Substance Abuse Disorders   | 0   | 652                         | 98                              | 821   | 764                                 | 441  | 547                             | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Adults Who are <b>Veterans</b>                             | 725   | 635                         | 121                             | 543   | 665                                 | 390  | 395                             | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Adults with <b>HIV/AIDS</b>                                | 0   | 104                         | 16                              | 132   | 122                                 | 70   | 88                              | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Siluations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Adults Who are Survivors of<br>Domestic Violence           | 1,671                                       | 1,761                       | 264                             | 2,219   | 2,064                               | 1,119  | 1,476                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Unaccompanied Youth (under 25)                             | 279   | 740                         | 198                             | 783   | 930                                 | 226  | 369                             | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of Parenting Youth (under 25)                                 | 73  | 99                          | 19                              | 79  | 129                                 | 52   | 25                              | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of People Who are Children of<br>Parenting Youth              | 175   | 238                         | 46                              | 190   | 310                                 | 130  | 60                              | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| Gender Demographics   |   |                             |                                 |   |                                     |  |                                 |                   |  |
| # of Women/Girls  | 2,457                                       | 2,539                       | 409                             | 3,191   | 3,075                               | 1,707  | 2,055                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of <b>Men/Boys</b>  | 4,317                                       | 4,461                       | 718                             | 5,607   | 5,404                               | 2,999  | 3,612                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of People Who are <b>Transgender</b>                          | 69  | 71                          | 11                              | 89  | 86                                  | 48   | 57                              | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of People Who are Gender Non-<br>Conforming                   | 25  | 26                          | 4                               | 33  | 32                                  | 17   | 21                              | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| Ethnicity and Race Demographics                                 |   |                             |                                 |   |                                     |  |                                 |                   |  |
| # of People Who are<br>Hispanic/Latino                          | 1,202                                       | 1,242                       | 200                             | 1,561   | 1,505                               | 835  | 1,005                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Siluations"<br>estimates in Table 1 and FY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |
| # of People Who are <b>Non-</b><br>Hispanic/Non-Latino          | 5,666                                       | 5,855                       | 943                             | 7,358   | 7,093                               | 3,936  | 4,740                           | 0                 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021 |

| # of People Who are <b>Black or</b><br>African American          | 2,695 | 2,784 | 448 | 3,500 | 3,373 | 1,872 | 2,254 | 0 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modelling,<br>Calendar Year (CY) 2021 |
|--|-------|-------|-----|-------|-------|-------|-------|---|---|
| # of People Who are <b>Asian</b>                                 | 110   | 114   | 18  | 143   | 138   | 76    | 92    | 0 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Madule (Stella P)<br>Resources needed from system modeling,<br>Calendar Yeor (CY) 2021  |
| # of People Who are American<br>Indian or Alaska Native          | 190   | 196   | 32  | 246   | 237   | 132   | 159   | 0 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Madule (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021  |
| # of People Who are Native<br>Hawaiian or Other Pacific Islander | 113   | 117   | 19  | 147   | 142   | 79    | 95    | 0 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021  |
| # of People Who are <b>White</b>                                 | 3,380 | 3,493 | 562 | 4,390 | 4,232 | 2,349 | 2,828 | 0 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021  |
| # of People Who are Multiple Races                               | 380   | 393   | 63  | 493   | 476   | 264   | 318   | 0 | Annualized estimate need: Source derived<br>from "Population and Living Situations"<br>estimates in Table 1 and PY 2021 Stella<br>Performance Module (Stella P)<br>Resources needed from system modeling,<br>Calendar Year (CY) 2021  |

|  |  |  |   | Table 3  | Landscape Analysis of Sta   | te, Federal and Local Funding  |  |  |  |                                       |   |  |
|--|--|--|---|--|---|--|--|--|--|---------------------------------------|---|--|
| Funding Program<br>(choose from drop down options)                           | Fiscal Year<br>(select all that apply) | Total Amount<br>Invested into<br>Homelessness<br>Interventions | Funding Source*   |  | upported with Funding<br>that apply)  | Brief Description of Programming<br>and Services Provided  |  |  |  | ons Served<br>ropriate population[s]) |   |  |
|  | FY 2021-2022                           | Systems Support Activities                                     | Diversion and Homelessness<br>Prevention  | Improve access and diversion                         |   |  | TARGETED POPULATIONS (please "x" all that apply) |  |  |                                       |   |  |
| Homeless Housing, Assistance and<br>evention Program (HHAP) - via Cal<br>ICH | FY 2022-2023                           | \$ 6,550,887.16  | State Agency  | Administrative Activities                            | Outreach and Engagement   | through rapid access problem solving<br>program, motel vouchers for crisis                             | v  | ALL PEOPLE<br>EXPERIENCING                 | X People Exp Chronic<br>Homelessness             | <b>X</b> Veterans                     | X Parenting Youth   |  |
|  | FY 2023-2024                           | \$ 0,000,007.10  | Sidie Agency  | Non-Congregate Shelter/<br>Interim Housing           |   | response, landlord engagement,<br>youth sheltering, rapid re-housing,                                  | Â  | HOMELESSNESS                               | People Exp Severe<br>Mental Illness              | People Exp HIV/ AIDS                  | Children of Parentin<br>X Youth                                 |  |
|  | FY 2024-2025                           |  |   | Rental Assistance                                    |   | and HMIS support.  |  |  | People Exp Substance<br>Abuse Disorders          | X Unaccompanied Youth                 | Other (please enter<br>here )                                   |  |
| lomeless Housing, Assistance and   | FY 2021-2022                           |  |   | Systems Support Activities                           | Outreach and Engagement   | Improve access and diversion   |  |  | TARGETED   | POPULATIONS (please "x" all th        | at apply)   |  |
| evention Program (HHAP) - via Cal<br>ICH                                     | FY 2022-2023                           | \$ 3,099,643.00  | 3.099,643.00         State Agency   | v  | ALL PEOPLE  | X People Exp Chronic<br>Homelessness   | <b>X</b> Veterans                                | x Parenting Youth                          |  |                                       |   |  |
|  | FY 2023-2024                           | \$ 3,077,043.00  | Sidie Ageney  | Non-Congregate Shelter/<br>Interim Housing           |   | specifically, landlord engagement,<br>youth sheltering, and strategic                                  | î  | HOMELESSNESS Me                            | People Exp Severe<br>Mental Illness              | People Exp HIV/ AIDS                  | Children of Parenting<br>X Youth                                |  |
|  | FY 2024-2025                           |  |   | Diversion and Homelessness<br>Prevention             |   | planning.  |  |  | People Exp Substance<br>Abuse Disorders          | X Unaccompanied Youth                 | Other (please enter<br>here)                                    |  |
|  | FY 2021-2022                           |  |   | Systems Support Activities                           |   | Annual federal funding for new and<br>renewal Permanent Housing projects                               |  |  | TARGETED POPULATIONS (please "x" all that apply) |                                       |   |  |
| ontinuum of Care Program (CoC) -<br>via HUD                                  |  |  |   | Administrative Activities                            |   | (Permanent Support Housing, Rapid<br>Rehousing, and Transitional/Rapid<br>Rehousing Hybrid); permanent | X<br>x   | ALL PEOPLE                                 | X People Exp Chronic<br>Homelessness             | Veterans                              | Parenting Youth   |  |
|  |  | \$29.7M  | Federal Agency  | Permanent Supportive and<br>Service-Enriched Housing |   | housing for survivors of Domestic<br>Violence: Homeless Response                                       |  | EXPERIENCING<br>HOMELESSNESS               | People Exp Severe<br>Mental Illness              | People Exp HIV/ AIDS                  | Children of Parentin<br>Youth                                   |  |
|  |  |  |   | Rental Assistance                                    |   | System Coordinated Entry<br>Operations, Planning, and Homeless<br>Management Information System.       |  |  | People Exp Substance<br>Abuse Disorders          | Unaccompanied Youth                   | Other (please enter<br>here): Survivors of<br>Domestic Violence |  |
|  | FY 2021-2022                           |  |   | Systems Support Activities                           | Outreach and Engagement   | Advance systems-level approaches<br>to gather real-time data to monitor                                |  |  | TARGETED   | POPULATIONS (please "x" all th        | at apply)   |  |
| Other (enter funding source under dotted line)                               | FY 2022-2023                           | \$5,000,000  | Private Funder(s)   | Administrative Activities                            | and identify families at tisk of and<br>experiencing homelessness, quickly<br>divert families and rapidly rehousing | ¥  | ALL PEOPLE<br>EXPERIENCING                       | People Exp Chronic<br>Homelessness         | Veterans   | Parenting Youth                       |   |  |
|  | FY 2023-2024                           | \$5,000,000 Flivale  | r invale i onder(s)   | Rental Assistance                                    |   | families experiencing homelessness,<br>and focus on best practice                                      | ^  | HOMELESSNESS                               | People Exp Severe<br>Mental Illness              | People Exp HIV/ AIDS                  | Children of Parentin<br>Youth                                   |  |
| ezos Grant   | FY 2024-2025                           |  |   | Diversion and Homelessness<br>Prevention             |   | approaches to identify and address racial disparities.   |  |  | People Exp Substance<br>Abuse Disorders          | Unaccompanied Youth                   | X Other - Families  |  |
|  | FY 2021-2022                           |  |   | Systems Support Activities                           |   |  |  |  | TARGETED   | POPULATIONS (please "x" all th        | at apply)   |  |
| Other (enter funding source under<br>dotted line)                            | FY 2022-2023                           | \$ 2,526,184.00  | 2,526,184.00 State Agency Administrative Activities Implementation of coordinated entry/ coordinated access system. | ¥  | ALL PEOPLE<br>EXPERIENCING  | People Exp Chronic<br>Homelessness   | Veterans   | Parenting Youth                            |  |                                       |   |  |
|  | FY 2023-2024                           | φ 2,320,104.00   | Sidie Ageney  |  |   | systems support.   | î  | HOMELESSNESS                               | People Exp Severe<br>Mental Illness              | People Exp HIV/ AIDS                  | Children of Parentin<br>Youth                                   |  |
| alifornia Emergency Solutions and<br>busing - via HCD                        | FY 2024-2025                           |  |   |  |   |  |  |  | People Exp Substance<br>Abuse Disorders          | Unaccompanied Youth                   | Other (please enter<br>here)                                    |  |
|  |  |  |   |  |   |  |  |  | TARGETED   | POPULATIONS (please "x" all th        | at apply)   |  |
|  |  | s .  |   |  |   |  |  | ALL PEOPLE<br>EXPERIENCING<br>HOMELESSNESS | People Exp Chronic<br>Homelessness               | Veterans                              | Parenting Youth   |  |
|  |  |  |   |  |   |  |  |  | People Exp Severe<br>Mental Illness              | People Exp HIV/ AIDS                  | Children of Parentin<br>Youth                                   |  |
|  |  |  |   |  |   |  |  |  | People Exp Substance<br>Abuse Disorders          | Unaccompanied Youth                   | Other (please enter<br>here)                                    |  |
|  |  |  |   |  |   |  | TARGETED POPULATIONS (please "x" al              |  | POPULATIONS (please "x" all th                   | at apply)                             |   |  |
|  |  | s -  |   |  |   |  |  | ALL PEOPLE<br>EXPERIENCING                 | People Exp Chronic<br>Homelessness               | Veterans                              | Parenting Youth   |  |
|  |  | _ *  |   |  |   |  |  | HOMELESSNESS                               | People Exp Severe<br>Mental Illness              | People Exp HIV/ AIDS                  | Children of Parentin<br>Youth                                   |  |
|  |  |  |   |  |   |  |  |  | People Exp Substance<br>Abuse Disorders          | Unaccompanied Youth                   | Other (please enter<br>here)                                    |  |

|   | 4. Outcome Goals  |   |  |  |  |  |
|---|---|---|--|--|--|--|
| Outcome Goal #1a: Reducing the number of persons experiencing h   | nomelessness.   |   |  |  |  |  |
| Baseline Data:  | Outcome Goals July 1, 2021 - June 30, 2024                                    |   |  |  |  |  |
| Annual estimate of number of people accessing services who are<br>experiencing homelessness   | Decrease/Increase in # of People  | Decrease/Increase as % Change from<br>Baseline      |  |  |  |  |
| 9,899   | 5% increase   |   |  |  |  |  |
| Op  | tional Comments   |   |  |  |  |  |
| -<br>-  |   |   |  |  |  |  |
|   | Your Related Goals for  | Hemeleannes   |  |  |  |  |
| Describe<br>Underserved Populations and Populat<br>Describe any underserved and/ or disproportionately impacted population(s;<br>focus on related to this Outcome Goal and how this focus has been informed | tions Disproportionately Impacted by<br>) that your community will especially | Describe the trackable data goal(s) related to this |  |  |  |  |

| Outcome Goal #1b: Reducing the number of persons experiencing h   | omelessness on a daily basis   |   |  |  |  |  |
|---|--|---|--|--|--|--|
| Baseline Data:  | Outcome Goals  | July 1, 2021 - June 30, 2024                        |  |  |  |  |
| Daily Estimate of # of people experiencing unsheltered<br>homelessness  | Reduction in # of People   | Reduction as % Change from Baseline                 |  |  |  |  |
| 3,900   | 60% (increase)   |   |  |  |  |  |
| Optional Comments   |  |   |  |  |  |  |
| The outcome goal is an increase of 60% over the 2019 PIT baseline (2,340 additional people for an end total of 6,240 unsheltered) due to local housing market,<br>economic conditions, and diminishing emergency rental assistance and other eviction safeguards, assuming 2024 PIT count numbers will be used to measure the<br>outcome. This estimate is based on a projection which assumes the 2024 PIT count will be at least 2 times over the 2019 PIT (~7,800). Additional system investments<br>and improvements are expected to result in a 20% reduction in unsheltered homelessness by Jan 2024 PIT count, compared to current trend (6,240 vs 7.800<br>unsheltered as of 2024 PIT). |  |   |  |  |  |  |
| Describe<br>Underserved Populations and Populat   | Your Related Goals for<br>tions Disproportionately Impacted b  | v Homelessness                                      |  |  |  |  |
| Describe any underserved and/ or disproportionately impacted population(s focus on related to this Outcome Goal and how this focus has been informed  | ) that your community will especially  | Describe the trackable data goal(s) related to this |  |  |  |  |
| Analysis of local data shows that while persons who identify as Black,<br>the population in our CoC's geographic area, yet this this demograp<br>of individuals experiencing homelessness.("Source derived from abov<br>Situations'" estimates and FY 2021 Stella P)  | In order to reduce the number of persons<br>experiencing homelessness on a daily basis, we<br>will consider the 60% increase from the baseline<br>data. Of that 60% increase the goal would be to<br>not increase Black/African persons experiencing<br>unsheltered homelessness past 39%. |   |  |  |  |  |

| Outcome Goal #2: Reducing the number of persons who become ho  | meless for the first time.  |  |  |  |  |  |
|--|---|--|--|--|--|--|
| Baseline Data:   | Outcome Goals   | July 1, 2021 - June 30, 2024   |  |  |  |  |
| Annual Estimate of # of people who become homeless for the first time  | Reduction in # of People  | Reduction as % Change from Baseline                                  |  |  |  |  |
| 4,051  | 203 (increase)  | 5% (increase)  |  |  |  |  |
| Op   | tional Comments   |  |  |  |  |  |
| This outcome goal assumes a modest increase of 5% over the baselin<br>increased HMIS coverage and system use.  | This outcome goal assumes a modest increase of 5% over the baseline (203 more people recorded as homeless for the first time in HMIS) due to<br>increased HMIS coverage and system use.   |  |  |  |  |  |
| Describe<br>Underserved Populations and Populat  | Your Related Goals for<br>ions Disproportionately Impacted by   | y Homelessness   |  |  |  |  |
| Describe any underserved and/ or disproportionately impacted population(s)<br>focus on related to this Outcome Goal and how this focus has been informed   |   | Describe the trackable data goal(s) related to this<br>Outcome Goal: |  |  |  |  |
| Analysis of local data shows that persons who identify as Black/Africa<br>11% of the population in our CoC's geographic area, this demograph<br>of individuals experiencing homelessness for the first time. (CAL ICH Br | In order to reduce the numbers of persons who<br>become homeless for the first time we will<br>consider the 5% increase from the baseline data.<br>Our goal is the number of persons who become<br>homeless for the first time persons identifying as<br>Black/African American should not surpass 39.6%. |  |  |  |  |  |

| Outcome Goal #3: Increasing the number of people exiting homelessness into permanent housing. |  |  |  |  |
|---|--|--|--|--|
| Baseline Data:  | Outcome Goals July 1, 2021 - June 30, 2024 |  |  |  |

| Annual Estimate of # of people exiting homelessness into<br>permanent housing  | Increase in # of People             | Increase as % Change from Baseline  |  |  |  |  |  |
|--|-------------------------------------|---|--|--|--|--|--|
| 2,770  | 10%                                 |   |  |  |  |  |  |
| Optional Comments  |                                     |   |  |  |  |  |  |
| This outcome goal assumes a modest improvement of 10% over the baseline (277 more people exiting into permanent housing) due to additional system rehousing capacity, fidelity to evidence-based practices, and performance. |                                     |   |  |  |  |  |  |
| Describe Your Related Goals for<br>Underserved Populations and Populations Disproportionately Impacted by Homelessness   |                                     |   |  |  |  |  |  |
| Describe any underserved and/ or disproportionately impacted population(s<br>focus on related to this Outcome Goal and how this focus has been informed  |                                     | Describe the trackable data goal(s) related to this<br>Outcome Goal:  |  |  |  |  |  |
| Analysis of local data shows that while persons who identify as Black<br>the population in our CoC's geographic area, this demographic is e:<br>of 32%. (CAL ICH Baseline data)□   | xiting to permanent housing at rate | In order to increase the number of people exiting<br>homelessness into permanent housing we will consider<br>the 10% increase from baseline data. Of the 10%<br>increase determined by the Gaps analysis, our goal is the<br>ensure that at least 50% of persons exiting to permanen<br>housing will identity as Black/African Americans. |  |  |  |  |  |

| Outcome Goal #4: Reducing the length of time persons remain home  | eless.  |   |  |  |  |  |
|---|---|---|--|--|--|--|
| Baseline Data:  | Outcome Goals July 1, 2021 - June 30, 2024                    |   |  |  |  |  |
| Average length of time (in # of days) persons enrolled in street<br>outreach, emergency shelter, transitional housing, safehaven<br>projects and time prior to move-in for persons enrolled in rapid<br>rehousing and permanent housing programs"   | Decrease in Average # of Days                                 | Decrease as % Change from Baseline  |  |  |  |  |
| 156   | 20 (increase)   | 13% (increase)  |  |  |  |  |
| Optional Comments   |   |   |  |  |  |  |
| This outcome goal assumes a 13% increase over the baseline to 176 average days (20 day increase) due to limited system capacity, the Coronavirus<br>pandemic, local housing market and economic conditions. However, this goal is an improvement over the current trendline, which indicates an 18%<br>increase in days homeless from CY18 to CY20. |   |   |  |  |  |  |
| Describe<br>Underserved Populations and Popula  | Your Related Goals for<br>tions Disproportionately Impacted b | y Homelessness  |  |  |  |  |
| Describe any underserved and/ or disproportionately impacted population(s<br>focus on related to this Outcome Goal and how this focus has been informed   |   | Describe the trackable data goal(s) related to this<br>Outcome Goal:  |  |  |  |  |
| Currently the analysis of local data shows Black/African Americans a homeless. (CAL ICH Basline Data)   | werage 157 days length of time                                | In order to reduce the length of time persons remain<br>homeless, we will consider a 13% increase from baseline<br>data. Of that 13% increase to 176 average days, the<br>similar goal is to increase the number of days of Black<br>African Americans experiencing length of time<br>homeless by 19 days for a total of 176 days length of<br>time homeless. |  |  |  |  |

| Baseline Data:<br>% of people who return to homelessness after having exited<br>homelessness to permanent housing  | Outcome Goals July 1, 2021 - June 30, 2024            |  |
|--|---|--|
|  | Decrease in % of People who<br>return to Homelessness | Decrease as % Change from Baseline                 |
| 8%   | 2% (increase)   | 24% (increase)                                     |
| Oj   | ptional Comments                                      |  |
| This outcome goal assumes an increase in returns to homelessness to<br>compared to CY19 (11% returns) and CY20 is less representative for l<br>increase capacity and stabilization supports. | . ,   |  |
|  |   |  |
| underserved Populations and Popula   | ations Disproportionately Impacted b                  | y Homelessness                                     |
| Underserved Populations and Popula<br>Describe any underserved and/ or disproportionately impacted population(<br>focus on related to this Outcome Goal and how this focus has been informed | s) that your community will especially                | Describe the trackable data goal(s) related to the |

| Outcome Goal #6: Increasing successful placements from street outreach.  |  |                           |
|--|--|---------------------------|
| Baseline Data:   | Outcome Goals July 1, 2021 - June 30, 2024                             |                           |
| Annual # of people served in street outreach projects who exit to<br>emergency shelter, safe haven, transitional housing, or permanent | Increase in # of People<br>Successfully Placed from Street<br>Outreach | Increase as % of Baseline |
| housing destinations.  | Oulleach   | Increase as % or Baseline |
| 297  | 59   | 20%                       |

#### Optional Comments

This outcome goal assumes a modest improvement by 20% (total of 386 successful placements) over the baseline due to improved street outreach, rehousing capacity, and service engagement.

| Describe Your Related Goals for<br>Underserved Populations and Populations Disproportionately Impacted by Homelessness  |   |  |
|---|---|--|
| Describe any underserved and/ or disproportionately impacted population(s) that your community will especially  | Describe the trackable data goal(s) related to this   |  |
| focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment   | : Outcome Goal:   |  |
| Analysis of local data shows that 112 persons (29%) who identify as Black/African American are served<br>in street outreach projects who exit emergency shelter, safe haven, transitional housing, or permanent<br>housing designations. (CAL ICH Baseline data) [] | In order to increase successful placements from street<br>outreach, we will consider the 20% increase from<br>baseline data. With that 20% increase to 386 total<br>successful placements, 143 persons identifying as<br>Black/African American will be served by successful<br>placements from street outreach by offering culturally<br>responsive training to street outreach providers. |  |

| Table 5. Strategies to Achieve Outcome Goals  |   |  |
|---|---|--|
| Strategy  | Performance Measure to Be Impacted<br>(Check all that apply)  |  |
| Description   | <ul> <li>I. Reducing the number of persons experiencing homelessness.</li> <li>2. Reducing the number of persons who become homeless for the first time.</li> </ul> |  |
| Build and Scale a Streamline Coordinated Access System Timeframe  | <ul> <li>☑ 3. Increasing the number of people exiting homelessness into permanent housing.</li> </ul>   |  |
| 7/1/2022 - 6/30/2025  | $\blacksquare$ 4. Reducing the length of time persons remain homeless.  |  |
| Entities with Lead Responsibilities<br>Sacramento Continumm of Care, in partnership with the County of Sacramento<br>and City of Sacramento | 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.   |  |
| Measurable Targets  | ☑ 6. Increasing successful placements from street outreach.   |  |
| Increase dedicated coordinated access navigators to support diversion and system access.  | Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.   |  |

| Strategy  | Performance Measure to Be Impacted<br>(Check all that apply)  |
|---|---|
| Description   | ☑ 1. Reducing the number of persons experiencing homelessness.  |
|   | $\square$ 2. Reducing the number of persons who become homeless for the first time.                                     |
| Ensure Emergency Shelter and Interim Housing is Focused on Rehousing            | ☑ 3. Increasing the number of people exiting homelessness into permanent housing.                                       |
| Timeframe   |   |
|   | ☑ 4. Reducing the length of time persons remain homeless.   |
| 7/1/2022 - 6/30/2025  |   |
| Entities with Lead Responsibilities   | 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.           |
| City of Sacramento, County of Sacramento, Sacramento Housing and                | after exiting homelessness to permanent housing.  |
| Redevelopment Agency  | ☐ 6. Increasing successful placements from street outreach.   |
| Measurable Targets  |   |
| Increase emergency shelter, interim, and transitional housing full-service beds | Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness. |
| dedicated to rehousing.   | populations disproportionately impacted by nomelessness.  |

| Strategy   | Performance Measure to Be Impacted<br>(Check all that apply)  |
|--|---|
| Description  | ✓ 1. Reducing the number of persons experiencing homelessness.  |
|  | $\square$ 2. Reducing the number of persons who become homeless for the first time.                                     |
| Increase Permanent Housing Opportunities   | 3. Increasing the number of people exiting homelessness into permanent housing.   |
| Timeframe  |   |
| 7/1/2022 - 6/30/2025   | ✓ 4. Reducing the length of time persons remain homeless.   |
| Entities with Lead Responsibilities  | 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.           |
| City of Sacramento, County of Sacramento, Sacramento Continuum of Care,<br>Sacramento Housing and Redevelopment Agency | ✓ 6. Increasing successful placements from street outreach.   |
| Measurable Targets   | Forward on any ity mode valated to undergonized non-vulations and   |
| Increase housing exits for households through landlord engagement and increased coordinated rehousing resources.       | Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness. |

| Strategy  | Performance Measure to Be Impacted<br>(Check all that apply)  |
|---|---|
| Description   | ☑ 1. Reducing the number of persons experiencing homelessness.  |
|   | $\square$ 2. Reducing the number of persons who become homeless for the first time.                                     |
| Expand Prevention and Diversion Programs  | $\blacksquare$ 3. Increasing the number of people exiting homelessness into permanent housing.                          |
| Timeframe   |   |
|   | $\blacksquare$ 4. Reducing the length of time persons remain homeless.  |
| 7/1/2022 - 6/30/2025  | 5. Reducing the number of persons who return to homelessness  |
| Entities with Lead Responsibilities   | after exiting homelessness to permanent housing.  |
| City of Sacramento, County of Sacramento, Sacramento Continuum of Care,         |   |
| Sacramento Housing and Redevelopment Agency                                     | ☑ 6. Increasing successful placements from street outreach.   |
| Measurable Targets  |   |
| Increase availability of housing problem-solving and diversion services for all | Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness. |
| people engaged with the Coodinated Access system.                               |   |

| Strategy    | Performance Measure to Be Impacted<br>(Check all that apply) |
|-------------|--|
| Description | 1. Reducing the number of persons experiencing homelessness. |

|  | $\checkmark$ 2. Reducing the number of persons who become homeless for the first time.                        |
|--|---|
| Invest in Community Capacity Building and Training                         | ☑ 3. Increasing the number of people exiting homelessness into permanent housing.                             |
| Timeframe  |   |
|  | ☑ 4. Reducing the length of time persons remain homeless.   |
| 7/1/2022 - 6/30/2025   |   |
| Entities with Lead Responsibilities  | 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing. |
| Sacramento Continumm of Care, in partnership with the County of Sacramento | after exiting nomelessness to permanent housing.  |
| and City of Sacramento   | ☑ 6. Increasing successful placements from street outreach.   |
| Measurable Targets   | Focused on equity goals related to underserved populations and  |
| Develop and provide educational materials that explains how to access      | populations disproportionately impacted by homelessness.  |
| services and navigate the homeless crisis response system.                 | p.p   |

#### Recommendations from the Youth Homelessness Task Force on the Use of HHAP Funds

#### Background

During the initial round of HEAP and HHAP funds, the Sacramento Steps Forward Board and the City of Sacramento committed to abiding by recommendations from the Sacramento Youth Homelessness Task Force (SYHTF) in regard to the use of the youth set asides. To facilitate the process, the SYHTF convenes a session to weigh options and make recommendations. The task force includes representation across systems and inclusive of all youth providers.

The SYHTF met on May 4th to overview HHAP and overview possibly uses. A survey was sent to the SYHTF members to collect feedback. A subcommittee met on May 17th to review feedback and finalize recommendations.

#### **Recommendations:**

1. Ensure all projects currently funded by HHAP continue to receive full funding equivalent, at minimum, to current funding levels through the end of the final HHAP funding term (presumably in 2026).

HHAP allowed new programs to launch or expand in the last 3 years. These programs addressed critical gaps in the youth housing pipeline and reached under served, under resourced populations. As newly ramped programs, they are highly vulnerable to loss of funding streams. The top priority for HHAP funds is to ensure ongoing funding to these programs which include The Sacramento LGBT Community Center's Host Home, TLP, and STEPs program, Waking the Village's Youth Family Shelter, and Wind's Common Ground shelter.

#### 2. Increase the youth set aside to ~16%.

There was unanimous support from the SYHTF for an increase of the set aside to 15-20%. A larger set aside better reflects the percentage of Sacramento County's population that is under 25 years of age. Furthermore:

- Addressing homelessness earlier ensures fewer individuals enter chronic homelessness and thus require smaller interventions to ensure long-term housing stability.
- HUD mandates for disabilities and chronic homelessness result in fewer housing programs targeting youth. HHAP offers a pool of funding that can be committed to serving youth, offsetting the skewed impact of HUD funding priorities.
- Cities that increased HHAP set-asides to target youth launched high-impact innovations.
- The youth housing continuum and provider community has proven themselves innovative and highly collaborative as evidenced in The 100 Day Challenge to End Youth Homelessness and The Grand Challenge. They are uniquely positioned to create lasting change with these funds.

3. Begin committing a meaningful percentage of local funding to sustain the programs ramped in earlier HHAP rounds. Nonprofits need the partnership of the CoC, City, and County to find long-term

sustainable funding for the programs ramped under previous HHAP rounds. We call upon our local leaders to commit long-term, sustaining funding to the programs above in the coming fiscal year so that a portion of the next HHAP round can support ongoing growth.

#### Overview of Use of Funds from Increases Set Aside and Greater Local Investment

If funding is increased through higher set asides or greater local commitment, the SYHTF recommends funding support services to better serve youth and TAY receiving vouchers through a number of pilots and initiatives centered on connecting youth to housing subsidies. The project would leverage existing investments in the cross-agency Prevention and Intervention Team, utilize the vibrant youth case conferencing model, and strive for integration with Coordinated Entry.

#### Goals:

- 1. To offer a case management and supportive services option for TAY accessing FUP, FYI, Mainstream, EHV, or P3 vouchers who never had or have disconnected from their previous supports.
- 2. Help build and retain a base of market rate apartments that are accessible to youth with vouchers.
- 3. Increase youth exits into permanent housing.
- 4. Engage heavily with SHRA in order to collaborate effectively in moving processes along as quickly as possible, accessing new and existing vouchers for TAY, submitting and maintaining voucher documentation, and submitting new referrals.
- 5. Utilizing a racial equity lens, prioritize the most marginalized TAY with vouchers, which include our BIPOC and Transgender/Gender Non-Conforming TAY.

#### Services:

- 1. Work in collaboration with existing TAY teams to develop a landlord retention program and landlord base by engaging in intentional outreach, marketing, and relationship building, as well as building community guidelines on how to apartment share and for best practices of landlord engagement.
- 2. Reduce housing barriers for youth by offering financial assistance towards clearing housing-related debt, paying for applications, paying deposits, paying utility fees, etc.
- 3. Support youth in furnishing apartments with basic furniture needs through financial assistance and building relationships with community partners.
- 4. Apartment location assistance, apartment application assistance, and move in support.
- 5. Support in creating housing, education, employment, and wellness plans and actively supporting in achieving related goals towards holistic stability.
- 6. Engaging in other creative housing innovations to fill HCV system gaps such as relevant workshops, training, etc.

7. Aftercare supportive check-ins for up to 1 year after graduation from services in order to ensure ongoing stability.

# Additional Per Year Funding Request (using increased set asides or greater local investment):

| Activity   | Description  | Annual<br>Amount |
|--|--|------------------|
| Housing Coordination<br>Specialist (1 FTE / includes<br>benefits, equipment, mileage<br>reimbursements, and indirect)  | Provides TAY voucher holders support with<br>locating units to lease up with. Assist in<br>completing applications and completing<br>housing quality inspections. Engage with<br>landlords and reduce barriers to lease-up.<br>Work closely with SHRA during the lease-<br>up process.<br>Receives referrals from 2-1-1 and other<br>community partners for eligible TAY.  | \$75,000         |
| FYI Housing Retention<br>Specialist (1 FTE / includes<br>benefits, equipment, mileage<br>reimbursements, and indirect) | Serve as the primary contact person for<br>landlords when issues arise and engage in<br>landlord mediation services. Provide the<br>following housing retention services to<br>clients leased-up with an FYI voucher:<br>• Post-move counseling<br>• Basic life skills<br>• Credit building<br>• Meal preparation<br>• Job preparation<br>• Retainment counseling<br>• Employment skills<br>• Other services as necessary to<br>retain housing<br><b>Receives referrals through coordinated</b><br><b>entry as part of the FYI voucher referral</b><br><b>process.</b> | \$75,000         |
| Client Financial Assistance  | One time financial assistance to pay for:<br>(Move-in costs, application assistance,<br>household items, housing barrier mitigation,<br>etc.)  | \$40,000         |
| Annual Total   |  | \$190,000*       |

\*Recommending funding for entirety of HHAP 3 term at minimum

# Summary of the Significant Proposed Changes to the CoC NOFO Materials in 2022

#### **Overview and Purpose of this Document**

Each year, the Project Review Committee (PRC) is responsible for drafting the materials that guide the local CoC NOFO competition. In 2022, these materials included the Review and Rank Policies, Renewal Project Scoring Tool, New Project Scoring Tool, and Coordinated Entry New Project Scoring Tool. All materials are included in the meeting packet for your review, with proposed changes from the 2021 materials marked with red text. This document provides a high-level summary of the PRC's significant proposed changes to the CoC NOFO materials for the 2022 competition.

#### Key Definitions: CoC NOFO

- HUD Continuum of Care Notice of Funding Opportunity (CoC NOFO): an annual competition responsible for approximately \$30 million in funding for local housing and infrastructure supports
- **New Project**: a project that has *not* previously received HUD CoC NOFO funding
- **Renewal Project**: a project that has previously received HUD CoC NOFO funding and would like to renew that funding
- **Priority Listing**: a HUD-required list of all local new and renewal project applications, in the order of the priority the community would like to see the projects funded in (e.g., project one should be funded before project two)<sup>1</sup>
- Scoring Tools or Policies: the locally developed documents used to assign a score to each project application; application scores and policies are used to determine the order of the priority listing
- **Review and Rank Panelists**: the non-conflicted group of CoC members responsible for reviewing new and renewal project applications using the scoring tools and policies

The June 8<sup>th</sup> CoC Board meeting includes an agenda item to review and approve the 2022 scoring tools and policies, which will be used by the Review and Rank Panelists to score both new and renewal projects and generate the priority listing for the CoC NOFO competition.

<sup>&</sup>lt;sup>1</sup> For a video explanation of this concept, please see <u>Priority Listing 101 Video</u>.



#### **Feedback and Drafting Process**

Throughout the past year, Homebase collected feedback on the CoC NOFO materials from new and renewal applicants, previous Review and Rank Panelists, and PRC members. The PRC then reviewed the aggregated feedback and drafted proposed changes to the materials for the 2022 competition. The materials in the packet were approved by the PRC on May 24<sup>th</sup>, 2022.

Please note, during virtual technical assistance visits in early 2022, Homebase asked each agency about the impact of COVID-19 on their projects' performance. There were no clear patterns in the impact of COVID-19 on anticipated project performance. As a result, there were no changes made to the 2022 scoring materials to account for the continued impact of COVID-19.

#### Significant Changes – Review and Rank Policies

The Review and Rank Policies govern the process of reviewing local competition applications. The following items are the significant proposed changes to the Review and Rank Policies:

- 1. Automatic Ranking in Tier 1 for High Performers: In recognition of the high impact of Annual Performance Report (APR) data on competition outcomes, the PRC recommends ranking renewal projects that meet high performance standards automatically in Tier 1. The PRC has identified four areas and thresholds for determining high performance: housing retention/placement, increasing/maintaining income, bed/unit utilization, or grant spenddown
- 2. **Approach to Renewal Project Interviews**: To reduce the burden of the competition process on applicants and Panelists, the PRC recommends ending the practice of interviewing all renewal projects over Zoom. Instead, renewal projects will be contacted with questions over email and have 48 hours to respond.

#### Significant Changes – Renewal Project Scoring Tool

The Renewal Project Scoring Tool is used to judge the performance of projects that have been previously funded with HUD CoC funding and are looking to renew that funding through the local competition. The following items are the significant proposed changes to the Renewal Project Scoring Tool:

- Decreasing Points and Adjusting the Scale Housing Retention/Placement: In response to providers' feedback, the PRC recommends decreasing the total number of points associated with housing retention/placement from 24 points to 18 points and adjusting the scale to have a more gradual decrease of points.
- 4. Increasing Points and Adjusting the Scale Increase or Maintain Income, Non-Cash Mainstream Benefits, Grant Spenddown: To maintain the focus on



objective data in the scoring tool, the PRC recommends shifting the points from housing retention/placement factor to the following factors: increase or maintain income, non-cash mainstream benefits, and grant spenddown.

- 5. **New Bonus Factor Unique Funding**: In alignment with the CoC's commitment to serving individuals experiencing homelessness using diverse funding streams, the PRC recommends adding a 3-point bonus factor for renewal projects leveraging sources of one-time or on-going funding that may not be used to serve individuals experiencing homelessness if the project is defunded (e.g., project-based Housing Choice Vouchers).
- 6. **New Bonus Factor Organizational Commitment to Racial Equity:** In alignment with HUD and local priorities, the PRC recommends adding a 5-point bonus factor focused on applicant commitment to racial equity, including:
  - The organization's commitment to identifying *and* taking concrete measures to address barriers to housing and services faced by Black, Indigenous, and people of color (BIPOC) in CoC-funded projects; and
  - b. The organization's commitment to serving BIPOC since its founding.
- Simplifying Chronic Homeless: In response to panelists' and providers' request for transparency in scoring this factor, the PRC recommends focusing this factor on the project's alignment with HUD's definition of "dedicated" or "DedicatedPLUS."<sup>2</sup>
- 8. **Simplifying Severity of Needs & Special Considerations**: In response to panelists' and providers' requests for transparency in scoring this factor, the PRC recommends aligning this factor with the priority populations previously identified by the CoC (i.e., housing serving youth, seniors, or individuals with health conditions that make them vulnerable to COVID-19 as defined by the CDC).

Significant Changes – New Project Scoring Tools (Housing & Coordinated Entry)

The New Project Scoring Tools are used to evaluate the quality of new project applications for projects that have not previously received HUD CoC funding. There are two separate new project scoring tools, one for housing projects and one for Coordinated Entry projects. The following items are the significant proposed changes to both New Project Scoring Tools:

9. New Bonus Factor – Organizational Commitment to Racial Equity: Please see #6 under "Renewal Project Scoring Tool."

<sup>&</sup>lt;sup>2</sup> For an explanation of HUD's definition of "dedicated" and "DedicatedPLUS" please see FAQ 3247.



### SACRAMENTO CONTINUUM OF CARE DRAFT 2022 COC REVIEW AND RANK POLICIES

#### THE CONTINUUM OF CARE NOFO REVIEW AND RANK PROCESS

The Continuum of Care Program Annual Notice of Funding Opportunity (NOFO) requires all Continuums of Care throughout the country to review projects receiving Continuum of Care funding and prioritize projects based on performance outcomes. The Sacramento Continuum of Care Continuum of Care (CoC) adopts the following procedure to review both renewal projects and proposed new projects as part of the Continuum of Care Program competition. The provisions of this policy are subject to change annually depending on the Department of Housing and Urban Development's specific requirements in that year's NOFO.

#### 1. ANNUAL PERFORMANCE REPORTS

- A. **Annual Performance Report** (APR) data is generated from project inputs to the Homeless Management Information System (HMIS). This data can <u>only</u> be modified through corrected HMIS inputs. The data in the Annual Performance Report will be processed and formatted using the PRESTO web tool, and then presented to the Review and Rank Panel as part of the local NOFA competition.
- B. Projects that primarily serve survivors of domestic violence will generate their APRs using data from an alternative, non-HMIS database. If no such data is available, the project's program director or executive director may hand-tabulate the relevant data and sign a statement under penalty of perjury confirming that the director has personally reviewed the data and that the data is accurate.
- C. APR data will cover the full calendar year beginning April 1, 2021 and terminating March 31, 2022.
- D. All projects that began operations on or before April 1, 2021 will be required to cooperate in preparing an Annual Performance Report to be used in the local competition, as follows:
  - i. On May 24, the HMIS Lead ran APRs for all CoC-funded projects and shared those reports with those projects and with Homebase. <u>Each</u> <u>provider is responsible for reviewing the accuracy and completeness of</u> <u>its own APRs.</u> Agencies are encouraged to begin correcting their APR data as soon as they receive their draft APRs. This may require, e.g., completing annual follow-up evaluations on old clients, doing research to determine the final destination of clients who have left a program, and transferring data from paper case notes to HMIS.
  - ii. By June 1, Homebase will use the APRs to generate one basic PRESTO report per project that shows each project's primary objective criteria (e.g. housing placement, income, and utilization). Agencies will be given access to these basic reports as an educational <u>tool</u> to help them fulfill their responsibility to correct their APRs.
  - iii. For the next four weeks [unless constricted by NOFO timeline], Homebase will help agencies answer questions regarding their APRs and/or PRESTO reports and to help providers troubleshoot any errors in those reports. Although most errors will need to be fixed via additional data entry or by discussing issues with the HMIS lead, Homebase will provide technical assistance to agencies who proactively request it. In order to confirm that all corrections have been successful, agencies are encouraged to request new APRs from the HMIS Lead and review the new APRs.

E. By **June 30 at 5pm**, all projects are required to have finished cleaning and correcting their APR data. Providers who are tardy in finalizing their APRs without a valid reason will lose up to 5 out of 100 points in the local competition.

#### II. NOFO RELEASE AND KICKOFF CONFERENCE

- A. Upon publication of the CoC Program NOFO, the Collaborative Applicant will review the currently adopted scoring tools for all project types and ensure they comply with the NOFO. In the event the scoring tools do not comport with the NOFO, changes will be made and adopted prior to the use of the tools in the competition. All changes will be presented to and approved by the CoC Board with input from the Project Review Committee members and project applicants encouraged. Formal input may be given if time allows.
- B. Upon publication of the CoC NOFO, the Collaborative Applicant will schedule and announce a time and date for a Kickoff Conference where details about the funding opportunity and the process are provided. These details will be distributed to the entire CoC via listserv, email, posting, and any other method appropriate to ensure full distribution to the CoC.

#### C. All applicants/potential applicants are required to participate in the NOFO Overview Kickoff Conference.

- i. At the Kickoff Conference, the Collaborative Applicant will present an overview of the HUD CoC Program NOFO, including details about available funding and any major changes in the application from previous years.
- ii. Applicants will also be oriented to the process for reviewing and ranking applications, which will cover any supplemental local application materials, the scoring tools and applicable dates.
- iii. Applicants will also have the opportunity to ask any questions they have about both the local and HUD application processes.
- iv. A portion of the Conference will be dedicated to orienting potential new applicants to the funding opportunity to prepare them for the application process and provide all necessary information about the Continuum of Care program.
- D. At the Kickoff Conference, Homebase will distribute a local competition schedule that includes a deadline for submitting the Local Application (see Section III of these policies).

#### III. LOCAL APPLICATIONS

- A. At the Kickoff Conference, shortly after publication of the CoC Program NOFO, Homebase will distribute the Local Application, which will include Supplemental Questions to be answered by each project, as well as a list of Attachments to be submitted by each project. For Renewal Projects that have been operating for at least **eighteen months (from the e-LOCCs operating start date)**, the Local Application is also considered to include the APR.
  - i. The **Supplemental Questions** provide Project Applicants with the opportunity to report on project success and provide explanations for the objective project performance data contained in the APR.
  - ii. **Attachments**: The attachments to be collected include e-snaps materials such as the applicant profile and the project application that needs to be submitted to HUD as part of the national competition. Attachments may also be used to collect or verify objective information not captured in HMIS, particularly as it relates to project budgets, grant performance, and financial audits application. All of this information can be reviewed by the Review and Rank Panel to determine eligibility and ensure project design is appropriate for HUD funding.
- B. Answers to all Supplemental Questions must be completed online, using the PRESTO web tool. Agencies will receive PRESTO login information immediately following the Kickoff Conference. Agencies who decide to submit new projects after the Kickoff Conference but before the local application deadline should request PRESTO logins from Homebase via e-mail.
- C. As the Supplemental Questions are answered, the PRESTO report will be updated in real-time. It is each agency's responsibility to review its PRESTO reports and confirm that the reports are correct prior to the local application deadline. Projects may make use of the essay questions and short-answer questions to clarify the context of their objective performance data, but Homebase cannot and will not edit a project's scores based on a project's assertions about its own performance. The only way to correct objective performance data is by entering new data into HMIS, which should be done <u>before</u> the Kickoff Conference (see Section I of these policies).
- D. Late penalties: A project that turns in Local Application materials after the deadline (or insists on modifying Local Application materials after the deadline) will be subject to late penalties. Late penalties are imposed at the discretion of the Review & Rank Panel, based on the following guidance:
  - i. Materials received up to 10 minutes late may be accepted without penalty.

- ii. Materials received between 10 minutes and 24 hours after the deadline will cause the applicant to receive a two-point score deduction in the local competition.
- iii. Materials received between 24 hours and 72 hours after the deadline will receive a five-point score deduction.
- iv. Materials received more than 72 hours after the deadline **may be excluded** at the discretion of the Panel. If a Local Application is still substantially incomplete or non-compliant 72 hours after the deadline, then, at the discretion of the Panel, the project may be **rejected** and **denied entry into the local competition**.
- E. **Changes to PRESTO Reports:** Starting 72 hours after the Local Application deadline, changes to the PRESTO reports will be made <u>only</u> to correct transcription errors on the part of Homebase. The underlying information, such as APRs and Supplemental Answers, will not be changed.

#### IV. REVIEW AND RANK PROCESS

- A. The Review and Rank Panel (Panel) shall consist of the non-conflicted members of the Project Review Committee. Selection of those members is subject to the rules governing the Performance Review Committee and subject to the Conflict of Interest policy adopted by the Performance Review Committee or the Governance Committee, as applicable.
- B. If a person or an organization believes there is a conflict of interest that would exclude a Review and Rank Panel Member, it needs to be brought to the attention of Homebase staff within three calendar days of the announcement of the Review and Rank Panel membership. The concerned person/organization would need to provide specific and substantial information regarding the alleged conflict to allow the Collaborative Applicant to conduct a fair evaluation
- C. The Panel shall be announced to the Continuum of Care Competition applicants no later than two weeks before the Review and Rank meeting.
- D. The Panel shall receive a training from Homebase on the use of the PRESTO system, the CoC Program and local competition, and their responsibilities as Review and Rank panelists. This training may be conducted via videoconference at the convenience of the Panel.
- E. The Panel shall review the PRESTO reports and supplemental project information prior to the scheduled Review and Rank meeting.
- F. The Panel shall meet in person or virtually to discuss the applications submitted as part of the Continuum of Care Competition.
- G. All projects submitted as Renewal Projects will need to be on call during the Review and Rank meeting to answer questions from the Review and Rank panel.
- H. All projects submitted as New Projects may be invited to attend the Review and Rank Meeting to be interviewed by the Panel, at the discretion of the Panel. These interviews would be scheduled prior to the Review and Rank Meeting. Failure to cooperate with an invitation by the Review and Rank Panel may result in a project not being funded.
- I. All projects submitted as Renewal Projects may be asked clarifying application questions over email, at the discretion of the Panel. These questions will be sent at a time identified prior to the Review and Rank Meeting. Questions will be sent in a single email from the neutral facilitators of the competition. Projects will have 48 hours to respond to the email. If additional clarification is needed, the Panel may schedule a call with the agency to ask the questions.
- J. The ranked list is created by the following procedures:

- a. One ranked list is prepared based on a compilation of Review and Rank Panel raw scores for each application.
- b. Those applications that do not meet certain threshold requirements (as detailed on the scoring tool) will not be included in the ranked list.
- c. The Review and Rank Panel determines if any renewal project should receive a decrease in funding. Any funding captured from an existing project will be made available for reallocation to a new project that meets the requirements in the NOFO. See the section below labeled "Reallocation of Funds" for more details.
- d. Certain project types will automatically be ranked in the bottom of Tier 1. Within this region at the bottom of Tier 1, renewal housing projects with less than eighteen months of operating data (as defined by the e-LOCCs project start date) will be placed at the top of the region. HMIS renewal projects will be placed in the middle of the region and Coordinated Entry renewal projects will be ranked at the bottom of the region, immediately above the 'straddling' project.
- e. In the event that a project **expands and consolidates**, the Review and Rank Panel will treat the fully consolidated project as a renewal project. The data for all components of the project will be combined for scoring. Note that the panel does retain discretion to consider any exceptional circumstances that result from the consolidation and if applicants wish for the panel to consider such circumstances they should include specific details including the operating dates of legacy project and expansion project, the number of beds/units in legacy project and expansion project, and the specific scored factor(s) for which the project is seeking relief.
- f. If a renewal project meets the threshold factors and **all** the following performance metrics, that project will automatically be ranked in the top of Tier 1. These projects will not be scored and will <u>not</u> be required to complete the supplemental questions for the local competition or participate in an interview. The neutral facilitators of the competition will assess if each renewal project has met these criteria once the APR and eLOCCs data has been finalized.

| Factor                          | Metric                                  |
|---------------------------------|---|
| 2A/B: Housing                   | PSH: 98% or one negative household exit |
| Retention/Placement             | RRH: 80% or one negative household exit |
| 3A: Increase or Maintain Income | PSH: 75%                                |
|                                 | RRH: 65%                                |
| 4A: Bed/Unit Utilization        | ALL: 95%                                |
| 4B: Grant Spenddown             | ALL: 95%                                |

The use of this policy is reliant on the availability of funding in Tier 1. If the total combined requested funding for renewal projects that meet the threshold factors and all the following performance metrics exceeds the available funding in Tier 1, all renewal projects will be ineligible for autoranking at the top of Tier 1 and will be asked to compete in the local competition.

- g. In order to promote system performance by preventing returns to homelessness and promoting housing stability and retention, the PRC has determined that new housing project that have not demonstrated their ability to better enhance system performance may be prioritized directly below any renewal projects that have met the following performance requirements. Performance requirements for this purpose are 1) the renewal project meets a unique or prioritized need within the community; 2) the agency has a strong track record of past performance for this project or a similar project (if the project under review has not been scored before); and 3) the agency has developed a plan for achieving better outcomes for this project within the next year. If a plan will be required from a project, the panel will notify the project applicant during the competition period. The panel should also consider if this discretion has been exercised before to prioritize this renewal project over a new project application. If the panel exercises their discretion to prioritize a renewal project over a new project, it must be noted on the ranked list and briefly explained using the performance requirements listed above. The use of this discretion factor cannot be the grounds for an appeal.
- K. The Panel has **discretion** to adjust a scaled score up or down within the boundaries set by the scoring tool based on their understanding of the context of the project's performance through the program's written explanation and any statements made by the program during the review and rank interview or clarifying responses over email (if applicable). However, absent a truly

extraordinary circumstance, outside the control of the operator, panelists should not adjust a score by more than 25% of the maximum possible value for that scoring factor (up to the nearest 0.5 increment). If a program's score in a scaled scoring factor is altered, the Project Review Committee must document the reason for the alteration and the evidence relied upon in making the alteration

- L. After creating the ranked list, the Panel may recommend programs for reallocation based on the policy outlined in the sectioned titled "Reallocation of Funds."
- M. After the Review and Rank Meeting, a priority listing with scores will be compiled.
- N. Project applicants will be notified of the scoring results within three business days of the Review and Rank Meeting. Project applicants will receive a full list of project scores and may request a scoring breakdown for their own project.

#### V. ELIGIBILITY FOR APPEALS

Projects shall be allowed to appeal the decisions of the Review and Rank Panel subject to the requirements of this section.

- A. **Timing.** All appeals shall be concluded within 10 days of the Review and Rank Panel Meeting.
- B. **Composition of Appeals Panel.** Appeals will be sent to the CoC Advisory Board but will be heard by a non-conflicted subcommittee of Advisory Board members, together with two non-voting members: the SSF Deputy Director, and one member of the original Review Panel.
- C. Eligible Projects. A project may appeal if:
  - 1. The Review and Rank panel recommends the project for full or partial reallocation
  - 2. The project is placed in Tier 2
  - 3. The project may fall into Tier 2 if another appeal is successful\*
  - 4. The project is a new project not recommended for funding (if new project funding was available)\*
  - 5. If the project was submitted by a collaboration of agencies, only one joint appeal may be made.
- D. Eligible Grounds. Appeals may be made on the following bases:

Projects Recommended for Full or Partial Reallocation

- 1. May appeal its score on any grounds
- 2. May submit any information the agency feels is relevant

Projects Recommended or At Risk for Placement in Tier 2

- 1. May appeal only errors in scoring or in information provided to the Review Panel by parties other than the recipient/subrecipient
- 2. May not supplement application materials to support appeal

New Projects Not Recommended for Funding

- 1. May appeal errors in scoring or in information provided to the Review Panel by parties other than the recipient/subrecipient, if correcting the error could cause the project to be recommended for funding
- 2. May not supplement application materials to support appeal

NOTE: Appeals based on policy considerations, funding priorities, or other subjective criteria will not be considered and are not eligible.

<sup>&</sup>lt;sup>\*</sup>Not applicable in cases where policy at Section IV. Review and Rank Process, paragraph I.f. is applied to prioritize a renewal project over a new project application.

#### VI. PROCESS FOR APPEALS

- A. **Timeline for Appeals.** Any Project Applicant seeking to appeal must adhere to the included timeline. Failure to meet a deadline in the timeline voids the Project Applicant's appeal.
- B. **Notice of Appeal.** Project Applicants will have 24 hours after the issuance of the Priority Listing to provide notice to the CoC of an intent to appeal. This notice must include:
  - i. A statement as to why the project is eligible to appeal.
  - ii. The basis for the appeal
  - iii. A brief statement of the facts upon which the Project Applicant bases its appeal. These facts need not be complete, but must give the CoC a sufficient understanding for the basis of the appeal.
- C. The CoC will contact the appealing Project Applicant in an attempt to clarify the scoring decision and determine if the appeal can be resolved without requiring a formal hearing.
- D. If a resolution is not possible, the Project Applicant will submit a formal appeal pursuant to the official CoC Competition timeline.
  - iv. The Formal Appeal must consist of a short, clear, written statement no longer than two pages of the basis for the Project Applicant's appeal of the Review and Rank Panel's decision.
  - v. The Formal Appeal must be sent as an attachment to the Collaborative Applicant.
- E. Upon timely receipt of the Formal Appeal, the Collaborative Applicant will convene the Appeal Panel and set a time and date for the Appeal Hearing.
- F. The Appeal Hearing shall be conducted according to the following procedure:
  - vi. The Appeal Hearing will be conducted telephonically.
  - vii. The Appeal Panel (including non-voting members) will join the call with the neutral facilitator.
  - viii. The neutral facilitator will explain the facts of the appeal and answer any procedural questions.
  - ix. The Appeal Panel may ask the Review and Rank Panel member questions about the Review and Rank Process to clarify what occurred during Review and Rank and what information the Panel considered in evaluating the Project Applicant.
  - x. The appealing Project Applicant will then join the phone call. The appealing Project Applicant will be allotted a few minutes to explain their

appeal. The Appeal Panel may then ask any questions of the appealing Project Applicant. The appealing Project Applicant then leaves the phone call.

- xi. The Appeal Panel conducts a discussion of the appeal and takes a formal vote.
- G. The Appeal Panel may consider the effect of its decision on other Project Applicants and may include those project applicants in the appeals discussion.
- H. The decision of the Appeal Panel is final.
- I. Once the appeals are complete, the Priority Listing will be submitted to the CoC for Review and Approval.
- J. Once the Priority Listing is approved all project determinations are concluded and the Review and Rank Process is complete.
- K. The approved Priority Listing shall be publicly posted on the CoC website in accordance with the timeline stated in the Continuum of Care Program NOFA.

#### APPENDIX A: REALLOCATION OF FUNDS

HUD expects CoCs to reallocate funds from non- and/or under-performing projects to higher priority community needs that align with HUD priorities and goals. Reallocation involves using funds in whole or part from existing eligible renewal projects to create one or more new projects. In the recent competitions, HUD allowed CoCs to use the reallocation process to create:

- New permanent supportive housing projects that serve chronically homeless individuals and families, including unaccompanied youth.
- New rapid rehousing projects for homeless individuals and families, including unaccompanied youth, coming directly from the streets or emergency shelter or fleeing domestic violence.
- New projects for dedicated HMIS.
- New Supportive Services Only (SSO) projects for centralized or coordinated entry systems.

HUD expects that CoCs will use performance data to decide how to best use the resources available to end homelessness within the community. CoCs should reallocate funds to new projects whenever reallocation would reduce homelessness. Communities should use CoC approved scoring criteria and selection priorities to determine the extent to which each project is still necessary and address the policy priorities listed in the NOFO. Recent NOFOs have stated that HUD would prioritize those CoCs that have demonstrated a capacity to reallocate funding from lower performing projects to higher performing projects through the local selection process. In previous competitions, HUD assigned four points in the Collaborative Applicant Application to reallocation.

The Sacramento Continuum of Care has identified a need for additional permanent housing, with targeted services for youth, seniors, or individuals with conditions contributing to higher risk of COVID-19 infection (as identified by the CDC).

Reallocated funding shall be prioritized for projects which clearly and concretely address these needs.

#### Voluntary Reallocation

In order to encourage projects to voluntarily align themselves with HEARTH Act goals and local priorities regarding housing and service provision, existing projects that voluntarily wish to convert their project to permanent housing or another eligible new project type as defined by HUD in the Continuum of Care Competition Notice of Funding Opportunity will be given the first option in accessing the funds reallocated from their existing project to create a new project (note that the new project funding request cannot exceed the funding available via the existing project). If the agency does not wish to use voluntarily reallocated funds for a new project, the funds will be released back into the common pool for the entire CoC.

Any such project may request reallocation and exercise the option to access funding through written notice to the panel, which should be sent to

<u>Sacramento@homebaseccc.org</u>. The project must submit a new project application and if the panel determines the new project application to be of reasonable quality, then the project may be given full points in the new project scoring tool factor 2B, *Ready to Start*, scoring factor.

#### APPENDIX B: SUPPLEMENTAL PROJECT FUNDING

In some circumstances there may be an opportunity after the application deadline for programs to submit application materials for additional funding. The Sacramento Continuum of Care will issue a Supplemental Project Application when:

- 1. After receiving all project applications it appears there is additional funding available; or,
- 2. After conducting the threshold review of the submitted project applications it appears there is additional funding available; or,
- 3. After conducting the review and rank, the Panel has recommended a program for reallocation and there are not adequate new project applications for those funds.

In the event that Supplemental Applications are required, the Collaborative Applicant will:

- Email the CoC and other interested parties (all homeless service and housing providers in the CoC area) with specifics regarding how much money is available and which type of programs qualify.
- The Collaborative Applicant will provide technical assistance and guidance, as needed, to ensure applicants understand the funding requirements.
- Any additional applications for these funds will be due as soon as possible after this email is distributed, as determined by the NOFA submission deadline.
- The Review and Rank Panel will reconvene either via telephone, video conference, or in person depending on availability and convenience to evaluate the applications.

For this type of process, the timeline will be extremely short and may make an application burdensome; however, expanding an already submitted application, applying in collaboration, and a community consensus on how to spend the funds are also viable options.

### DRAFT 2022 Renewal Project Scoring Tool

| Summary of Factors & Point Allocations |                         |  |
|--|-------------------------|--|
| 1. Threshold Factors                   | N/A                     |  |
| 2. Housing Performance                 | 18 points               |  |
| 3. Income Performance                  | 14 points               |  |
| 4. Utilization Performance             | 22 points               |  |
| 5. Severity of Need and Service        | 20 points               |  |
| Quality                                |                         |  |
| 6. Compliance                          | 12 points               |  |
| 7. Community                           | 11 points               |  |
| 8. Enhancing Capacity                  | 3 points                |  |
| 9. BONUS Factors                       | 11 points               |  |
| TOTAL                                  | 100 points (+ 11 bonus) |  |

### 1. THRESHOLD FACTORS

| Name  | Description   | Met/Not Met   |  |
|---|---|---|--|
| Housing First   | The project's policies include a commitment to identifying and lowering its barriers to housing, in line with a Housing First approach.   |   |  |
| Coordinated Entry   | The project will participate in coordinated entry to the extent possible for this project type, as demonstrated by its policies and procedures.   |   |  |
| HMIS  | The project will enter data for all CoC-funded beds into HMIS (or parallel database for domestic violence services).  | Met/Not Met   |  |
| Successful<br>Drawdown  | If the project is under contract with HUD, then<br>the project has made at least one successful<br>drawdown of federal funds as of the time of this<br>application was submitted.   | has made at least one successful<br>of federal funds as of the time of this Met/Not Met |  |
| Client Participation<br>in Project Design<br>and Policymaking | individual in feedback and decision-making  |   |  |
| Basic Compliance<br>with HUD Policies                         | The agency has adequate internal financial controls, adequate record maintenance and management, and adequate policies regarding termination of assistance, client appeals, ADA and fair housing requirements, and confidentiality. | Met/Not Met   |  |

| Eligible Applicants                         | The project will only accept new participants if<br>they can be documented as eligible for this<br>project's program type based on their housing<br>and disability status.   | Met/Not Met |
|---|--|-------------|
| Equal Access                                | The project provides equal access and fair<br>housing without regard to sexual orientation,<br>gender identity, local residency status, or any<br>other protected category.  |             |
| Match                                       | MatchAgency demonstrates 25% match per grant.  |             |
| Affirmatively<br>Furthering Fair<br>Housing | Agency actively prevents discrimination by<br>affirmatively accommodating people based on<br>differences in: race, color, ancestry, or national<br>origin; religion; mental or physical disability; sex,<br>gender, or sexual orientation; marital or familial<br>status, including pregnancy, children, and<br>custody arrangements; genetic information;<br>source of income; other arbitrary characteristics<br>not relevant to a person's need or suitability for<br>housing | Met/Not Met |
| Required but not scored                     |  |             |

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### 2. HOUSING PERFORMANCE (18 24 pts.)

| Name                        | Description   | Sources           | Score   |
|-----------------------------|---|-------------------|---|
|                             | Permanent Supportive Housing (  | PSH)              |   |
|                             | Successes in Housing Retention for PSH projects are measured by the percentage of individual project participants that remain in permanent housing <b>or</b> exit as "living-leavers"   |                   | ≥ 99% = <mark>18</mark><br>24                     |
|                             | to permanent housing at the end of the evaluation period.   | $\frown$          | 98% - 98.9%<br>= <mark>15</mark><br><del>18</del> |
|                             | For projects that serve families or small<br>projects, that experience an outsized impact<br>on program performance for this factor,<br>projects are invited to discuss the number of<br>households that left the project and how           |                   | 96% - 97.9%<br>= <b>12</b>                        |
| 2A.<br>Housing<br>Retention | sing unsuccessfully under the <i>exceptional</i>  | APR Q5<br>APR Q23 | 90% - 95.9%<br>= <mark>9</mark><br><del>6</del>   |
|                             | <i>circumstances</i> supplemental question for<br>consideration by the panel. <sup>1</sup> In an exception<br>to the Review and Rank Policy, at section<br>IV. Review and Rank Process, paragraph J:<br>• If one household left the program |                   | 85% -<br>89.5%= <mark>6</mark><br>-4              |
|                             | to increase a project's scaled score<br>and award up to 15 points to the<br>project, and  |                   | 80% -<br>84.9%= <mark>3</mark><br><del>2</del>    |
|                             | <ul> <li>If two households left the program<br/>unsuccessfully, the panel may elect<br/>to increase a project's scaled score<br/>and to award up to 9 points.</li> </ul>  |                   | < 79.9% = <b>0</b>                                |

| Rapid Re-Housing (RRH) and Joint Transitional Housing and Rapid Re-Housing<br>(TH-RRH) |  |                   |   |
|--|--|-------------------|---|
|  | Successes in Housing Placement for RRH and TH-RRH projects are measured by the | APR Q5<br>APR Q23 | ≥ 90% = <mark>18</mark><br><del>2</del> 4 |

<sup>&</sup>lt;sup>1</sup> Feedback was received about using households instead of individuals to show performance so that larger families don't have an outsized-impact on program performance, but APRs do not provide information by household, only by program participant.

|                             | number of participants who exited to a<br>Permanent Housing destination from the<br>total number of all participants in the project. | 85-89.9% =<br>16<br><del>22</del>                |
|-----------------------------|--|--|
|                             | For projects that serve families, that<br>experience an outsized impact on program<br>performance, projects are invited to discuss   | 80% - 84.9%<br>= 12<br>-18                       |
| 2B.<br>Housing<br>Placement | under the <i>exceptional circumstances</i><br>supplemental question for consideration by<br>the panel.                               | 75% - 79.9%<br>= <mark>9</mark><br><del>12</del> |
|                             | Participants that passed away during the measurement period do not impact the project's performance.                                 | 70% - 74.9%<br>= 5<br>6                          |
|                             |  | < 70% = <b>0</b>                                 |

## 3. INCOME PERFORMANCE (14 10 pts.)

| Name                    | Description   | Sources   | PSH<br>Scale         | RRH and<br>TH-RRH<br>Scale | Score                |                   |
|-------------------------|---|---|----------------------|----------------------------|----------------------|-------------------|
|                         | Successes in increasing or maintaining participant income     |   | ≥ 85%                | ≥ 75%                      | <mark>6</mark><br>-4 |                   |
| 3A.                     | income, or increased income,<br>from project entry to exit or |   | 70% -<br>84.9%       | 60% -<br>74.9%             | 4<br>3               |                   |
| Increase or<br>Maintain |   | intain income, or increased income, APF<br>from project entry to exit or APF<br>Annual Assessment 019 | APR Q5<br>APR<br>Q19 | 55% -<br>69.9%             | 45% -<br>59.9%       | 3<br><del>2</del> |
| Income                  |   |   | 40% -<br>54.9%       | 30% -<br>44.9%             | <b>2</b><br>1        |                   |
| period                  |   | period do not impact the  | < 40%                | < 30%                      | 0                    |                   |
|                         |   | Г Г   |                      |                            |                      |                   |
|                         |   |   |                      | ≥ 9                        | 5% = <mark>6</mark>  |                   |

| 3B. Non-<br>Cash<br>Mainstream<br>Benefits | Successes in connecting<br>participants with non-cash<br>mainstream benefits are<br>measured by the percentage of<br>adult stayers/leavers with non-<br>cash benefit sources, excluding | APR<br>Q5<br>APR<br>Q20 | ≥ 95% = 6<br>-4<br>90% - 94.9% = 4<br>3<br>80% - 89.9% = 3<br>2 |
|--|---|-------------------------|---|
|  | cash benefit sources, excluding   |                         | 2   |

|                         | all stayers not yet required to have an annual assessment.  |                         | 75% - 79.9% <b>= 2</b><br>1 |
|-------------------------|---|-------------------------|-----------------------------|
|                         | Adult participants that passed<br>away during the measurement<br>period do not impact the<br>project's performance.                   |                         | < 75% <b>= 0</b>            |
|                         | Successes in connecting<br>participants with health<br>insurance are measured by the  |                         | ≥ 95% = <b>2</b>            |
| 3C. Health<br>Insurance | percentage of stayers/leavers<br>with health insurance,<br>excluding all stayers not yet<br>required to have an annual<br>assessment. | APR<br>Q5<br>APR<br>Q21 | 90% - 94.9% <b>= 1</b>      |
|                         | Participants that passed away<br>during the measurement period<br>do not impact the project's<br>performance                          |                         | < 90% <b>= 0</b>            |

### 4. UTILIZATION PERFORMANCE (22 20 pts.)

| Name  | Description  | Sources                       | Score                     |
|---|--|-------------------------------|---------------------------|
| 4A. Bed<br>and/or Unit<br>Utilization<br>4A. Bed<br>and/or Unit<br>Utilization<br>4A. Bed<br>and/or Unit<br>Utilization<br>5 beds in<br>each quart<br>of beds pro | For Projects Serving Single Adults in<br>Shared Housing: Successes in achieving<br>full utilization for PSH, RRH, and TH-RRH   | APR Q7b<br>APR Q8b<br>E-Snaps | ≥ 95% = <b>12</b>         |
|   | projects that serve single adult households<br>in units that have more than one bed are<br>best measured by looking at the <b>number</b><br>of <b>beds</b> in use on the last Wednesday of |                               | 90% - 94.9%<br>= <b>9</b> |
|   | each quarter, divided by the total number<br>of beds promised in e-snaps.  |                               | 85% - 89.9%<br><b>= 6</b> |
|   | For Projects Serving Adults in Non-<br>Shared Housing and/or Families:<br>Successes in achieving full utilization for<br>PSH, RRH, and TH-RRH projects that                                |                               | 80% - 84.9%<br>= <b>3</b> |

|                               | serve adults in non-shared units or families<br>are best measured by looking at the<br><b>number of units</b> in use on the last<br>Wednesday of each quarter, divided by the<br>total number of units promised in e-snaps.          |   | < 80% <b>= 0</b>            |
|-------------------------------|--|---|-----------------------------|
|                               |  |   | ≥ 95% = <mark>8</mark><br>€ |
| 4B. Grant<br>Spenddown        | Successes in Grant Spenddown are<br>measured by dividing the amount of money<br>drawn down from e-LOCCs during the<br>project's most recently completed contract<br>by the amount on the corresponding GIW.                          | the amount of money e-LOCCs<br>OCCs during the<br>ly completed contract E-Snaps | 85% - 94.9%<br>= 5<br>-4    |
|                               |  |   | 75% - 84.9%<br>= 3<br>2     |
|                               |  |   | < 75% <b>= 0</b>            |
| 4C.<br>Quarterly<br>Drawdowns | Successes in Grant Spenddown are also<br>measured by the number of drawdowns<br>made by projects, and depend on projects<br>drawing down quarterly (i.e., occurring at<br>least once in each three-month period<br>during the year). | RFI   | Up to <b>2</b> points       |
|                               | Award 0.5 points for each successful<br>quarterly drawdown over the competition<br>period.   |   |                             |

### 5. SEVERITY OF NEED AND SERVICE QUALITY (20 pts.)

| Name Description | Sources | Score |
|------------------|---------|-------|
|------------------|---------|-------|

| 5A. Chronic<br>Homeless                                 | Successes in Chronic Homelessness are<br>measured as follows: Permanent<br>supportive housing that is 100%<br>Dedicated or DedicatedPLUS will be<br>awarded 3 points.   | E-snaps                                   | Up to <b>3</b><br>points  |
|---|---|---|---------------------------|
| 5B. Severity of<br>Needs &<br>Special<br>Considerations | <ul> <li>Full points will be awarded for projects that meet one or more of the following criteria:</li> <li>Permanent supportive housing; or</li> <li>Housing project with targeted services for youth, seniors, those experiencing health conditions that make them vulnerable to COVID-19 as defined by the CDC, or survivors of domestic violence.</li> <li>Full points may also be awarded for projects that do not meet the criteria above and include a compelling explanation about the quantifiable gap their project fills in the community.</li> </ul>                              | RFI<br>APR Q5a<br>Q13a1,<br>Q14a,<br>Q27a | Up to <b>12</b><br>Points |
| 5C. Quality of<br>Services                              | <ul> <li>Successes in Quality of Services are measured based on the project's narrative explaining to extent to which the project provides services that:</li> <li>Offer ongoing support to stay housed,</li> <li>Are comprehensive and well-coordinated,</li> <li>Are thoughtfully matched to the needs of the target population, and</li> <li>Are delivered by an adequate number of appropriately trained staff (i.e., in your response, please include the project's (1) current case manager to client ratio, (2) number of additional staff and/or volunteers supporting the</li> </ul> | RFI                                       | Up to <b>5</b><br>points  |

| work of case managers, (3) a brief<br>description of your rationale for this<br>approach to case management).  |  |
|--|--|
| Successes for projects provided by Victim<br>Service Providers are also measured<br>based on the project's narrative explaining<br>the extent to which the project provides<br>services that improve the safety for<br>survivors of domestic violence, dating<br>violence, sexual assault, stalking, and/or<br>human trafficking.<br>Full points will be available to domestic<br>violence projects that provide objective<br>data on how they improved participant<br>safety. |  |

### 6. <u>COMPLIANCE (12 pts.)</u>

| Name                                   | Description   | Sources  | Score                    |
|--|---|--|--------------------------|
| 6A. Audit or<br>Monitoring<br>Findings | The project must report <b>all</b><br><b>irregularities</b> resolved or unresolved<br>(e.g., a concern or finding from HUD, a<br>recommendation or finding from SSF<br>(sub-recipients only), a significant<br>deficiency or material weakness from a<br>financial audit, or any type of finding<br>from another funding entity ex. City or<br>County) revealed by any audits or<br>monitoring for <b>this project</b> (including<br>shared common spaces for projects co-<br>located with non-CoC-funded units).<br>Projects that have irregularities must<br>provide (1) relevant documentation<br>identifying those irregularities (e.g.,<br>highlighted sections of a financial<br>report), and (2) the project's plan to<br>rectify program irregularities. If<br>irregularities have been rectified,<br>projects should include any available<br>confirmation letters from relevant<br>oversight entities (e.g. SSF, HUD, | All HUD,<br>SSF,<br>financial<br>audits, or<br>audits/<br>monitoring<br>from other<br>funding<br>entities<br>from the<br>last 2<br>years.<br>RFI | Up to <b>8</b><br>points |

|                      | Financial entity, Local Jurisdiction);  |        |                   |
|----------------------|---|--------|-------------------|
|                      | <ul> <li>Award full points (8 points) for the project if:</li> <li>The project was not audited or monitored; or</li> <li>If no irregularities have been revealed by any audits or monitoring for this project.</li> </ul>   |        |                   |
|                      | <ul> <li>Award up to 8 points for the project if:</li> <li>If a project adequately submits relevant documentation identifying any irregularities and provides an adequate explanation to show how any irregularities have been or will be addressed. An adequate explanation includes (1) a brief explanation of the steps the project will take to address the irregularities, (2) the timeline these steps will be completed on, and (3) how the project will avoid similar findings in the future.</li> <li>If a project is currently disputing findings from an audit or monitoring and submits (1) a brief explanation of the irregularities, and (2) the most updated timeline available for disputing the irregularities.</li> </ul> |        |                   |
|                      | were found for this project and the<br>project provided documentation, but the<br>project does not provide an adequate<br>explanation.  |        |                   |
|                      | Award <b>no points</b> if the project does not<br>submit any documentation (e.g.,<br>confirmation letters) from oversight<br>entities to support this criteria.   |        |                   |
| 6B. Accurate<br>Data | Successes in Accurate Data are measured using the percent of data   | APR Q6 | < 5% error =<br>2 |

|                 | recorded as either missing, don't know, client refused to answer, and/or unable   |         | 5% - 10%<br>error <b>= 1</b>  |
|-----------------|---|---------|-------------------------------|
|                 | to calculate, where the lower percentage<br>the better. Projects with less than 5%<br>data inaccuracy should receive full<br>points.  |         | > 10% error =<br><b>0</b>     |
|                 | Successes in Timely Data are measured using the average length of time (in  |         | < 5 days <b>= 2</b>           |
| 6C. Timely Data | days) between when a client enters or exits the project, and when the project   | APR Q6e | 5 days – 8<br>days <b>= 1</b> |
|                 | records the entry or exit in HMIS.<br>Projects that entered client entries/exits<br>into HMIS in under 5 days received full<br>points |         | > 8 days = <b>0</b>           |

# 7. COMMUNITY (11 pts.)

| Name   | Description  | Sources                    | Score                    |
|--|--|----------------------------|--------------------------|
| 7A.<br>Participation<br>in CoC<br>Activities | Successes in Participation in CoC<br>Activities are measured based on the<br>agency's attendance, participation, and<br>leadership at CoC events, meetings,<br>committees, forums, and projects, with a<br>focus on activities that took place since<br>the last NOFO. Typically, full points should<br>be awarded if the agency meaningfully<br>participated in at least 4 voluntary events<br>over the course of the year, or if the<br>agency led at least 1 successful event,<br>training, or initiative over the course of the<br>year. | RFI                        | Up to <b>4</b><br>points |
| 7B.<br>Mandatory<br>Training                 | Successes in Mandatory Training are<br>based on whether the agency<br>demonstrated regular attendance at<br>mandatory training events by attending at<br>least one such event per quarter.   | RFI<br>SSF Staff<br>Report | Up to <b>2</b><br>points |
| 7C. Local<br>Competition<br>Deadlines        | Award full points if the project met all local competition deadlines, including deadlines for turning in supporting documents and attachments.   | HomeBase<br>analysis       | Up to <b>5</b><br>points |

| Deduct <u>up to 5 points</u> if project was late in finalizing APRs without valid reason.   |  |
|---|--|
| Deduct 2 points if any portion of the local application was turned in <u>up to</u> 24 hours late.   |  |
| Deduct 5 points if any mandatory portion of the local application was more than 24 hours late.  |  |
| If any mandatory portion of the local<br>application was more than 72 hours late,<br>the project may be disqualified at the<br>discretion of the Panel. |  |

### 8. ENHANCING CAPACITY (3 pts.)

| Name   | Description  | Sources    | Score                 |
|--|--|------------|-----------------------|
| 8A.<br>Transitions<br>to<br>Permanent<br>Housing | Success is measured by PSH programs that<br>effectively facilitate successful flow from<br>PSH to other permanent housing (including<br>housing with rental subsidy), evidenced by<br>percent of individuals served that exit to<br>other permanent housing. | APR<br>Q23 | Up to <b>3</b> points |

### 9. BONUS FACTORS (11 3 pts.)

| Name | Description | Sources | Score |
|------|-------------|---------|-------|
|------|-------------|---------|-------|

| SACRAMENTO CONTINUUM OF CARE                       |  |                               |                       |
|--|--|-------------------------------|-----------------------|
|  | <ul> <li>If this project participates in Coordinated Entry:</li> <li>Award full points to projects who reported filling 100% of project vacancies through CE.</li> <li>Award no points to projects who reported filling less than 100% of project vacancies through CE.</li> </ul>   |                               |                       |
| 9A. BONUS<br>Coordinated<br>Entry<br>Participation | <ul> <li>If this project does not currently participate in Coordinated Entry:</li> <li>Award up to two points if this project provides an explanation of (1) the barriers (e.g., restrictions from other funders) that prevent the project from being fully integrated into Coordinated Entry, and (2) the steps the project has taken over the competition year towards Coordinated Entry integration.</li> </ul>   | RFI<br>SSF<br>Staff<br>Report | Up to <b>3</b> points |
| 9B. BONUS<br>Unique<br>Funding                     | Award <b>full points</b> to housing projects that<br>leverage a source of one-time or on-going<br>funding that may not be used to serve<br>individuals experiencing homelessness if<br>this project is defunded. The funding can<br>be in any amount to meet this criterion.<br>One example of funding meeting these<br>criteria is project-based Housing Choice<br>Vouchers because this funding is not<br>limited to individuals experiencing<br>homelessness. If the project loses CoC<br>funding, the project-based vouchers may<br>not be used to serve individuals<br>experiencing homelessness. | RFI                           | Up to <b>3</b> points |
|  | Identifying and Addressing Barriers: Based<br>on the degree to which the organization:<br>1) Award <b>up to one point</b> if the<br>organization has identified barriers<br>to housing and services that are<br>specifically faced by BIPOC  |                               |                       |

| 9C. BONUS<br>Organizational<br>Commitment<br>to Racial<br>Equity | individuals or that disproportionately<br>affect BIPOC individuals; and<br>2) Award <b>up to one point</b> if the<br>organization has taken concrete<br>steps to address the identified<br>barriers and lessen their impact on<br>BIPOC individuals. Steps described<br>should be designed to address the<br>specific experiences of BIPOC<br>individuals.  | RFI | Up to <b>5</b> points |
|--|---|-----|-----------------------|
|  | <ul> <li>Award up to three points for the organization's explanation of its commitment to serving Black, Indigenous, and other People of Color (BIPOC) since its founding, as indicated by its original mission statement (or equivalent guiding statement) and the racial and ethnic demographics of its original leadership team.</li> <li>Absent a commitment to serving BIPOC individuals since the organization's start, awards points based on the extent to which the agency demonstrates a commitment to measuring and improving its response to racial disparities and biases. Specifically:</li> <li>Award up to one point if at least 25% of salaried leadership team and board of directors members identify as Black, Indigenous, or other people of color.</li> <li>Award up to two points to the extent that the organization describes concrete steps that have been taken to build commitment to racial equity practices within the organization's approach serving individuals experiencing homelessness.</li> <li>These may include but are not limited to:</li> </ul> |     |                       |

| SACRAMENTO CONTINUUM OF CARE  |  |  |
|---|--|--|
| <ul> <li>Opportunities for<br/>cultural competency<br/>and implicit bias<br/>trainings;</li> <li>Policies related to<br/>language accessibility;<br/>and</li> <li>Strategies to ensure<br/>that the salaried<br/>leadership team is<br/>representative of the<br/>racial and ethnic<br/>populations that the<br/>organization serves.</li> <li>The applicant must also<br/>describe the impact or<br/>results of their strategies.</li> </ul> |  |  |

### DRAFT 2022 New Project Scoring Tool

| Summary of Factors & Point Allocations  |            |  |
|---|------------|--|
| 1. Threshold Factors  | N/A        |  |
| 2. Housing  | 25 points  |  |
| 3. Services   | 20 points  |  |
| 4. Agency Capacity  | 25 points  |  |
| <ul> <li>5. Prioritization, option of:</li> <li>a. Prioritization for New Projects<br/>Except for DV Bonus</li> <li>b. Prioritization for DV Bonus</li> </ul> | 25 points  |  |
| 6. Community  | 10 points  |  |
| TOTAL   | 105 points |  |

# 1. THRESHOLD FACTORS

| Name  | Description   | Met/Not Met |
|---|---|-------------|
| Housing First                               | The project's policies will include a commitment to identifying and lowering its barriers to housing and provide housing and services in line with a Housing First approach.  | Met/Not Met |
| Coordinated<br>Entry                        | The project will participate in coordinated entry to the full extent possible for this project type.  | Met/Not Met |
| HMIS  | The project will enter data for all CoC-funded beds into HMIS (or parallel database for domestic violence services).  | Met/Not Met |
| Formerly<br>Homeless<br>Input               | The agency includes homeless or formerly homeless individual in feedback and decision-making processes.   | Met/Not Met |
| Basic<br>Compliance<br>with HUD<br>Policies | The agency has adequate internal financial controls,<br>adequate record maintenance and management, and<br>adequate policies regarding termination of assistance,<br>client appeals, ADA requirements, and confidentiality. | Met/Not Met |
| Eligible<br>Clients                         | The project will only accept new participants if they can<br>be documented as eligible for this project's program type<br>based on their housing and disability status.   | Met/Not Met |
| Eligible<br>Applicant                       | Neither the applicant nor the sub-recipients (if any) are for-profit entities.  | Met/Not Met |
| Equal Access                                | The project will provide equal access and fair housing without regard to sexual orientation, gender identity, or local residency status.  | Met/Not Met |

| Match  | Agency will be able to provide 25% match per grant.  | Met/Not Met |
|--|--|-------------|
| Affirmatively<br>Furthering<br>Fair Housing  | Agency will actively prevent discrimination by affirmatively<br>accommodating people based on differences in: race,<br>color, ancestry, or national origin; religion; mental or<br>physical disability; sex, gender, or sexual orientation;<br>marital or familial status, including pregnancy, children,<br>and custody arrangements; genetic information; source of<br>income; other arbitrary characteristics not relevant to a<br>person's need or suitability for housing | Met/Not Met |
| Budget                                       | Project has made a good faith effort to complete the budget template provided, showing both CoC and non-CoC funding sources for the project.   | Met/Not Met |
| For DV Bonus<br>Projects Only:<br>Serving DV | Projects Only: trafficking who came from sheltered or unsheltered  |             |

# 2. HOUSING (25 pts.)

| Name   | Description  | Sources | Score                     |
|--|--|---------|---------------------------|
| 2.A. Fully<br>Described<br>and<br>Appropriate<br>Housing | <ul> <li>Award points for a housing design that:</li> <li>is clearly and fully described</li> <li>has a layout or features that are thoughtfully matched to the target population</li> <li>is strategically located to meet the needs of the target population</li> <li>is physically accessible to persons with disabilities</li> <li>will help maximize client choice in the CoC (e.g. by including a plan to evaluate each client's needs, strengths, and preferences in order to determine which mainstream benefits and/or jobs the client could qualify for)</li> <li>Additionally, for Victim Service Providers:</li> <li>is designed to protect the safety of the population they serve</li> </ul> | RFI     | Up to <b>10</b><br>points |

| 2.B. Ready to<br>Start   | <ul> <li>Award points if the project will be ready to begin housing clients within 3 months of receiving HUD funding. Consider:</li> <li>Whether the agency has adequately described how the project will acquire the necessary housing for the project type. For RRH, this may include landlord engagement strategies;</li> <li>Whether the project site faces regulatory obstacles such as tenant displacement, environmental issues, or zoning issues;</li> <li>Whether the agency's current staff has the capacity to begin preparing for this project;</li> <li>Whether the agency already has policies and procedures that can be used as-is or easily adapted for use in a CoC-funded project</li> </ul> | RFI | Up to <b>5</b><br>points  |
|--------------------------|---|-----|---------------------------|
| 2.C. Program<br>Outcomes | <ul> <li>Award points if:</li> <li>The project's goals are realistic and sufficiently challenging given the scale of the project</li> <li>Outcomes are measurable and appropriate to the population being served, and must meet minimum CoCadopted targets, including: <ul> <li>At least 85% of clients experience positive housing outcomes</li> <li>At least 55% of adult clients maintain or increase their income from all sources</li> </ul> </li> <li>Prospective outcomes reflect actual performance outcomes from other projects administered by the applicant (as appropriate).</li> </ul>   | RFI | Up to <b>10</b><br>points |

## 3. SERVICES (20 pts.)

| Name | Description | Sources | Score |
|------|-------------|---------|-------|
|------|-------------|---------|-------|

| 3.A. Appropriate<br>Supportive<br>Services | <ul> <li>Award points for services that: <ul> <li>use a Housing First approach,</li> <li>offer ongoing support to stay housed,</li> <li>are comprehensive and well-coordinated,</li> <li>include culture-specific elements, and</li> <li>are thoughtfully matched to the target population</li> </ul> </li> <li>For projects that will be referring specific types of clients to specific outside services, award points if the project explains a concrete plan for referrals, giving examples of: <ul> <li>Who will be referred;</li> <li>The agencies that will accept referrals;</li> <li>The types of services to be provided; and</li> <li>The logic behind the agency's referral scheme</li> </ul> </li> <li>For Victim Service Providers award points for services that improve the safety for survivors of domestic violence, dating violence, sexual assault, stalking, and/or</li> </ul> | RFI | Up to <b>10</b><br>points |
|--|---|-----|---------------------------|
|  |   |     |                           |
| 3.B. Relevant<br>Experience                | Award points if the agency submitting this<br>application has demonstrated, through<br>past performance, the ability to<br>successfully carry out the work proposed<br>and has successfully served homeless<br>people as a particular group.<br>Consider the experience of the agency in<br>handling a similar project (e.g. if the   | RFI | Up to <b>10</b><br>points |
|  | project will involve relocation of tenants,<br>what experience does the agency have<br>with relocation).  |     |                           |

## 4. AGENCY CAPACITY (20 pts.)

| Name                    | Description  | Sources            | Score                     |
|-------------------------|--|--------------------|---------------------------|
| 4.A. Budget             | <ul> <li>Award points based on the bullet points below:</li> <li>Project has submitted a budget that is clear, complete, and easy to read.</li> <li>The budget shows that the project will have enough resources to provide high-quality, reliable services to the target population.</li> <li>The budget shows that the project will leverage significant outside resources (funding, staff, building space, volunteers, etc.) rather than rely entirely on CoC funds.</li> <li>The budget shows that the project is taking appropriate measures to contain costs.</li> </ul>   | Budget<br>RFI      | Up to <b>5</b><br>points  |
| 4.B. Agency<br>Capacity | Award points if agency:<br>Has successfully handled at least one other<br>federal grant or other major grant of this<br>size and complexity, either in or out of the<br>CoC (or can otherwise demonstrate that it<br>can successfully manage complex reporting<br>requirements).<br>• Has sufficient fiscal capacity to<br>manage the grant, including:<br>• internal financial controls<br>• grant match tracking<br>• well-maintained records<br>• oversight by a board of<br>directors<br>• a strategy for documenting<br>eligible costs<br>• a strategy for ensuring<br>adequate grant drawdowns<br>• Is large enough to handle the<br>expected client case load;<br>• Is familiar with innovative or<br>evidence-based practices;<br>• Includes at least one person with<br>formal training and/or education in<br>a relevant social services field | e-LOCCs<br>E-Snaps | Up to <b>10</b><br>points |

| 4.C. Audit and<br>Monitoring<br>Findings | <ul> <li>The agency must report all irregularities resolved or unresolved (e.g., a concern or finding from HUD, a recommendation or finding from SSF (subrecipients only), a significant deficiency or material weakness from a financial audit, or any type of finding from another funding entity ex. City or County) revealed by any audits or monitoring for similar projects.</li> <li>Agencies that have irregularities for similar projects must provide (1) relevant documentation identifying those irregularities (e.g., highlighted sections of a financial report), and (2) the project's plan to rectify program irregularities. If irregularities have been rectified, agencies should include any available confirmation letters from relevant oversight entities (e.g. SSF, HUD, Financial entity, Local Jurisdiction);</li> <li>Award full points (5 points) for the project if: <ul> <li>If the agency can show no irregularities for similar projects.</li> </ul> </li> <li>Award up to 5 points for the project if: <ul> <li>If the agency adequately submits relevant documentation identifying any irregularities and provides an adequate explanation to show how any irregularities have been or will be addressed. An adequate explanation of the steps the agency will take to address the irregularities, (2) the timeline these steps will be completed on, and (3) how the agency will avoid similar findings in the future.</li> <li>If the agency is currently disputing findings from an audit or monitoring for a similar project and submits (1) a brief explanation of the irregularities, (2) the timeline these explanation of the irregularities, (3) how the agency will avoid similar findings in the future.</li> </ul> </li> </ul> | All HUD,<br>SSF,<br>financial<br>audits, or<br>audits/<br>monitoring<br>from other<br>funding<br>entities<br>from the<br>last 2<br>years.<br>RFI | Up to <b>5</b><br>points |
|--|--|--|--------------------------|
|--|--|--|--------------------------|

|   | and (2) the most updated timeline available for disputing the irregularities.  |     |                   |
|---|--|-----|-------------------|
|   | Award <b>up to 3 points</b> if irregularities were<br>found for similar projects and the agency<br>provided documentation, but the agency<br>does not provide an adequate explanation.   |     |                   |
|   | Award <b>no points</b> if the agency does not<br>submit any documentation (e.g.,<br>confirmation letters) from oversight entities<br>to support this criteria.   |     |                   |
|   | Identification of Barriers: Based on the degree to which the organization:   |     |                   |
|   | <ol> <li>Award up to one point if the organization has identified barriers to housing and services that are specifically faced by BIPOC individuals or that disproportionately affect BIPOC individuals; (1 point) and</li> <li>Award up to one point if the organization has taken concrete steps to address the identified barriers and lessen their impact on BIPOC individuals. Strategies described should be designed to address the specific experiences of BIPOC individuals.</li> </ol> |     |                   |
| Factor 4D.<br>Organizational<br>Commitment<br>to Racial<br>Equity | BIPOC Representation in Leadership:<br>Award <b>up to three points</b> for the<br>organization's explanation of its commitment<br>to serving Black, Indigenous, and other<br>People of Color (BIPOC) since its founding,<br>as indicated by its original mission<br>statement (or equivalent guiding statement)<br>and the racial and ethnic demographics of<br>its original leadership team.  | RFI | Up to 5<br>points |
|   | Absent a commitment to serving BIPOC individuals since the organization's start, awards points based on the extent to which the agency demonstrates a commitment to  |     |                   |

### 5A. PRIORITIZATION FOR NEW PROJECTS EXCEPT DV BONUS (25 pts.)

If this application is for a <u>DV Bonus-funded</u> new project, please skip this section and move to the next.

| Name | Description | Sourc<br>es | Score |
|------|-------------|-------------|-------|
|      |             |             |       |

| 5.A.1.<br>Community<br>Priority                         | Award points if the project addresses the<br>priority need identified by the Advisory<br>Committee in 2019: Permanent Supportive<br>Housing, with targeted services for either<br>youth or seniors. <u>OR</u><br>Award points if the project addresses the<br>priority need identified by the CoC Board in<br>2021: Permanent Supportive Housing, with<br>targeted services for those experiencing<br>health conditions identified by the CDC as<br>making someone vulnerable to COVID-19.<br>For a full list of conditions, see <u>here</u> .<br>Please note that HUD may require that<br>Permanent Supportive Housing be<br>dedicated to persons experiencing Chronic<br>Homelessness.<br>Please note, projects can receive points for<br>both the Community Priority (5.A.1) and<br>HUD Priority (5.A.2) factors if they meet the<br>ariteria | E-<br>snaps<br>RFI | Up to <b>10</b><br>points |
|---|--|--------------------|---------------------------|
| 5.A.2. HUD<br>Priority                                  | <ul> <li>criteria.</li> <li>Award points if the project addresses the priority needs identified by HUD in 2021: <ul> <li>Permanent Supportive Housing or Rapid Re-Housing that leverages healthcare resources to support program participants (as documented with a written commitment from a health care organization); <u>OR</u></li> <li>Permanent Supportive Housing or Rapid Re-Housing, with Housing Choice Voucher (HCV) or other non-CoC funding for rental assistance of leasing.</li> </ul> </li> <li>Please note, projects can receive points for both the Community Priority (5.A.1) and HUD Priority (5.A.2) factors if they meet the criteria.</li> </ul>  | E-<br>snaps<br>RFI | Up to <b>5</b><br>points  |
| 5.A.3. Severity of<br>Needs & Special<br>Considerations | Award points to projects that will serve<br>population(s) with severe needs and<br>vulnerabilities (e.g. chronically homeless,   | RFI<br>APR         | Up to <b>10</b><br>points |

history of domestic violence), and will also fill an important gap in housing and services for persons experiencing homelessness in the Sacramento region (e.g., serving a unique population, leveraging certain funding, maintaining site based housing).

Applicants should specifically consider the needs and vulnerabilities of youth or seniors or for those experiencing health conditions identified by the CDC as making someone vulnerable to COVID-19. For a full list of conditions, see <u>here</u>.

### 5B. PRIORITIZATION FOR DV BONUS HOUSING (25 pts.)

**Use this section <u>instead of</u> the previous page** if the project is applying for DV Bonus funding. For all scoring purposes, "domestic violence" also includes dating violence, sexual assault, stalking, and/or trafficking.

| Name  | Description  | Source | Score                    |
|---|--|--------|--------------------------|
| 5.B.1.<br>How<br>Project<br>will<br>Address<br>Need | <ul> <li>Award points for each of the following items:</li> <li>Project provides data describing the CoC's population of domestic violence survivors</li> <li>Project explains how it proposes to meet the unmet needs of domestic violence survivors, especially with survivors who come from unsheltered situations.</li> <li>The project will have housing that is specifically designed to accommodate the needs of survivors.</li> <li>The project's staff has skills that are specifically needed to identify and locate survivors, or to persuade survivors to accept and enter housing.</li> <li>The project's staff utilize trauma-informed and client-centered approaches.</li> <li>The project meets a priority need identified by HUD in 2021: <ul> <li>Permanent Supportive Housing or Rapid Re-Housing that leverages healthcare resources to support program participants (as documented with a written commitment from a health care organization); <u>OR</u></li> </ul> </li> </ul> | RFI    | Up to <b>5</b><br>points |

| SACRAMENTO CONTINUUM OF CARE                       |  |     |                           |
|--|--|-----|---------------------------|
|  | <ul> <li>Permanent Supportive Housing or<br/>Rapid Re-Housing, with Housing<br/>Choice Voucher (HCV) or other non-<br/>CoC funding for rental assistance of<br/>leasing.</li> </ul>  |     |                           |
| 5.B.2.<br>Previous<br>Performa<br>nce              | Award points if the agency has experience serving,<br>or demonstrates a plan to serve, victims who are<br>fleeing, or attempting to flee, domestic violence,<br>which includes dating violence, sexual assault,<br>stalking, and/or human trafficking, and that<br>experience, or plan, specifically shows that they<br>can serve victims who come from unsheltered<br>situations.                               | RFI | Up to <b>10</b><br>points |
| 5.B.3.<br>Ability to<br>Meet<br>Safety<br>Outcomes | <ul> <li>Award points for each of the following items:</li> <li>The project articulates a specific plan for<br/>ensuring that its residents will be safe from<br/>further domestic violence.</li> <li>The project sets quantitative safety targets<br/>that are appropriate and realistic.</li> <li>The project explains why it is likely to be<br/>able to achieve the targeted safety<br/>outcomes.</li> </ul> | RFI | Up to <b>10</b><br>points |

## 6. COMMUNITY (10 pts.)

| Name  | Description   | Sources | Score                    |
|---|---|---------|--------------------------|
| 6.A.<br>Participation<br>in CoC<br>Activities | Award points for the agency's attendance,<br>participation, and leadership at CoC events,<br>meetings, committees, forums, and projects,<br>with a focus on activities that took place since<br>the last NOFA. Typically, full points should be<br>awarded if the agency meaningfully<br>participated in at least 4 voluntary events over<br>the course of the year, or if the agency led at<br>least 1 successful event, training, or initiative<br>over the course of the year. | RFI     | Up to <b>5</b><br>points |

|  | Award full points if the project met all local competition deadlines, including deadlines for turning in supporting documents and attachments.  |                      |                          |
|--|---|----------------------|--------------------------|
| 6.B. Local<br>Competition<br>Deadlines | <ul> <li>Award 3 points if any portion of the local application was turned in <u>up to</u> 24 hours late.</li> <li>Award no points if any mandatory portion of the local application was <u>more than</u> 24 hours late.</li> <li>If any mandatory portion of the local application was more than 72 hours late, the project may be disqualified at the discretion of the Panel.</li> </ul> | Homebase<br>analysis | Up to <b>5</b><br>points |

## DRAFT 2022 Coordinated Entry New Project Scoring Tool

| Summary of Factors & Point Allocations  |            |  |
|---|------------|--|
| 1. Threshold Factors  | N/A        |  |
| 2. Coordinated Entry Project Design   | 32 points  |  |
| 3. Services   | 13 points  |  |
| 4. Agency Capacity  | 25 points  |  |
| <ul> <li>5. Prioritization, option of:</li> <li>a. Prioritization for New Projects<br/>Except for DV Bonus</li> <li>b. Prioritization for DV Bonus</li> </ul> | 25 points  |  |
| 6. Community  | 10 points  |  |
| TOTAL   | 105 points |  |

## 1. THRESHOLD FACTORS

| Name  | Description   | Met/Not Met |
|---|---|-------------|
| Coordinated<br>Entry<br>Understanding       | The applicant has communicated and coordinated with<br>the current Coordinated Entry (CE) Lead to learn about<br>how the current CE system operates and submits a<br>proposed project that demonstrates integration with the<br>current CE system [to be confirmed by CE Lead]. The<br>applicant also understands the HUD requirements for<br>Coordinated Entry, as demonstrated in this application. | Met/Not Met |
| Housing First                               | The project's policies will include a commitment to identifying and lowering its barriers to housing and provide housing and services in line with a Housing First approach.  | Met/Not Met |
| HMIS  | The project will enter data for all CoC-funded beds into HMIS (or parallel database for domestic violence services).  | Met/Not Met |
| Formerly<br>Homeless<br>Input               | The agency includes homeless or formerly homeless individual in feedback and decision-making processes.   | Met/Not Met |
| Basic<br>Compliance<br>with HUD<br>Policies | The agency has adequate internal financial controls,<br>adequate record maintenance and management, and<br>adequate policies regarding termination of assistance,<br>client appeals, ADA requirements, and confidentiality.   | Met/Not Met |
| Eligible<br>Applicant                       | Neither the applicant nor the sub-recipients (if any) are for-profit entities.  | Met/Not Met |

|  |   | []          |
|--|---|-------------|
| Equal Access                                 | The project will provide equal access and fair housing without regard to sexual orientation, gender identity, or local residency status.  | Met/Not Met |
| Match  | Agency will be able to provide 25% match per grant.   | Met/Not Met |
| Affirmatively<br>Furthering<br>Fair Housing  | Agency will actively prevent discrimination by<br>affirmatively accommodating people based on<br>differences in: race, color, ancestry, or national origin;<br>religion; mental or physical disability; sex, gender, or<br>sexual orientation; marital or familial status, including<br>pregnancy, children, and custody arrangements;<br>genetic information; source of income; other arbitrary<br>characteristics not relevant to a person's need or<br>suitability for housing | Met/Not Met |
| Budget                                       | Project has made a good faith effort to complete the budget template provided, showing both CoC and non-CoC funding sources for the project.  | Met/Not Met |
| For DV Bonus<br>Projects Only:<br>Serving DV | Project is 100% dedicated to serving victims who are<br>fleeing or attempting to flee domestic violence,<br>including dating violence, sexual assault, stalking,<br>and/or human trafficking who came from sheltered or<br>unsheltered situations. The project must follow a<br>Housing First model and utilize trauma-informed and<br>client-centered approaches.  | Met/Not Met |

## 2. COORDINATED ENTRY PROJECT DESIGN (32 pts.)

| Name   | Description   | Sources | Score                    |
|--|---|---------|--------------------------|
| 2.A.<br>Connections<br>to Current CE<br>System | <ul> <li>Award points if the proposed project will align with HUD requirements and local coordinated entry design:         <ul> <li>Does the project demonstrate knowledge and understanding of current Coordinated Entry System including processes and policies around eligibility, assessment, prioritization and match, placement, and the circumstances under which a Coordinated Entry referral can be denied?</li> </ul> </li> </ul> | RFI     | Up to <b>8</b><br>points |

| 2.B. Capacity<br>Building                  | <ul> <li>Award points if the proposed project will align with HUD requirements and local coordinated entry design: <ul> <li>Does the project demonstrate why and how it meets an existing need within the current Coordinated Entry system?</li> <li>Will the households served by this project be new to Coordinated Entry or receive additional (targeted) services through the proposed project beyond what is currently available?</li> <li>Does the project provide a connection to housing and/or services not currently available through the existing Coordinated Entry System?</li> </ul> </li> </ul>  | RFI | Up to <b>8</b><br>points |
|--|---|-----|--------------------------|
| 2.C.<br>Alignment<br>with Local<br>Process | <ul> <li>Award points if the proposed project<br/>demonstrates how it will connect into the<br/>current Coordinated Entry System: <ul> <li>Does the project demonstrate it will use<br/>community-approved assessment tools<br/>such as the VI-SPDAT?</li> <li>Does the project demonstrate how it<br/>will ensure that Coordinated Entry<br/>eligible households are document<br/>ready?</li> </ul> </li> <li>Does the project demonstrate how it<br/>will work with the Coordinated Entry<br/>Lead to ensure clients are identified<br/>and connected to appropriate housing<br/>vacancies quickly including using<br/>processes such as by-name list and<br/>case conferencing?</li> <li>Does the project demonstrate how it<br/>will adequately protect the safety of DV<br/>survivors during assessment and<br/>referral?</li> </ul> | RFI | Up to <b>8</b> points    |
| 2.D. Ready to<br>Start                     | <ul> <li>Award points if the proposed project will be ready to begin serving clients within 3 months of receiving HUD funding. Consider:</li> <li>Whether the agency has demonstrated communication/coordination with the CE Lead in developing the proposed projects (via letter of support or email correspondence);</li> </ul>   | RFI | Up to <b>8</b><br>points |

#### SACRAMENTO CONTINUUM OF CARE Whether the agency's current staff has • the capacity to begin preparing for this project; Whether the agency has a plan to train staff in local Coordinated Entry processes and tools (e.g., does the project indicate how many staff will be/are already trained in HMIS or the VI-SPDAT); and Whether the agency already has • policies and procedures that can be used as-is or easily adapted for use in this project.

## 3. SERVICES (13 pts.)

| Name                           | Description  | Sources | Score                    |
|--------------------------------|--|---------|--------------------------|
| 3.A. Referrals to<br>Services  | <ul> <li>Award points if the proposed project's services assessment process will align with HUD requirements and local Coordinated Entry design.</li> <li>Does the project have a plan for diverting clients who might be able to self-resolve? Evaluate how the project will connect clients to self-help resources when appropriate.</li> <li>Will the project actively evaluate which services a client would benefit from while waiting to be matched with housing (e.g., on-going case management), taking into account client preference?</li> </ul> | RFI     | Up to <b>4</b><br>points |
| 3.B. Services in the Community | <ul> <li>Award points if the proposed project will have adequate connections to the broader homelessness system of care. Consider:</li> <li>Does the project adequately describe their plan for connecting clients to services in the community? Award fewer points for general statements, more points for concrete descriptions of service linkages and delivery.</li> </ul>   | RFI     | Up to <b>6</b><br>points |

| SACRAMENTO CONTINUUM OF CARE        |   |     |                          |
|-------------------------------------|---|-----|--------------------------|
|                                     | <ul> <li>Does the project have existing relationships with service providers that are not currently available through the existing Coordinated Entry System?</li> <li>Does the project participate in any unique committees or partnerships that will be beneficial for connecting clients to services?</li> </ul>  |     |                          |
| 3.C. Agency<br>Resource<br>Training | <ul> <li>Award points if the proposed project will conduct or provide access to training for staff on available mainstream resources for which clients may qualify. Consider: <ul> <li>Agency plans for staff training on benefits eligibility;</li> <li>Agency capacity to provide connections to mainstream benefits, such as SOAR training.</li> </ul> </li> </ul> | RFI | Up to <b>3</b><br>points |

# 4. AGENCY CAPACITY (20 pts.)

| Name                    | Description  | Sources                    | Score                     |
|-------------------------|--|----------------------------|---------------------------|
| 4.A. Budget             | <ul> <li>Award points based on the bullet points below:</li> <li>Project has submitted a budget that is clear, complete, and easy to read.</li> <li>The budget shows that the project will have enough resources to provide high-quality, reliable services to the target population.</li> <li>The budget shows that the project will leverage significant outside resources (funding, staff, building space, volunteers, etc.) rather than rely entirely on CoC funds.</li> <li>The budget shows that the project is taking appropriate measures to contain costs.</li> </ul> | Budget<br>RFI              | Up to <b>5</b><br>points  |
| 4.B. Agency<br>Capacity | Award points if agency:<br>Has successfully handled at least one other<br>federal grant or other major grant of this size<br>and complexity, either in or out of the CoC (or<br>can otherwise demonstrate that it can  | e-<br>LOCCs<br>E-<br>Snaps | Up to <b>10</b><br>points |

|  | <ul> <li>successfully manage complex reporting requirements).</li> <li>Has sufficient fiscal capacity to manage the grant, including: <ul> <li>internal financial controls</li> <li>grant match tracking</li> <li>well-maintained records</li> <li>oversight by a board of directors</li> <li>a strategy for documenting eligible costs</li> <li>a strategy for ensuring adequate grant drawdowns</li> </ul> </li> <li>Is large enough to handle the expected client case load;</li> <li>Is familiar with innovative or evidence-based practices;</li> <li>Includes at least one person with formal training and/or education in a relevant social services field</li> </ul>  |  |                          |
|--|---|--|--------------------------|
| 4.C. Audit and<br>Monitoring<br>Findings | The agency must report <b>all</b><br><b>irregularities</b> resolved or unresolved (e.g., a<br>concern or finding from HUD, a<br>recommendation or finding from SSF (sub-<br>recipients only), a significant deficiency or<br>material weakness from a financial audit, or<br>any type of finding from another funding entity<br>ex. City or County) revealed by any audits or<br>monitoring for <b>similar projects</b> .<br>Agencies that have irregularities for similar<br>projects must provide (1) relevant<br>documentation identifying those irregularities<br>(e.g., highlighted sections of a financial<br>report), and (2) the project's plan to rectify<br>program irregularities. If irregularities have<br>been rectified, agencies should include any<br>available confirmation letters from relevant<br>oversight entities (e.g. SSF, HUD, Financial<br>entity, Local Jurisdiction);<br>Award <b>full points (5 points)</b> for the project if:<br>If the agency can show no irregularities<br>from similar projects; or | All<br>HUD,<br>SSF, or<br>financial<br>audits<br>from<br>last 2<br>years.<br>RFI | Up to <b>5</b><br>points |

| <ul> <li>If no irregularities have been revealed by any audits or monitoring for similar projects.</li> <li>Award up to 5 points for the project if:         <ul> <li>If the agency adequately submits relevant documentation identifying any irregularities and provides an adequate explanation to show how any irregularities have been or will be addressed. An adequate explanation of the steps the agency will take to address the irregularities, (2) the timeline these steps will be completed on, and (3) how the agency will avoid similar findings in the future.</li> <li>If the agency is currently disputing findings from an audit or monitoring for a similar project and submits (1) a brief explanation of the irregularities, and (2) the most updated timeline available for disputing the irregularities.</li> </ul> </li> <li>Award up to 3 points if irregularities were found for similar projects and the agency does not provide an adequate explanation.</li> <li>Award no points if the agency does not submit any documentation (e.g., confirmation letters) from oversight entities to support this criteria.</li> </ul> |  |
|--|--|
| Identification of Barriers: Based on the degree<br>to which the organization:<br>1) Award <b>up to one point</b> if the<br>organization has identified barriers to<br>housing and services that are<br>specifically faced by BIPOC individuals<br>or that disproportionately affect BIPOC<br>individuals; (1 point) and<br>2) Award <b>up to one point</b> if the<br>organization has taken concrete steps<br>to address the identified barriers and   |  |

| Factor 4D.<br>Organizational<br>Commitment<br>to Racial<br>Equity | <ul> <li>lessen their impact on BIPOC<br/>individuals. Strategies described should<br/>be designed to address the specific<br/>experiences of BIPOC individuals.</li> <li><u>BIPOC Representation in Leadership:</u></li> <li>Award <b>up to three points</b> for the<br/>organization's explanation of its commitment<br/>to serving Black, Indigenous, and other<br/>People of Color (BIPOC) since its founding, as<br/>indicated by its original mission statement (or<br/>equivalent guiding statement) and the racial<br/>and ethnic demographics of its original<br/>leadership team.</li> </ul>   | RFI | Up to 5<br>points |
|---|--|-----|-------------------|
|   | <ul> <li>Absent a commitment to serving BIPOC individuals since the organization's start, awards points based on the extent to which the agency demonstrates a commitment to measuring and improving its response to racial disparities and biases. Specifically:</li> <li>Award up to one point if at least 25% of salaried leadership team and board of directors members identify as Black, Indigenous, or other people of color.</li> <li>Award up to two points to the extent that the organization describes concrete steps that have been taken to build commitment to racial equity practices within the organization's approach serving individuals experiencing homelessness.</li> </ul> |     |                   |
|   | <ul> <li>These may include but are not<br/>limited to:         <ul> <li>Opportunities for cultural<br/>competency and implicit<br/>bias trainings;</li> <li>Policies related to<br/>language accessibility;<br/>and</li> <li>Strategies to ensure that<br/>the salaried leadership<br/>team is representative of<br/>the racial and ethnic</li> </ul> </li> </ul>  |     |                   |

| <ul> <li>populations that the organization serves.</li> <li>The applicant must also describe the impact or results of their strategies.</li> </ul> |
|--|
|--|

#### 5A. PRIORITIZATION FOR NEW PROJECTS EXCEPT DV BONUS (25 pts.)

| Name                            | Description   | Sourc<br>es        | Score                     |
|---------------------------------|---|--------------------|---------------------------|
| 5.A.1.<br>Community<br>Priority | Award points if the project addresses the<br>priority need identified by the Advisory<br>Committee in 2019: Permanent Supportive<br>Housing, with targeted services for either<br>youth or seniors. <u>OR</u><br>Award points if the project addresses the<br>priority need identified by the CoC Board in<br>2021: Permanent Supportive Housing, with<br>targeted services for those experiencing<br>health conditions identified by the CDC as<br>making someone vulnerable to COVID-19.<br>For a full list of conditions, see <u>here</u> .<br>Please note that HUD may require that<br>Permanent Supportive Housing be<br>dedicated to persons experiencing Chronic<br>Homelessness.<br>Please note, projects can receive points for<br>both the Community Priority (5.A.1) and<br>HUD Priority (5.A.2) factors if they meet the<br>criteria. | E-<br>snaps<br>RFI | Up to <b>10</b><br>points |

| SACRAMENTO CONTINUUM OF CARE                            |  |                    |                           |
|---|--|--------------------|---------------------------|
| 5.A.2. HUD<br>Priority                                  | <ul> <li>Award points if the project addresses the priority needs identified by HUD in 2021:</li> <li>Permanent Supportive Housing or Rapid Re-Housing that leverages healthcare resources to support program participants (as documented with a written commitment from a health care organization); <u>OR</u></li> <li>Permanent Supportive Housing or Rapid Re-Housing, with Housing Choice Voucher (HCV) or other non-CoC funding for rental assistance of leasing.</li> <li>Please note, projects can receive points for both the Community Priority (5.A.1) and HUD Priority (5.A.2) factors if they meet the criteria.</li> </ul>   | E-<br>snaps<br>RFI | Up to <b>5</b><br>points  |
| 5.A.3. Severity of<br>Needs & Special<br>Considerations | Award points to projects that will serve<br>population(s) with severe needs and<br>vulnerabilities (e.g. chronically homeless,<br>history of domestic violence), and will also<br>fill an important gap in housing and services<br>for persons experiencing homelessness in<br>the Sacramento region (e.g., serving a<br>unique population, leveraging certain<br>funding, maintaining site based housing).<br>Applicants should specifically consider the<br>needs and vulnerabilities of youth or<br>seniors or for those experiencing health<br>conditions identified by the CDC as making<br>someone vulnerable to COVID-19. For a full<br>list of conditions, see <u>here</u> . | RFI<br>APR         | Up to <b>10</b><br>points |

## 5B. PRIORITIZATION FOR DV BONUS HOUSING (25 pts.)

**Use this section** <u>instead of</u> the previous page if the project is applying for DV Bonus funding. For all scoring purposes, "domestic violence" also includes dating violence, sexual assault, stalking, and/or trafficking.

| Name Description | Source | Score |
|------------------|--------|-------|
|------------------|--------|-------|

| SACRAMENTO CONTINUUM OF CARE                        |   |     |                           |
|---|---|-----|---------------------------|
| 5.B.1.<br>How<br>Project<br>will<br>Address<br>Need | <ul> <li>Award points for each of the following items:</li> <li>Project provides data describing the CoC's population of domestic violence survivors.</li> <li>Project explains how it proposes to meet the unmet needs of domestic violence survivors, especially with survivors who come from unsheltered situations.</li> <li>The project's staff has skills that are specifically needed to identify and locate survivors, or to persuade survivors to accept and enter housing.</li> <li>The project's staff utilize trauma-informed and client-centered approaches.</li> <li>The project meets a priority need identified by HUD in 2021: <ul> <li>Permanent Supportive Housing or Rapid Re-Housing that leverages healthcare resources to support program participants (as documented with a written commitment from a health care organization); <u>OR</u></li> </ul> </li> <li>Permanent Supportive Housing or Rapid Re-Housing, with Housing Choice Voucher (HCV) or other non-CoC funding for rental assistance of leasing.</li> </ul> | RFI | Up to <b>5</b><br>points  |
| 5.B.2.<br>Previous<br>Performa<br>nce               | Award points if the agency has experience serving,<br>or demonstrates a plan to serve, victims who are<br>fleeing, or attempting to flee, domestic violence,<br>which includes dating violence, sexual assault,<br>stalking, and/or human trafficking, and that<br>experience, or plan, specifically shows that they<br>can serve victims who come from unsheltered<br>situations.  | RFI | Up to <b>10</b><br>points |
| 5.B.3.<br>Ability to<br>Meet<br>Safety<br>Outcomes  | <ul> <li>Award points for each of the following items:</li> <li>The project articulates a specific plan for<br/>ensuring that its residents will be safe from<br/>further domestic violence.</li> <li>The project sets quantitative safety targets<br/>that are appropriate and realistic.</li> <li>The project explains why it is likely to be<br/>able to achieve the targeted safety<br/>outcomes.</li> </ul>  | RFI | Up to <b>10</b><br>points |

## 6. COMMUNITY (10 pts.)

| Name  | Description   | Sources              | Score                    |
|---|---|----------------------|--------------------------|
| 6.A.<br>Participation<br>in CoC<br>Activities | Award points for the agency's attendance,<br>participation, and leadership at CoC events,<br>meetings, committees, forums, and projects,<br>with a focus on activities that took place since<br>the last NOFA. Typically, full points should be<br>awarded if the agency meaningfully<br>participated in at least 4 voluntary events over<br>the course of the year, or if the agency led at<br>least 1 successful event, training, or initiative<br>over the course of the year.   | RFI                  | Up to <b>5</b><br>points |
| 6.B. Local<br>Competition<br>Deadlines        | <ul> <li>Award full points if the project met all local competition deadlines, including deadlines for turning in supporting documents and attachments.</li> <li>Award 3 points if any portion of the local application was turned in <u>up to</u> 24 hours late.</li> <li>Award no points if any mandatory portion of the local application was <u>more than</u> 24 hours late.</li> <li>If any mandatory portion of the local application was more than 72 hours late, the project may be disqualified at the discretion of the Panel.</li> </ul> | Homebase<br>analysis | Up to <b>5</b><br>points |