

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: NY-602 - Newburgh, Middletown/Orange County CoC

1A-2. Collaborative Applicant Name: HONOR-ehg

1A-3. CoC Designation: CA

1A-4. HMIS Lead: CARES

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

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

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

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

(limit 2,500 characters)

The CoC's bylaws contain the policy to ensure community-wide commitment and participation. Annually, the CoC plans a public campaign to recruit new members, especially underrepresented stakeholders. The outreach target audience is informed by bi-annual evaluations of membership to identify gaps in expertise essential for supporting CoC policy priorities, strategies, and funding acquisition activities. The CoC Planning Coordinator (PC) extends invitations twice annually through public postings, e-mail "blasts", social media, phone calls and targeted visitations/talks. 2) In electronic communications (email, web, social media), the CoC PC follows best practices for accessibility, including use of descriptive subject lines, simplified/ high-contrast color schemes, responsive design techniques and font size. CoC messaging always prioritizes quality content for readers to ensure targeted, value-focused communications. 3) Special outreach ensures that CoC member representation includes persons with homelessness experience. Street outreach workers, shelter operators, CoC permanent supportive housing providers are all trained annually in engagement techniques (such as motivational interviewing) to solicit participation from persons with a variety of experiences, including families, youth, LGBTQ, veterans and survivors of DV/ fleeing/trafficking. Upon enrollment, new members are invited to present opinions and their experience at CoC meetings. The CoC proactively networks with organizations that serve the cultural communities home to Orange County, which includes the Newburgh Housing Coalition. Through the CoC's meetings and active communication channels, the CoC PC actively solicits information about new and existing community cultural organizations that may be interested in CoC membership. This past year, our CoC added 2 new organizations to our membership: Osborne Association, which works with youth and adults reentering from correctional facilities; and Sisters of Charity, which includes the aging population in their focus. Over our tenure as a CoC and an active community collaborator, we have garnered a positive reputation that supports inclusivity for underrepresented populations.

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

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

(limit 2,500 characters)

1) The CoC’s Strategic Planning & Development Committee releases community stakeholder and consumer surveys and holds regular meeting forums that include a broad array of organizations. These include all local homeless providers as well as local Dept. of Social Services and Office of Community Development and local organizations including Habitat for Humanity. The CoC is an inclusive and outcome-oriented community-wide planning/execution body, in which structure, operations and decision-making are codified in written policies/standards which are informed by an inclusive membership base. In January 2023, the CoC published its annual survey to community providers, local DSS, homeless population and general public for distribution to consumers to assess opinions on preventing homelessness and barriers to housing. Survey responses from non-HUD organizations informed strategies to complement and enhance existing HUD-funded services and avoid duplication. Examples of added services based on feedback included rental assistance, security deposits, and prevention. 2) The CoC committees, subcommittees and workgroups are comprised of regional experts in homeless services and meet monthly to strategize on best practices; the CoC also facilitates bi-monthly public meetings. The CoC Planning Coordinator (PC) uses in-person distribution, electronic mail and social media to distribute new information materials to its members, local officials and private organizations. 3) The CoC PC, CoC Board and General Members review all information gathered in public meetings and forums and conduct proactive discussions with structured agendas to promote innovative strategies that prevent and end homelessness. Strategies are prioritized with defined action plans that include accountable stakeholders. Progress on these activities are monitored throughout the year by the CoC PC and reported to the Board and membership. The Collaborative Applicant is a local emergency shelter provider and has access to trainings, legislative forums, etc. During the past year, we have intentionally focused on outreach to prioritize a housing first approach for rapid placement and access to the wraparound services (i.e., mainstream benefits, employment support, healthcare referrals). Our CoC has achieved an 10% improvement in FY 2022 over FY2021 for successful exits to permanent housing for those in ES, SH, TH and PH-RRH, plus those in other PH projects who exited without moving into housing.

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

(limit 2,500 characters)

1) On July 6, 2023, the CoC Planning Coordinator (PC) notified all CoC members that HUD had opened the FY 2023 CoC Program Competition. The CoC Board prepared a public notification letter containing the following information: the program competition is now open; the Board encourages all stakeholders who have not previously received CoC funding to consider submitting an application for a new project; the amount of available new project funding; HUD-allowable types of new projects and eligibility; how to access full information (HUD EX); recourse for non-inclusion. On August 09, 2023, the PC published the letter via email "blast lists" (private/public) and CoC membership list (most are non-HUD funded stakeholders). On 8/09/2023 the Collaborative Applicant (CA) published the RFP via public postings to the CA and CoC Facebook Pages. 2) The notification included the new project application with instructions for application submission via electronic mail to the PC with contact information. 3) Our CoC public messaging included a description of how applicants would be evaluated: For project selection, the CoC Board members acted as the scoring committee; members representing applicants were recused. Applicants were scored based on objective criteria including performance (resource use, participant income increase and benefits attainment, LOS), housing stability, consumer feedback and project need. Scores determined which applications the CoC will submit to HUD and the ranking order. Higher scores were prioritized. HUD makes final decisions regarding which applications are funded. The committee then selects and notifies the project in writing of acceptance/rejection. 4) The CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats. The CoC PC follows best practices for accessibility, including use of descriptive subject lines, simplified/ high-contrast color schemes, responsive design techniques and font size. The CoC also collaborated with partner organizations to assist individuals with disabilities, e.g., Independent Living, which is a consumer-directed, cross disability advocacy and service organization dedicated to enhancing the quality of life for individuals living in the Hudson Valley region. Our CoC partners with them regularly to ensure that communications are accessible.

1C. Coordination and Engagement

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

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Nonexistent
12.	Organizations led by and serving LGBTQ+ persons	Nonexistent
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

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

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

(limit 2,500 characters)

1) The Orange County Office of Community Development (OCCD) administers the HUD funded Community Development Block grant and is an active member of the CoC. HONOR, the only CoC member with ESG funding is also the CoC's Collaborative Applicant (CA). The Executive Director of HONOR has been an active participant in the ESG planning process on a state level and has introduced this resource to the planning for our Consortium. He also serves as the President of the Board of the CoC. 2) The CoC provides performance and outcome data for PSH, RRH through HMIS and PIT, HIC & CoC System Performance data for Consolidated Plan development (CP). Regular review of HMIS data supports timely identification of mainstream resources and gaps, reduction in service duplication, increased continuity of purpose & prioritization of resources on service provider goals. The CoC has reported data reliably and timely for the last 5 years. HONOR uses ESG funding to strengthen outreach efforts to homeless individuals living on the street, in an effort to support the CoC's Housing First approach. To-date, this effort has facilitated the successful outreach to 464 individuals and rapid rehousing of 184 individuals. 3)The CoC has conducted the PIT count of homelessness (sheltered and unsheltered) in our geographic area annually since 2007. We have become adept at this process with increasing accuracy year by year. The count is always adheres to HUD requirements and is scheduled for one 24-hour period on a HUD-approved date; this past year it was completed on January 27, 2023. 4) CP local officials are CoC members. OCCD is on the CoC Board and participates in CoC planning. The CoC consults quarterly with the recipients to support priorities/outcomes/allocations. The CoC has 3 Plan CP jurisdictions and updates are submitted to the OCCD, the primary HUD conduit for our community as well as to the HUD offices in the cities of Middletown, Newburgh and Port Jervis. The Board conducts quarterly consultations (phone/face) with all 3 CPs to provide input on Action Plans/ CAPER and guide how CPs allocate HOME, CDGB, ESG, etc. resources to prevent, reduce and end homelessness.

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

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

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

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

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

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

(limit 2,500 characters)

The CoC established a Homeless Youth Advisory Committee (HYAC) to create a forum for on-going collaboration with youth education providers. Members include youth, shelter and outreach providers, McKinney-Vento homeless liaisons, school personnel, and CoC youth service providers. Partnerships with youth education providers include Newburgh Head Start, Maternal Infant Services Network, Easter Seals of Port Jervis and Middletown ABCD (Head Start). Our CoC has partnerships with all 3 major LEAs in Port Jervis, Middletown and Newburgh; these have McKinney-Vento liaisons who actively participate in the CoC's Outreach Coalition. The COC has established protocols for working with local liaisons and marketing McKinney-Vento State Education Agency posters and brochures. These relationships enable provision of quarterly trainings for CoC's (Rights under M/V Act, how to ID eligible youth/families, Mandated Reporting, Trauma Care, Human Trafficking), technical assistance, placement, and evaluation of needs of homeless youth. These existing partnerships serve as a foundation for the evolution of more formal arrangements around distribution of education materials and expansion of referral networks. As the sole homeless youth shelter operator in a 3-county radius, HONOR, as a representing member of the CoC has a formal agreement with the Middletown LEA to provide Title I, Part D educational services to students in its youth and emergency services shelter. Services include coordination with social, health and other community services, tutoring and the provision of education supplies and materials. We are in the process of formalizing an agreement between the CoC and the Middletown LEA for the same scope of work. The CoC also established a Homeless Youth Advisory Committee (HYAC) to create a forum for on-going collaboration with youth education providers. Members include youth, shelter and outreach providers, McKinney-Vento homeless liaisons, school personnel, and CoC youth service providers. Partnerships with youth education providers include Newburgh Head Start, Maternal Infant Services Network, Easter Seals of Port Jervis and Middletown ABCD (Head Start).

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

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

(limit 2,500 characters)

The CoC has implemented policies and procedures that require all providers to document informing households in projects of educational rights under the McKinney-Vento Act (M/V). These are distributed to new members upon acceptance to the CoC and are readily accessible on the CoC Facebook page. Projects are required to collaborate with M/V Liaisons so program participants have access to educational services. Homeless providers are required to post specific information and assign Case Managers who are responsible for informing homeless families of their rights under this act. The assigned Case Manager in each housing component is responsible for confirming school enrollment and informing homeless families of their rights under the M/V Act within 24 hours of program admission. Organizations capture signed acknowledgments of receipt of these rights from participants. The Case Manager assumes responsibility for contacting the homeless liaison for each homeless child to ensure that enrollment, transportation to schools of origin, and other appropriate supportive services are provided. The CoC provides annual trainings on the M/V Act and distributes educational materials to providers, parents, and students on their rights under this act. The CoC requires funded CoC and ESG programs to post and distribute literature which outlines the act and educational rights of homeless students.

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

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

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

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

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

Organizations		
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	Yes
3.	other organizations that help this population	Yes

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

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

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

(limit 2,500 characters)

1) Our CoC actively collaborates with all members and non-members through the Coordinated Entry (CE) system so help provide housing and supportive services to survivors of domestic violence, data violence, sexual assault and stalking. Through the CE system, community organizations in our region collaborate to discuss vacancies across all programs, not just specific to DV or HUD-funded programs. Fearless! Hudson Valley, Inc. (FHV) is an active member of the CoC that provides services for individuals impacted by domestic violence, teen dating violence, human trafficking, stalking, sexual violence, and other types of crime victimization. As the sole provider of these specialized services in the CoC service region, FHV offers annual training to all CoC area projects and Coordinated Entry staff. FHV is also a member of the NY State Coalition Against Domestic Violence and the NY State Coalition Against Sexual Assault, which facilitates the CoC's access to violence prevention tools and best practices that can be incorporated into CoC policies. Trainings cover dynamics of abuse and victimization, and safety & planning protocols adopted by the CoC. These include practices for privacy and confidentiality, conducting thorough and ongoing assessments around safety and risk, and safety planning, including how to handle crisis and emergencies and informing victims of their rights to choice, safety and confidentiality. The CE system provides a regular forum for these organizations to communicate needed updates to policies specific to supporting DV and trauma survivors, which are then adopted and disseminated by the CoC to its member organizations. 2) CoC protocols ensure victims are provided the choice to access either FHV or the Homeless Resource Center. Trainings also include skill building for appropriate, person-centered, trauma-sensitive engagement with victims. Training content includes the impacts of trauma and strategies for engaging with survivors with mindfulness of the ways in which trauma can manifest. Work with survivors is centered around ensuring support and access to ongoing psycho-education around the impacts of victimization and efforts toward healing are prioritized and steered by each survivor.

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
	1. project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
	2. Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

1) Fearless! Hudson Valley, Inc. (FHV) is an active member of the CoC and close partner of HONOR. FHV provides services for individuals impacted by domestic violence, teen dating violence, human trafficking, stalking, sexual violence, and other types of crime victimization. Several CoC projects have existing agreements with FHV to improve their sensitivity and effectiveness regarding survivor housing needs, and these agreements are renewed annually. As the sole provider of these specialized services in the CoC service region, FHV offers annual training to all CoC area projects and Coordinated Entry staff. Training covers dynamics of abuse and victimization, and safety & planning protocols adopted by the CoC. These include practices for privacy and confidentiality, conducting thorough and ongoing assessments around safety and risk, and safety planning, including how to handle crisis and emergencies and informing victims of their rights to choice, safety and confidentiality. CoC protocols ensure victims are provided the choice to access either FHV or the Homeless Resource Center. Trainings also include skill building for appropriate, person-centered, trauma-sensitive engagement with victims. These trainings are provided twice per year, and the CoC may increase the frequency to quarterly. 2) The Coordinated Entry Coordinator serves as the liaison between CoC area projects, CE staff, and FHV to schedule trainings. Trainings and information sharing include ongoing evaluation of intakes, policies, procedures and shelter screenings to ensure practices are trauma-informed, do not jeopardize safety, and allow victims to access all needed services. The # of trainings provided, # of individuals who received training, training topics covered, and policies and procedures created are tracked and reported annually to CoC. The volume and comprehensiveness of our trainings ensures that all members of the CoC have up-to-date information on how to refer to FHV, services available, and programs within FHV to support and enhance case management for those survivors finding placement outside of a domestic violence shelter. These trainings are provided twice per year, and the CoC may increase the frequency to quarterly.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	

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

(limit 2,500 characters)

1) Fearless! (FHV), the sole provider of these specialized services in the CoC service region, is bound by Federal and State legislation to maintain the confidentiality of all survivors who seek services. Additionally, they are prohibited from entering any client data into HMIS. FHV does, however, maintain and utilize a comparable data management application, EmpowerDB. This data program is highly secure and is used to collect all client information and demographics, as similarly reported by other CoC agencies into HMIS. EmpowerDB also has the capability to generate the CoC APR and ESG CAPER CSV files in a zipped file for the purposes of ensuring consistency in reporting requirements and expectations for all CoC agencies. These reports do not include any personally identifying information. 2) FHV is permitted to share aggregate data, general trends, and hypothetical case studies, and also participates in the annual Point-In-Time Count. The CoC includes FHV data in annual PIT count results and aggregates de-identified data from HMIS to assess the scope of community needs, including volume of survivors who need safe, confidential placements.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below:

1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.

(limit 2,500 characters)

1) Fearless! (FHV), the sole provider of these specialized services in the CoC service region, is bound by Federal and State legislation to maintain the confidentiality of all survivors who seek services. Additionally, they are prohibited from entering any client data into HMIS. FHV does, however, maintain and utilize a comparable data management application, EmpowerDB. This data program is highly secure and is used to collect all client information and demographics, as similarly reported by other CoC agencies into HMIS. EmpowerDB also has the capability to generate the CoC APR and ESG CAPER CSV files in a zipped file for the purposes of ensuring consistency in reporting requirements and expectations for all CoC agencies. These reports do not include any personally identifying information. 2) FHV is permitted to share aggregate data, general trends, and hypothetical case studies, and also participates in the annual Point-In-Time Count. The CoC includes FHV data in annual PIT count results and aggregates de-identified data from HMIS to assess the scope of community needs, including volume of survivors who need safe, confidential placements.

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:

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

(limit 2,500 characters)

(1) Our CoC has established comprehensive policies and procedures that include a well-defined emergency transfer plan. This plan aligns with the Orange County CES Policies and Procedures and is designed to address safety concerns effectively. (2) Individuals and families within our CoC have a clear and accessible process to request an emergency transfer. If someone in placement identifies safety concerns, they can communicate their worries to any staff member. There is no formal or bureaucratic process imposed on survivors; their concerns are immediately taken seriously and addressed promptly. (3) When individuals or families express concerns about their safety in their current placement, our CoC adopts a person-centered and trauma-informed approach. CoC partners work collaboratively with the individual or family to identify another safe placement option. This approach is rooted in the principles of meeting individuals and families where they are and removing barriers to finding a secure and supportive living situation. Furthermore, our CoC encourages participation in the county-wide WELCOME Orange initiative, which emphasizes the importance of cultural competency, trauma-informed care, person-centered approaches, and warm hand-offs to address the complex needs of individuals. The majority of our CoC programs actively participate in this initiative, demonstrating our commitment to ensuring a holistic system of care that prioritizes the well-being and safety of those we serve.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC:

1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

(limit 2,500 characters)

(1)Our CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all housing programs and services available within our geographic area. Since 2004, survivors have had 24-hour access to the Coordinated Entry System (CES) and emergency services. Fearless!, the sole DV provider in the county, plays a pivotal role in this by offering assessment, risk and safety planning, and placement in all programs across the CoC for survivors. The protocols employed by Fearless! are sensitive to the lived experiences of survivors seeking services, ensuring that our CoC operates with a trauma-informed approach and actively works to prevent re-victimization. Through the CES, our CoC and community organizations collaborate to discuss vacancies across all programs, including those specific to DV or HUD-funded programs. Staff and client advocates at Fearless! help survivors navigate the housing and services available, including all CoC programs, and find housing opportunities that match their goals, needs, safety plan, and overall circumstances. (2) Our CoC proactively identifies systemic barriers within our CoC that may create obstacles to safely housing and providing services to survivors of domestic violence, dating violence, sexual assault, or stalking. Fearless! has a history of supporting survivors in navigating the housing market and overcome barriers to housing. The CoC learned that limited supply of DV housing opportunities was a barrier for Orange County survivors. To address this, Fearless! collaborated with HONOR in 2017 to launch a low-barrier Housing First program. Through this program, we've successfully supported numerous survivors in obtaining and maintaining housing while also accessing supportive services to enhance their sufficiency, stability, and independence.

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

The CoC recognizes the value of engaging survivors of domestic violence, dating violence, sexual assault, or stalking in the development of CoC-wide policy and programs. Our goal is to continue to build trusting relationships with survivors to help inform our work and improve the experience of those we encounter. (1) To accomplish this, the CoC leverages its partnership with Fearless! Hudson Valley (FHV), the only provider in our CoC region of these specialized services for survivors. FHV itself has survivors on its Board of Directors who make policy over the survivor services system and housing programs. Thanks to survivor leaders within FHV have already increased awareness of survivor needs and disseminated best practices regarding survivor services across the CoC. Further, the CoC is partnering with FHV to identify and invite survivors to participate in the development of CoC-wide policy and programs. Specifically, survivors will be invited to serve on the Lived Experiences Advisory Council that is being developed, along with the individuals recently appointed to that board with lived experience of homelessness. The intention of recruiting survivors to this CoC Council/committee is to create opportunities to amplify survivor experiences and leadership, highlight the unique and complex needs of survivors for CoC leaders and members, and develop CoC-wide policy and programs that are more responsive to these survivor needs.

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

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

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

Describe in the field below:

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

(limit 2,500 characters)

1)The CoC believes it is important to have an anti-discrimination policy and to engage stakeholders to influence this policy. All agency efforts are rooted in our commitment to equity. Accordingly, consistent with state and federal labor laws, the CoC has instituted system wide practices and standards that all providers and staff commit to ensuring that individuals and families receive supportive services regardless of race, gender, disability, or sexual orientation. We also provide bilingual staff and providers. These practices are infused in all standards and programs. Additionally, all HUD providers have instituted similar policies in their organizations. The CoC participates regularly in various community forums, including the Strategic Planning & Development Committee, Homeless Youth Advisory Committee, Financial Coordination Committee, which offer ample opportunities for stakeholder feedback; we also conduct an annual consumer feedback survey. These feedback mechanisms enable our CoC to catalog any feedback related to anti-discrimination, discuss and implement needed changes to CoC policies. 2) The CoC includes its anti-discrimination policy in its full set of operational policies and procedures; these are shared with CoC projects as part of the renewal process. For the next round of renewals in FY2023, we will explore the inclusion of anti-discrimination policies in our CoC project evaluation criteria. Our CoC is in the process of finalizing a handbook that contains guidelines for inclusion and anti-discrimination policies; CoC members will have to sign off on reviewing this handbook. We are also planning to revise our membership MOU to include requirements for training on racial/social justice, LGBTQ and linguistic competency; grievance procedures; and policies and procedures on racial/cultural equity. 3) The CoC board meets monthly and makes compliance a key priority in our ongoing collaborations. We anticipate developing a clear policy in 2023. The CoC takes very seriously any issues or incidents regarding discrimination that may arise involving our clients, providers and staff. We have ongoing check-ins with providers and are working to develop a CoC system handbook that serves as a reference tool. In the event the CoC receives a complaint, or should a concern arise, those issues are submitted to the CoC board for review and consideration. We address any concern, agree on a consistent course of action and follow up with any person directly.

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
New York State Homes and Community Renewal	100%	Yes-HCV	Yes
Middletown Housing Authority	15%	Yes-Public Housing	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	
	Describe in the field below:	
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or	
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.	

(limit 2,500 characters)

During the past two years the CoC Planning Coordinator has cultivated successful partnerships with three PHAs in Orange County. Our contract with Kiryas-Joel Housing Authority includes emergency housing vouchers and prevention services for individuals and families at-risk for homelessness. Our Memorandum of Understanding (MOU) with New York State Homes and Community Renewal also includes emergency housing vouchers and stability vouchers for individuals and families identified as homeless. Our newest partnership is with Middletown Housing Authority which has general preference. Kiryas Joel and New York State Homes and Community Renewal have a homeless admission preference (see attached Homeless Preference letters from PHAs).

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	
	Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:	

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

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	
	In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:	

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

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Stability & Housing Choice Vouchers

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

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

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

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

PHA
New York State Ho...
Kiryas Joel Housi...

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

Name of PHA: New York State Homes and Community Renewal
("HCR") /Housing Trust Fund Corporation
("HTFC")

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

Name of PHA: Kiryas Joel Housing Authority

1D. Coordination and Engagement Cont'd

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

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

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	16
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	16
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

1) Through the CE process, the CoC prioritizes project funding based on a Housing First (HF) approach getting individuals rapid placement into permanent housing, while at the same time avoiding requirements for service participation and other preconditions that could delay or inhibit a transition to permanent housing. Projects were ranked higher if demonstrating a clear outreach and supportive services plan existed to engage and serve the most vulnerable populations using the HF approach to prioritize shelter. The CoC created a vulnerability index tool that identifies risk factors, such as age, DV status, housing status, and disability status, to support the HF Approach; this index is used at weekly CE meetings to prioritize individuals for placements 2) and the CoC's monitors individual projects for compliance and prioritization and enrollment based on these risk factors. The CoC's ranking and selection process prioritizes funding for projects serving specific vulnerabilities, particularly those with the highest vulnerability index scores. The CoC took the following actions to ensure consideration of these vulnerabilities during the review, rating and ranking process: projects were ranked and selected based on applicant experience/capacity to serve the chronically homeless, active substance users, people with criminal history and/or disabilities, and the unsheltered. Evaluation standards for renewal projects differ for PSH from RRH given the more acute needs in PSH (e.g., chronically homeless people with significant behavioral/physical health issues). Projects are scored objectively using these customized HF standards describe above and ranking is based on evaluation scores. 3) Our CoC regularly monitors projects outside the competition for a HF approach through the CE process, which involves weekly meetings with comprehensive participation from organizations inside and outside of the CoC competition. Meeting agendas include review of HMIS data with HF criteria, which informs prioritization and distribution of referrals. The CE Committee provides the forum to discuss and address barriers to accepting referrals. Going forward, the CoC plans to implement a new protocol, whereby organizations will be required to submit a letter to the CoC that describes reasons for denial.

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

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

(limit 2,500 characters)

1) The CoC is located 45 miles NW of NYC, consisting of a 816 square mile area; which includes 3 cities and 42 municipalities. The CoC is both urban and rural. Most of the 383,000 population lives in and around the three cities (78%). The CoC has 3 FTE Street Outreach Workers (SOWs). SOW's are trained in engagement strategies, such as motivational interviewing to support trauma informed, survivor-centered, compassionate interactions with those they encounter. Over time, the CoC has increased outreach by cultivating Community Connectors (CC's) which consists of (store owners, churches, soup kitchens/food pantries, liquor stores, laundromats, school counselors, school bus drivers, taxi companies, fast food, carting, librarians, redemption centers etc.) who are regularly in contact with the public who may know of individuals experiencing homelessness. Community Connectors are trained by Street Outreach Workers to contact them when they encounter any homeless individual. 2) Outreach covers 100% of the CoC. 3) SOW's outreach 7 days (combined) at different hours of the day in places that the unsheltered have been known to congregate. Street Outreach Workers are on-call to respond to CCs to ensure that any individuals encountered are linked to services immediately. 4) The CoC's has tailored its outreach to engage those that are least likely (individuals with SUD, undocumented, doubled up/ couch surfing, DV, trafficking victims, youth) to access services by relying heavily on Outreach Team and Community Connectors. SOWs ensure program participant safety; distribute "gateway" terms; give accurate information (palm cards); provide transportation and initiate contact through the Coordinated Entry System. A CoC Provider, MHA provides language line/deaf connections.

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

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

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

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	32	38

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section V.B.1.m.	

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	
	LGBTQ+-Providing Equitable and Affirming Services to LGBTQ+ Communities	Yes

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1)The CoC’s case management (CM) cohort, which consists of CMs of all HUD & non-HUD mainstream CM associates, support CoC-funded projects by linking program participants with resources to facilitate stability. CMs are locally hired and participate in regular trainings and supervision that facilitate the most up-to-date resources for program participants. The CoC coordinator is deeply involved in community networks, such as Single Point of Access (SPOA for mental health access), Cornerstone Family Healthcare (FQHC), Veterans Taskforce Meetings, Welcome Orange, DSS homeless meetings and the CoC County Outreach Coalition, to stay abreast of current local resources and services that can support CoC projects and program participants. The CoC regularly attends the local Financial Coordination Committee, chaired by the Legal Services of Hudson Valley and attended by all community providers, including the local DSS; the CoC leverages this forum to ensure members attend and have information on all benefits. The coordinator disseminates any new information of mainstream resources via email to all CoC members and organizations weekly and informs CoC members of updates during monthly committee meetings. 2)The CoC members have developed ongoing relationships with the health plan liaisons at NYS Medicaid Managed Care Plans, such as Affinity, Wellcare and Fidelis, to facilitate enrollment of individuals and families into health plans. The CoC actively coordinates with liaisons to work with participants directly at CoC member sites for health plan enrollment activities. The CoC has finalized an MOU with Cornerstone Family Healthcare, a local Joint Commission and Patient Centered Medical Home accredited FQHC that provides physical and behavioral health (BH) services in the county. Cornerstone provides a medical van onsite at the CoC’s emergency adult and family shelter for healthcare. The CoC will collaborate with Cornerstone to establish referral streams for mental health and substance abuse treatment for any program participant. 3) All CoC Case Managers and outreach workers are SOAR certified and use the Coordinated Entry Assessment to capture participant needs and develop a support plan. CMs assist participants with connections to resources that include applications for food stamps, SSI, TANF, BH treatment, transportation and advocacy support. SOAR certification is mandatory as part of the job description for all CoC project staff and member organizations.

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

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

(limit 2,500 characters)

Housing First is the core tenet behind our CoC’s approach to housing; as a result of advocacy from the CoC’s President, with the support of its member organizations, Orange County plans to initiate a contract with HONOR (the Collaborative Applicant) to provide Housing First-funded, non-congregate housing opportunities for families . This year, in response to the significant rise in single adult and family homelessness reflected in the local PIT county, HONOR added 20 single adult beds and six family rooms to the CoC’s non-congregate shelter capacity. Further, Orange County added 50+ hotel beds to serve as a non-congregate shelter resource. Our CoC recognizes that most of the time, most shelter beds are full, and the pandemic drove the need for supplemental non-congregate beds to support both Housing First and infectious disease control strategies. Because HONOR also operates the after-hours call center for the county, it is also a predominant referral source for this type of housing. MHA is a CoC member that operates the county’s crisis line; this working relationship seamlessly facilitates housing referrals to the after-hours call center. Given the connections and positive relationships that the CoC has formed over the years with local politicians, law enforcement and non-profit social service organizations, we expect to continue advocacy efforts around Housing First and the continued expansion of non-congregate shelter opportunities.

ID-8.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1) During the pandemic, the CoC created a strategy and planning committee to coordinate the distribution of ESG-CV funding to address multiple pandemic impacts, including: eviction prevention, safety measures, healthcare and sanitary supplies, and the reconfiguration of congregate shelter for clients and staff. The CoC established routine weekly and monthly virtual meetings at the height of COVID with mainstream healthcare organizations and representatives, including the NYS Department of Health, local Health Department, HUD representatives, and area healthcare organizations. This collaboration resulted in the development and dissemination of policies and procedures for infection control readiness and response. These policies are permanent and are reviewed and updated on an ongoing basis with this collaborative forum to ensure the CoC is prepared in the event of other public health emergencies. 2) Furthermore, an organizational Disaster Preparedness Plan was developed to address a future mass public health event following a directive from HUD. The CoC has implemented the disaster plan upon direction from the local Department of Health. Some examples of improved readiness include: flexible reduction in program capacity to allow for social distancing in a manner that is safe for clients and staff, yet works to remain responsive to the community’s need for support, implementation of temporary physical plant changes to support safety for staff and clients, establishment of new policies and procedures for all programs to maintain hygiene and personal safety at necessary levels, purchase and installation of disinfection equipment across the CoC, and incorporation of additional infection control procedures for client screenings into the intake process. Development of public safety and infection control policies and procedures follows directives from the CDC and NYS Department of Health. Surplus PPE has been acquired and stocked in storage and permanent supply vendor relationships are established for restocking. Virtual communication protocols have been developed and implemented to ensure CoC membership and clients have effective methods of sharing information and operational continuity.

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

(limit 2,500 characters)

1)The pandemic carved out an essential and efficient communication pathway for the CoC to collaborate with our State and local health departments to disseminate timely information for infectious disease prevention and control measures, specifically tailored to providers who serve those who are homeless. The NYS Department of Health, local Health Department, HUD representatives, and area healthcare organizations have an established communication protocol and forum with the CoC to discuss and update CDC and NYS Department of Health safety protocols, share information from HUD, and provide local public health safety restrictions and hospital bed availability information. 2) The CoC disseminates any updates from public health agencies about infection control practices to the entire membership, including street outreach and housing via email and posts updated information on its website. All CoC employees have been provided detailed instructions in infection control protocols, social distancing protocols, and self-quarantine requirements. Even with the end of the federal COVID-19 Public Health Emergency (PHE), these health information distribution systems and infectious disease prevention measures are still in place and will continue to improve the health and safety of CoC providers and participants.

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

(limit 2,500 characters)

1)The CoC (NY-602) in Orange County covers 839 sq. miles of mostly rural landscape, including the cities of Middletown, Newburgh and Port Jervis (designated as a Metropolitan Statistical Areas) and 23 rural towns and villages. The Coordinated Entry Assessment System strategy has been codified into policies and procedures for all CoC members and covers 100% of the CoC geographic area. The Coordinated Entry (CE) System uses a multiple access point assessment and intake model. The CoC facilitates comprehensive participation at CE committee meetings from organizations across the region, which includes the Orange County Dept. of Social services, all housing and shelter providers, CDBG, HOME, and ESG programs, DV providers, mental health and substance abuse treatment providers, hospital, health, veterans and disability organizations, homeless liaisons from area school districts, early childhood providers, and local law enforcement. The CE system relies on extensive street outreach to identify and provide services to youth, adults, and families living on the streets and utilizes a local 211 call center system to identify homeless in need of services. 2)The CE system uses a standardized vulnerability index tool to ensure prioritization of street and chronic homeless, ill, disabled, and homeless with safety concerns. The tool identifies risk factors, such as age, DV status, housing status, and disability status, to support the Housing First Approach; this index is used at weekly CE meetings and daily intakes to prioritize individuals for placements. This tool provides uniform decision criteria based upon vulnerability score. Street outreach efforts and site access points follow the same assessment protocols. All CoC members and private organizations have adopted the process for CE universally for all participants. The CoC Planning Coordinator reviews all CE assessments, which optimizes efficiency in ensuring that persons, especially those most vulnerable in need receive timely assistance. 3)The CoC conducts an annual survey that is distributed to all CoC program participants that participated in CE and this feedback is reviewed by all CoC members to inform programming, address issues and improve the quality of services to the community.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section V.B.1.p.	

	Describe in the field below how your CoC's coordinated entry system:
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
2.	prioritizes people most in need of assistance;
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and
4.	takes steps to reduce burdens on people using coordinated entry.

(limit 2,500 characters)

1) The CE system relies on extensive street outreach to identify and provide services to youth, adults, and families living on the streets and utilizes a local 211 call center system to identify homeless in need of services. The call center is staffed with trauma-informed clinicians and provides direct entry to services for those in need. 2) The CE system uses a standardized vulnerability index tool to ensure prioritization of street and chronic homeless, ill, disabled, and homeless with safety concerns. This tool provides uniform decision criteria based upon vulnerability score. 3) Street outreach efforts and site access points follow the same assessment protocols. Access points are distributed throughout the region to facilitate timely access. All CoC members and private organizations have adopted the process for CE universally for all participants. The CoC Planning Coordinator reviews all CE assessments, which optimizes efficiency in ensuring that persons, especially those most vulnerable in need receive assistance and housing as quickly as possible. 4) Through the CE process the CoC prioritizes project funding based on a Housing First approach getting individuals rapid placement into permanent housing, while at the same time avoiding requirements for service participation and other preconditions that could delay or inhibit a transition to permanent housing. Our CoC has made significant efforts to reduce burden in the CE process by allowing intakes via phone, collaboration among the CoC Coordinator and Case managers to efficiently collect required documentation for participants to enroll in CE housing.

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

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

(limit 2,500 characters)

The CoC Coordinated Entry System (CES) affirmatively markets housing and services to ensure it reaches all persons experiencing homelessness through proactive outreach, communications, and marketing practices. (1) The CoC has 3 FTE Street Outreach Workers (SOWs). SOW's are trained to locate and engage with all persons experiencing homelessness throughout the CoC geography and share information about CoC housing and service opportunities and how to access CES. SOWs make additional efforts to reach those who are least likely to seek out services, including chronically homeless individuals living in wooded areas, along railroad tracks, in parks or campgrounds, and in abandoned buildings. Further, HONOR, the CoC Lead Agency and Collaborative Applicant, maintains close collaborative relationships with over 60 health, mental health, substance abuse, legal, and homeless services providers. We utilize these connections to affirmatively market and raise awareness regarding CoC housing and services. (2) The CoC informs clients upon contact with CES of their rights and remedies under the law. The CoC intends to improve and expand upon its existing noticing practices by taking the thorough noticing requirements associated with the EHV program and adapting them for use throughout all CoC programs and services. These practices have already been approved for use in our CoC's CES, and implementation has begun. (3) The CoC will report on conditions or actions that impeded fair housing choice for current or prospective program participants to Orange County, the jurisdiction responsible for certifying consistency with the Consolidated Plan. If such impediments to fair housing are encountered, we will report them to Orange County, whose multiple departments the CoC already collaborates with and provides reporting to.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	07/31/2023

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

Describe in the field below:

- | | |
|----|--|
| 1. | your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and |
| 2. | what racial disparities your CoC identified in the provision or outcomes of homeless assistance. |

(limit 2,500 characters)

1) Our CoC continues to leverage our Racial Disparity Assessment to support the identification of racial disparities in the provision of homeless assistance. Additionally, we look at current demographic data and cross reference the information with our assessment for validation. 2) Our CoC's Racial Disparity Assessment is used to expose vulnerabilities related to our efforts to support all members in the community. Specific goals of assessment include identifying potential inequities and racial disparities. Based on what we learn, we then adjust our strategies to expand our outreach and partnerships to insure we are reaching our most vulnerable of the Orange County community. Based on our analysis from our racial disparities assessment and the demographics of those we serve, it has been determined that people of color disproportionately more likely to experience homeless than white populations. Additionally, we also recognize that this population also experiences other disparities related to their social needs such as access to healthy foods, medical homes, transportation and jobs. The CoC strives to expand our efforts to assess social needs and provide a mechanism to refer them for support.

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

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

Our CoC’s Racial Disparity Assessment concluded that people of color in the CoC’s region are more likely to experience homelessness, less likely to access permanent supportive housing (PSH), and less likely than the white population to exit homeless assistance programs into positive housing destinations. While the CoC Board requires all CoC members to have antidiscrimination policies within each agency, we also recognize the need to build more equity based policies into day-to-day provider operations. This is a different journey for each of our member organizations and our CoC supports members with timely and reputable research and best practices literature on equity strategies for homeless provider systems. The pandemic catalyzed efforts to disseminate materials and convene discussion forums that promote equity-driven decision-making and activities to our CoC members, as part of the homeless system response to COVID-19. The CoC and its members have acted to improve racial equity in the provision of homeless services, which include: a series of facilitated “Talking Sessions” and social justice/racial equity trainings by the Executive Director of the Orange County Human Rights Commission to discuss racial and social injustice; targeted staff recruitment and retention efforts to attract BIPOC candidates; dedicated funding to contract with the services of the Social Justice Humanistic Education Department at State University of NY New Paltz to assist with organizational objectives relating to racial equity and social justice; comprehensive review and revisions to organizational Cultural Equity/ Anti Discrimination Policies, with staff-wide re-dissemination; active engagement in DEI expertise for training and inclusion in strategic planning processes; active CoC Committee review of COVID-19 infection and vaccination disparities and development of strategies to support mitigation of these disparities.

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

Describe in the field below:

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

(limit 2,500 characters)

The Orange County CoC is committed to providing equitable and culturally appropriate services to the community it serves. We leverage a variety of strategies that influence our decisions and approach to outreach and service delivery. The National Alliance to End Homelessness (NAEH) has provided some guidance to addressing disparities that we work towards in our work. First, leveraging data is a key component to our efforts. Our measures for tracking progress regarding the prevention and elimination of disparities in service provision and outcomes across the CoC are largely based on analyzing local demographic data on race and ethnicity as well as HMIS data to determine the level of disparities that exist within the community. Our data review includes an assessment of disparities in length of time to permanent housing, housing stability and participant income and benefits attainment. (2) Our first tool for performing this analysis is regular and rigorous review of our HMIS data to track our progress year after year. A second tool is our CoC’s review of industry data from advocacy organizations like NAEH informed our recognition that lack of access to health and behavioral health care adversely influences housing stability. In response, our CoC has strengthened our wraparound services provided by our case managers across our member organizations. We recognize the road to equity is not a destination but an ongoing journey. Our CoC recognizes that prevention and elimination of disparities must be a community-wide, cross-system collaborative effort among a range of stakeholders and we are embedded in our community networks to exchange information, listen, engage with community stakeholders, and partner to act.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC’s Outreach Efforts.	
	NOFO Section V.B.1.r.	

Describe in the field below your CoC’s outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.

(limit 2,500 characters)

The CoC recognizes the value of engaging the voices of those with lived experience of homelessness. Our goal is to continue to build trusting relationships with individuals to help inform our work and improve the experience of those we encounter. In 2023, the CoC Board recruited two persons with lived experience from one of our member organizations (Orange County Safe Harbor) and a third through another CoC member (Regional Economic Community Action Program, RECAP) to serve on the CoC Board. These new Board members will participate in CoC decision-making and outreach efforts, and will also take leadership over analysis of data to identify racial disparities in CoC programs and services. In addition to this increase in individuals with lived experience of homelessness on our CoC Board, our community outreach and annual consumer surveys are additional channels for feedback from those with lived experience, which inform our CoC’s strategies for improving homeless services in our community. We continually explore ways to enhance our engagement of voices with lived experience. For example, we are exploring the development of a lived experiences advisory council. This council will be responsible for advising the Continuum of Care in its efforts to improve the quality and delivery of care and to address other social factors that influence a person’s ability to build their capacity to be self-sufficiency and acquiring permanent housing.

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

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.
 Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

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

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

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

(limit 2,500 characters)

Beyond housing, our CoC recognizes the importance of creating space to increase self-sufficiency for those living in crisis. Accordingly, we look to address other social factors such as employment and professional development to support housing stability. We engage individuals in case management to offer job training, readiness and placement; our case managers have extensive knowledge of existing employment/professional development programs throughout the county and make any needed referrals. Specifically, the member organizations of our CoC, RECAP, MHA and HONOR, have provided opportunities within their organizations for those with lived experience of homelessness. Our CoC leverages existing employment and professional development programs from each member organization by coordinating and referring through our collaborative. Prior to the pandemic, we also partnered with Orange County on their job development assistance program and we plan to restart that partnership when the county is prepared to do so. Our CoC is also planning a job forum, whereby community providers will have the opportunity to meet directly with persons with lived experience.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

	Describe in the field below:
1.	how your CoC routinely gathers feedback from people experiencing homelessness;
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)

The voices of persons with lived experience of homelessness are essential for the sustainability and continuous evolution of the quality of services that our CoC and member organizations provide. 1) The CoC conducts an annual consumer survey this feedback is reviewed by all CoC members at regular CoC Committee meetings to inform programming, address issues and improve the quality of services to the community. 2) Our CoC uses a quality improvement approach to addressing challenges raised by those with lived experience. Once an issue or challenge is identified, our CoC committee collaborates using a “plan-do-study-act” framework to implement improvements. (3) Examples of improvements based on feedback have included rental assistance, security deposits, enhanced prevention efforts and improvements in the quality of housing stock through needed repairs/renovations to adhere to housing quality standards (HQS).

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	

	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC’s geographic area regarding the following:
1.	reforming zoning and land use policies to permit more housing development; and
2.	reducing regulatory barriers to housing development.

(limit 2,500 characters)

1,2,) The Orange County CoC recognizes the need to advocate for reforms to expand permit housing and to reduce regulatory barriers to housing developments. Orange County is experiencing a large housing demand with limited supply and the CoC President participates in ongoing meetings with the city leadership to address and advocate zoning and land use reform, specifically the lowering of regulatory barriers to housing development. Among the CoC, we continue to add to the supply of permanent housing; Safe Harbors (a CoC member) is in the early stages of working with the city of Newburgh to purchase three contiguous properties to build low-income housing in the city. Additionally, representatives of the CoC attend zoning meetings; RECAP and Safe Harbors, Newburgh Ministry and HONOR have provided letters of support for newly funded projects and advocate to city officials about the need to expand our supply within the community.

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

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

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

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	08/25/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	08/25/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

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

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	16
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

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

(limit 2,500 characters)

1,2) Our CoC collects housing stability data from each project in order to monitor CoC success in successfully housing program participants in permanent housing; our evaluation scores for 2022 projects show an 8% increase from FY2020-FY2021 for the % of participants who remained in PSH or exited to permanent housing. The CoC Board, reviews this data on a quarterly basis to collaborate on challenges, gaps in referrals, outreach and housing capacity in the county. We are currently reviewing data to establish a baseline for the average length of time housing for PSH and RRH participants. Our proposed benchmark is 85% of participants housed within 60 days. We also consider a range of qualitative factors that influence time to permanent placement, such as disability status and availability of appropriate housing structure, expressed personal preferences for geographic location by those who are homeless. 3)The CoC’s ranking and selection process prioritizes funding for projects serving these specific vulnerabilities: chronic homelessness, zero income, criminal history, active substance use, psychiatric/physical disability, IDD, and unsheltered homelessness. 4)The CoC took actions to ensure appropriate consideration during the rating and ranking process of projects that provide housing and services to the hardest to serve populations that could result in lower performance levels as a result.

An example of one action was that rating and ranking criteria were designed to award more points to those projects that serve chronically homeless, active substance users, and people with criminal history and/or disabilities. Other factors prioritizing projects serving the most vulnerable populations include answers to the following: • significant and long-standing experience? • operate successful Housing First programs? • link participants to Medicaid and other mainstream services? • increase participant income, including through SOAR? • help participants to stabilize in housing?

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
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NOFO Section V.B.2.e.

Describe in the field below:

1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;	
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and	
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	

(limit 2,500 characters)

The demographics of our homeless and at-risk populations have shifted over the last several years. Based on our CoC’s Racial Disparity Assessment, people of color are more likely to experience homelessness, less likely to access permanent supportive housing (PSH) resources, and less likely to exit homeless assistance programs to positive housing destinations than the white population. 1) Our CoC uses a range of input sources that represent the racial composition of the populations we serve to inform our local competition process. These include equity literature, feedback from our consumer survey, our CoC Scoring Committee and Strategic Planning & Development Committee. The CoC recently formed a Strategic Planning & Development Committee to proactively address racial disparities in the homeless/ at-risk population and create strategies to be more inclusive. 2) Scoring Committee members used a combination of their community experience, disparity data and recommendations from equity literature to inform rating factors for project applications. Evaluation standards for renewal projects differ for PSH from RRH given the higher need population in PSH (e.g., chronically homeless people with significant behavioral/physical health issues). Our CoC also considers history of success with addressing the needs of local homeless population, particularly those over-represented. Our evaluation standards include capacity to provide culturally competent support. 3) The current composition of our CoC Scoring Committee includes 2 African American individuals, who represent Project Life, which provides housing services in Orange County. The CoC is actively recruiting new members who represent different races in Orange County, particularly those disproportionately represented in at-risk and homeless populations. 4) The CoC took the following actions to ensure consideration of racial disparities which are exacerbated by vulnerable risk factors during the rating and ranking process; projects were ranked/selected based on experience/capacity to serve chronically homeless, substance users, people with criminal history and/or disabilities, unsheltered; a clear outreach and supportive services plan to engage and serve the most vulnerable populations using the Housing First model. These scoring criteria are designed to prioritize projects that lower barriers historically faced by communities of color. As a result they will reduce inequities in projects and throughout the CoC geography.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	
	Describe in the field below:	
1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC’s local competition this year;	
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and	
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.	

(limit 2,500 characters)

1)The Orange County Housing Consortium utilizes objective and performance based criteria and outcome data to ensure strategic allocation of federal, state and local resources within the CoC jurisdiction to the most effective and high success probability projects and interventions to reduce homelessness. Projects are monitored twice annually. Data sources utilized include individual assessments; HMIS data; Consumer Surveys; and APRs. The Planning Coordinator routinely monitors all projects per CoC Board instructions. Programs that are not meeting the CoC goals of effectively servicing the needs of homeless in the community are first provided with technical assistance, and when indicated, corrective action plans are initiated. Any program unable to meet defined performance goals is then subject to reallocation per CoC policy. The Orange County Housing Consortium will consider involuntary reallocation if an agency cannot achieve desired outcomes after corrective action plans have been initiated; or an agency has overestimated project costs and is at risk of returning a portion of funding to HUD; or an agency receives a score of 70 or less as a result of the NOFO project renewal. A funded agency may voluntarily reallocate its funding if they submit to the board in writing that they are no longer receptive to receiving HUD funding and have developed their own strategy to serve the participants in their project. The final reallocation decisions are made by the Board after considering the recommendation of the Scoring/Ranking Committee. 2) The CoC did not identify projects meeting reallocation requirements in 2023. 3) The CoC did not reallocate project funds in 2023. 4) The CoC did not reallocate project funds in 2023 because CoC member projects did not meet the reallocation requirements per policy.

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

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

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

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/11/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/25/2023
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	09/25/2023
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2A. Homeless Management Information System (HMIS) Implementation

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

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

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

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

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

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/27/2023
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2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

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

(limit 2,500 characters)

1) Fearless! Hudson Valley, Inc. (FHV) is an active member of the CoC that provides services for individuals impacted by domestic violence, teen dating violence, human trafficking, stalking, sexual violence, and other types of crime victimization. As the sole provider of these specialized services in the CoC service region, FHV is bound by Federal and State legislation to maintain the confidentiality of all survivors who seek services. Additionally, they are prohibited from entering any client data into HMIS. FHV does, however, maintain and utilize a comparable data management application, EmpowerDB. This data program is highly secure and is used to collect all client information and demographics, as similarly reported by other CoC agencies into HMIS. 2) EmpowerDB is VAWA and 2023 HMIS compliant and also has the capability to generate the CoC APR and ESG CAPER CSV files in a zipped file for the purposes of ensuring consistency in reporting requirements and expectations for all CoC agencies. These reports do not include any personally identifying information and data is fully encrypted and inaccessible to anyone outside organization. FHV is permitted to share aggregate data, general trends, and hypothetical case studies, and also participates in the annual Point-In-Time Count.

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

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	217	22	195	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	47	0	47	100.00%
4. Rapid Re-Housing (RRH) beds	38	0	38	100.00%
5. Permanent Supportive Housing (PSH) beds	297	0	255	85.86%
6. Other Permanent Housing (OPH) beds	66	0	66	100.00%

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

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

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

(limit 2,500 characters)

N/A

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

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
--	-----

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

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/27/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/27/2023
--	---	------------

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

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

(limit 2,500 characters)

1) The CoC has conducted the PIT count of homelessness (sheltered and unsheltered) in our geographic area annually since 2007. We have become adept at this process with increasing accuracy year by year. The count always adheres to HUD requirements and is scheduled for one 24-hour period during the last week in January each year as prescribed. The CoC established a homeless Youth Advisory Committee (YAC) as a forum for on-going collaboration with youth, shelter and outreach providers, McKinney-Vento homeless liaisons, school personnel, and CoC youth service providers. Partnerships with youth education providers include Newburgh Head Start, Maternal Infant Services Network, Easter Seals of Port Jervis and Middletown ABCD (Head Start). Our CoC also partners with all 3 major LEAs in Port Jervis, Middletown and Newburgh; these have McKinney-Vento liaisons who actively participate in the CoC's Outreach Coalition. Fearless! (FHV), the CoC's DV provider, which serves children and accompanied youth who are survivors of DV, teen dating violence, human trafficking and other crimes, provides housing, advocacy and social supports facilitates achievement of stability, which in turn, prevents disproportionate use of health, mental health, incarceration, unemployment services in the future. FHV has worked to partner with other agencies to ensure service linkages necessary to support locating and sustaining housing. 2,3) The CoC includes data from FHV and McKinney-Vento liaisons in annual PIT count results and aggregates data from HMIS to assess the scope of community needs. The Youth Advisory Committee also serves as a forum to share current, real-time information about where homeless youth are most likely to be identified in preparation for the annual PIT count.

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

(limit 2,500 characters)

N/A. There have been no changes or revisions to our current PIT count or unsheltered PIT count implementation, including methodology or data quality.

2C. System Performance

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

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

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

(limit 2,500 characters)

1) The CoC determines risk factors by using past history, experience, and best industry practices, as well as evidence-based risk factor correlations to first time homeless clients (e.g., best predictors). Factors are generated through provider and consumer surveys, HMIS data, and cross collaboration with community resources. Top risk factors identified include, mental illness and SUD, marital breakdown, DV, transitions in/out of institutional care settings, affordability of housing and employment status, intellectual and developmental disabilities (IDD), history of evictions, incarceration and/or hospitalization 90 days plus, low social economic status, and young age with history of adversity and trauma. 2) A county-led housing workgroup addresses and identifies specific resources to reduce first time homelessness. Several agencies are applying/supplementing funding through ESSHI focusing on serving the identified needs such as inadequate housing subsidies for consumers, as well as the other factors noted above and potential mitigation strategies. We increased RRH beds using ESG CV dollars. We also partnered with Orange County to identify and reach out to at-risk families to provide rental supplements to prevent loss of housing. 3) The CoC Board is responsible for designing and implementing strategies to address the changing needs of the homeless population. The CoC Planning Coordinator (PC) under supervision of the collaborative applicant, HONOR, assumes responsibility for overseeing the CoC’s strategy to reduce first time homelessness.

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

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

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

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

In the field below:

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

(limit 2,500 characters)

1) Through the CE process the CoC prioritizes project funding based on a Housing First approach getting individuals rapid placement into permanent housing, while at the same time avoiding service participation and preconditions that might delay placement. Once placed into housing, the CoC utilizes Case Management and other resources to address chronic homelessness history, income deficits, past criminal history, active substance use, psychiatric/physical disabilities, and other factors. The CoC uses the vulnerability index tool, constantly updating scoring to reflect changing populations, prioritized around resident age, physical and mental status, substance usage, and DV status. Unsheltered clients are given priority. This assessment and rapid placement model is the core of the CoC's strategy for reducing the amount of time that individuals or families remain homeless. 2) Shelters within the CoC are under performance contracts with DSS to reduce shelter stays. DSS holds monthly case conferences with the CE system providers to review length of time spent homeless and addresses barriers to housing through referrals to mainstream resources, specialized case management, and housing placement assistance. The CE system providers review those clients in the HMIS system with the longest length of time homeless and prioritize head of households for permanent supportive housing projects. The CoC was also funded for a PH-RRH program was awarded the DV bonus. The CoC identifies and houses individuals and families by utilizing the CE list via HMIS through comprehensive intake and assessments. Using data within CE (HMIS) determines individuals with the longest length of homelessness. The CoC utilizes standardized assessment (CE Intake /Assessment and Vulnerability Index) tool to ensure that all homeless participants will be prioritized by the same vulnerability standards. This tool provides uniform decision criteria based upon vulnerability score. 3) The CoC Planning Coordinator assumes responsibility for overseeing the CoC's strategy to reduce the length of homelessness.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC’s Strategy	
	NOFO Section V.B.5.d.	
	In the field below:	
	1. describe your CoC’s strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;	
	2. describe your CoC’s strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to increase the rate that individuals and families exit to or retain permanent housing.	

(limit 2,500 characters)

1) The CoC utilizes several strategies to increase transitions to Permanent Housing (PH), including the HUD endorsed “Moving On” strategy, the use of payment vouchers to facilitate transition to PH, and intensive Case Management to assist clients during the transition process. Further, efforts to address employment status, job training, and physical and mental health are emphasized. Current data indicate that successful exits to permanent housing destinations for this cohort is 32%. The CoC’s strategy to increase the rate at which program participants from ES, SH, TH, RRH exit to PH destinations is centered on unsuccessful transitions, namely clients exiting ES. The CoC studied this measure utilizing the 2022 SPM Data Quality Report and determined that the greatest number of homeless who experience “unsuccessful” exits to PH destinations are those in the ES as many of these individuals “self-discharge” without notice to the ES operators. As a result, the CoC now has CM staff trained in individualized “Safe Exit Planning” with newly enrolled clients. Planning includes PH navigation and “safety net” strategies to maintain PH and avoid future episodes of homelessness. These strategies are implemented prior to discharge of ES client.

2) CoC HMIS data indicates PH retention trend continues to be strong and is achieved through very close monitoring of projects by the Planning Coordinator. Our CoC’s exit to/ PH retention rate is 97%. Strategies to retain or exit to PH (except RRH) includes intensive case management informed by a HF approach that intentionally creates a plan focused on retention, overall wellness and psycho-social trauma informed supportive services; individualized stabilizing protective factors that are monitored by project staff, and regular monitoring and quality of client’s linkages to mainstream resources. 3) The CoC PC under supervision of the Collaborative Applicant, HONOR, assumes responsibility for overseeing the CoC’s strategy to increase the rate that individuals and families exit to or retain permanent housing.

2C-4.	Returns to Homelessness—CoC’s Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
	1. describe your CoC’s strategy to identify individuals and families who return to homelessness;	
	2. describe your CoC’s strategy to reduce the rate of additional returns to homelessness; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1) The CoC reviews the HMIS monthly report identifying individuals and persons in families at greatest risk of returning to homelessness. Common factors identifying individuals include, but not limited to, mental illness and SUD, marital breakdown, DV, transitions in/out of institutional care settings, affordability of housing and employment status, intellectual and developmental disabilities (IDD), history of evictions, incarceration and/or hospitalization 90 days plus, low social economic status, and young age with history of adversity and trauma. 2) CoC strategies include reviewing CoC project discharge policies, identifying ways to track program participants (PP) at risk of return to homelessness, and providing strategic intervention to prevent returns. The CoC expanded CE to provide post discharge follow up and create a standardized program discharge procedure to ensure appropriate level of care at discharge. Additionally, the CoC ensures post discharge follow up, and individual placements continue to be reviewed during the Housing First Meetings where a multidisciplinary approach is utilized to review individual history of placements, successful/unsuccessful levels of care, and natural supports to reduce the rate of additional returns. Furthermore, Intensive Case Review (ICR) Meetings are held for participants that are identified with a higher rate of recidivism. Orange County replicated CoC's Housing First Model with a non HUD funded program. We have also worked with the county to enhance supports in response to the negative impact of the pandemic to facilitate access to housing. As a result of our strategies, our CoC saw an improvement in returns to homelessness in 2 years from 18% to 16% from FY2021 to FY2022. 3) The CoC PC under supervision of the CA; HONOR, assumes responsibility for overseeing the CoC's strategy.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	

	In the field below:
1.	describe your CoC's strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

(limit 2,500 characters)

1) The CoC collaborates with local chambers of commerce and disability advisory councils to increase program participants' (PP) access to skills and employment. HMIS data informs the CoC of successful program types and assists in developing systematic responses to help homeless PP increase employment and income. The CoC saw an overall increase in earned income for stayers from 11% to 12%; and leavers from 9% to 27% from FY2021 to FY2022. The Department of Social Services attends monthly CoC meetings and is an active collaborator assisting clients with employment assistance. Also, the Employment & Training Administration (ETA) assists clients in finding work. 2) The CoC works with mainstream employment organizations, the local ETA and Orange County Workforce Development Board to help individuals and families increase their cash income by hosting work fairs, use of job developers, work readiness programs, education programs and providing client transportation. CoC projects assess PPs at entry to determine income goals and help connect them with resources such as care management and legal services to increase income from mainstream sources. 3) The CoC Planning Coordinator under supervision of the Collaborative Applicant; HONOR, assumes responsibility for monitoring CoC's strategy to increase job and income growth from employment.

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

(limit 2,500 characters)

1) The CoC strategy to increase non-employment cash income to program participants (PP) includes providing access to SOAR training (SSI/SSDI Outreach, Access, and Recovery) to increase access to Social Security Administration (SSA) disability benefits for eligible individuals who have a mental illness, medical impairment, and/or a co-occurring substance use disorder. HMIS data informs the CoC of successful program types and assists in developing systematic responses to help homeless PPs increase income. Program CMs assess all PPs for eligibility for non-employee entitlement funding support, including disability and IDD. Further, the CoC provides assistance enrolling PPs in the Medicaid program if they are eligible. The CoC works with local Department of Social Services which provides access to non-employment cash sources. CoC projects assess PPs at entry to determine income goals and connect them with resources such as care management and legal services to increase non-employment cash income from available Federal and State mainstream benefit programs. The CoC saw an overall increase in non-employment cash income for leavers (36%) and stayers (27%) from FY2021 to FY2022. 2) The CoC PC under supervision of the Collaborative Applicant; HONOR, assumes responsibility for monitoring CoC's strategy to increase non employment cash income.

3A. Coordination with Housing and Healthcare

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

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

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
--	--	-----

3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

Project Name	Project Type	Rank Number	Leverage Type
HONOR Housing Fir...	PH-PSH	17	Housing

3A-3. List of Projects.

1. What is the name of the new project? HONOR Housing First V

2. Enter the Unique Entity Identifier (UEI): MCNVH8MKQ1K1

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 17

5. Select the type of leverage: Housing

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

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

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

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

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

(limit 2,500 characters)

N/A

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

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

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

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

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

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

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

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

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

(limit 2,500 characters)

N/A

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

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

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

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

	Did your CoC submit one or more new project applications for DV Bonus Funding?	No
Applicant Name		
This list contains no items		

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/21/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/22/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	09/22/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/22/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms For ...	09/22/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/22/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/22/2023
1E-5b. Local Competition Selection Results	Yes	Final Project Sco...	09/22/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	FY 2023 HDX Compe...	09/22/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/21/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/22/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No	MOUs Patstone & N...	09/25/2023

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms For One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores for all Projects

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: FY 2023 HDX Competition Report

Attachment Details

Document Description: Housing Leveraging Commitment

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

Document Description: MOUs Patstone & NYS HCR

Submission Summary

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

Page	Last Updated
1A. CoC Identification	08/04/2023
1B. Inclusive Structure	09/21/2023
1C. Coordination and Engagement	09/21/2023
1D. Coordination and Engagement Cont'd	09/21/2023
1E. Project Review/Ranking	09/20/2023
2A. HMIS Implementation	09/20/2023
2B. Point-in-Time (PIT) Count	09/20/2023
2C. System Performance	09/21/2023
3A. Coordination with Housing and Healthcare	09/21/2023
3B. Rehabilitation/New Construction Costs	08/23/2023
3C. Serving Homeless Under Other Federal Statutes	08/23/2023

4A. DV Bonus Project Applicants	09/21/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

JAMAR-EL FERGUSON
THE CORNERSTONE RESIDENCE
111 BROADWAY, APT. 1E
NEWBURGH, NY 12550

September 1, 2023

SUBJECT: Leadership and Participation of Individuals with Lived Experience of Homelessness
in CoC NY-602

To Whom It May Concern:

I, Jamar-El Ferguson, will be volunteering my experience and provide guidance to NY-602 CoC Board and serve as a member of CoC Lived Experience Advisory Division (LEAD), which is responsible for making decisions for the homeless in our community.

Our LEAD Advisory Board has housing providers, not-for profit agencies, local government, and Individuals with Lived Experience of Homelessness (IWLEH) to create, implement and revise policies for our CoC governance and decision-making activities.

Our goal is to improve the CoC's ability to serve individuals and families experiencing homelessness with severe service needs in Orange County.

Sincerely,



CoC Lived Experience Advisory Board Member



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	HONOR- ehg
Acronym (If Applicable)	
Year Incorporated	1974
EIN	MCNVH8MKQ1K1
Street Address	38 Seward Avenue Middletown, NY
Zip Code	10940

Project Information	
Project Name	Steven Saunders Residence
Project Budget	95,265
Grant Number	NY0449L2T022215
Name of Project Director	Kelly Zago
Project Director Email Address	kzago@honorehg.org
Project Director Phone Number	845-343-7115
Which best describes the project *	Permanent Supportive Housing
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	People in Recovery

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Christopher Molinelli
CEO Email Address	cmolinelli@honorehg.org
CEO Phone Number	845-343-7115
Name of Staff Member Guiding Assessment	Kelly Zago
Staff Email Address	kzago@honorehg.org
Staff Phone Number	845-343-7115

Assessment Information	
Name of Assessor	Michelle Herrera
Organizational Affiliation of Assessor	HONOR
Assessor Email Address	mherrera@honorehg.org
Assessor Phone Number	845-467-9071
Date of Assessment	Sep 08 2023



Housing First Standards: Assessment Summary

HONOR
8-Sep-23

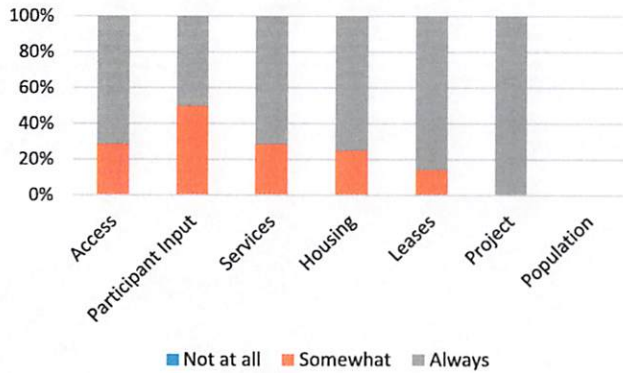
Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Your score:	156
Max potential score:	204

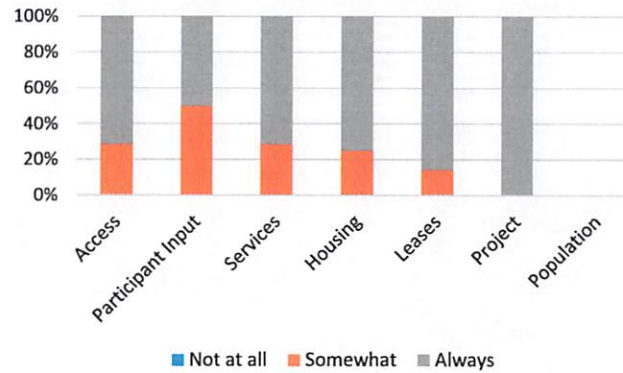
Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



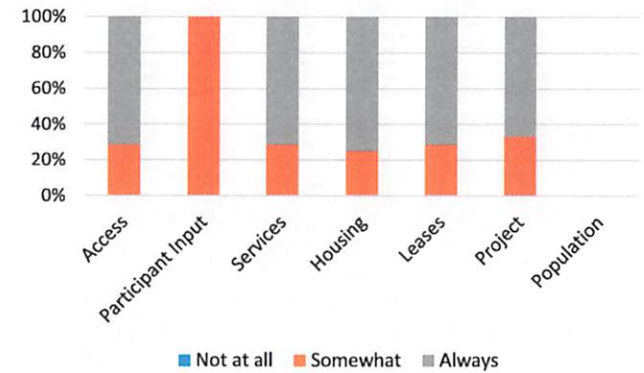
Percentage of Standards "Said"



Percentage of Standards "Documented"



Percentage of Standards "Done"



Michelle Herrera

From: Michelle Herrera
Sent: Wednesday, August 9, 2023 11:56 AM
To: Amie Morganbesser; Angela Jo Henze; Anna Waz ; Anne Marie Beekman; Bill Jolly; Carolee Maurice CMaurice@orangecountygov.com; Catherine Emestica; Cathey Duryea <cduryea@asfl.org>; Cathie Jones; Cathy Allen <callen@caresny.org>; Charlie Quinn; Cheryl Cohen <ccohen@recap.org>; Chris Molinelli; Colin Jarvis; Corey Allen; Curtis Benton <cbenton@asfl.org>; Darcie Miller; Dean Scher; Debbie Perkins; Diahn Scott; Diana Archer darcher@osborneny.org; Doug Hovey ; dsannesy@gmail.com; Edwin Leon eleon@honorehg.org; Eileen Clifford; Erin Cousins ECousins@orangecountygov.com; Farrell, Christian; George Haddad <ghaddad@HVJC.ORG>; Glynnis Hey ghey@newburghministry.org; Hector Morell Hector.Morell@cccsos.org; Jack Austin (jackaustinvoices@gmail.com); Jacqueline Perez <Jacqueline.Perez@cccsos.org>; Jenn Durning (jdurning@honorehg.org); Jesse Howard president@newburghinterfaith.org; Juan Lantigua <jlantigua@myindependentliving.org>; Judy Stanger jstanger@mhaorangeny.com; Julie Ubinas julie.ubinas@cccsos.org; Kathleen Morgan; Kathleen Revene ; Kelly Zago (kzago@honorehg.org); Kellyann Kostyal-Larrier kkostyal@fearlessv.org; Lisa Silverstone; Malmendier, Amanda; Marcos H. Campos (mcampos@newburghministry.org); Marilyn Pierce midduce@hvc.rr.com; Martinez, Giselle <GMartinez@cityofnewburgh-ny.gov>; mclark@caresny.org ; Megan Jackson (mjackson@pathstone.org) ; Mervin Otero motero@osborneny.org; Michele Duggan <michelecduggan@gmail.com>; ; Michelle Herrera; mjanecko@schousingny.org; Neline Rivera; Nicole Andersen (nandersen@orangecountygov.com); Nolly Climes; Pat O'Brien <pobrien@pathstone.org>; Paul Stolz; 'Phyllis'; Rachel S.Simons; Roberta West rwest@newburghinterfaith.org; Sarita Green; Scott Mendelson; Shannon Kelly <shannon.kelly@cccsos.org>; Shirley Salomon <Ssalomon@schousingny.org>; Stephanie Molinelli smolinelli@fearlessv.org; Stewart, Mandy <MStewart@orangecountygov.com>; Tammy Rhein; Tara Barnhart <tbarnhart@pathstone.org>; Terri Torrchio; Thomas Bauer <TBauer@mhaorangeny.com>; Vincent Marasco

Subject: CoC NOFO FY 2023 RFP Announcement
Attachments: 2023 RFP Announcement Letter.pdf

Importance: High

Good Morning Members,

Please see attached FY 2023 RFP Announcement for CoC Notice of Funding Opportunity. Please share with your distribution lists.

Thank you,

*Michelle Herrera
CoC Planning Coordinator
HONOR
185 Monhagen Avenue
Middletown, NY 10940
Office: 845-343-7115 ext. 314
Cell: 845-467-9071*

ORANGE COUNTY HOUSING CONSORTIUM



Partners in Housing
Transforming Lives

President, Christopher Molinelli
Vice President, Judy Stanger
Secretary, Charles Quinn
Treasurer, Catherine Jones

August 09, 2023

CALL FOR FUNDING PROPOSALS

The Department of Housing and Urban Development has announced the FY 2023 Continuum of Care (CoC) Program Competition. As the CoC Planning Coordinator of the Orange County Housing Consortium I have been instructed by the Board to provide this Call for Funding Proposals and encourage Orange County stakeholders who have never applied for this funding to consider doing so. We are now accepting requests for Permanent Housing and Domestic Violence Projects eligible under the CoC Bonus and DV Bonus funding through the NOFO (Notice of Funding Opportunity) CoC Program Competition.

The Orange County CoC is currently seeking applications for the following project types:

- 1. CoC Bonus for Permanent Housing (PH) in the amount of \$221,750**
- 2. Domestic Violence (DV) Permanent Housing (PH) in the amount of \$217,790**

Please see the FY 2023 RFP OCHC CoC New Project Application for detailed information.

If your agency is interested in applying for these funds, please submit a letter of interest to CoC Planning Coordinator, Michelle Herrera, by **Tuesday, August 15, 2023** at mherrera@honorehg.org.

Please include the following information in your letter:

- Agency Name and contact information
- Proposed location for the project
- Project type

Sincerely,

Michelle Herrera

CoC Planning Coordinator
Orange County Housing Consortium



1. *CoC Bonus for Permanent Housing (PH) in the*
2. *Domestic Violence (DV) Permanent Housing (P*

Please see the FY 2023 RFP OCHC CoC New Project App

If your agency is interested in applying for these Planning Coordinator, Michelle Herrera, by **Tuesday, Au**

Please include the following information in your letter:

- Agency Name and contact information
- Proposed location for the project
- Project type

Sincerely,

Michelle Herrera

CoC Planning Coordinator
Orange County Housing Consortium



Mental Health Association in Orange County, Inc.



mhainoc

mhainoc

mhaorangeny.com

Open now

Photos

[See all photos](#)



LIKE

COMMENT



Mental Health Association in Orange County, Inc.

August 11 · 🌐

MHA has Exciting news: The FY 2023 Continuum of Care (COC) Program Competition by HUD is here! 🎉 If you're a housing advocate or service provider, listen up. We're welcoming new faces to apply for funding. 🙌

Ready to make a difference? We're accepting requests for Permanent Housing and Domestic Violence Projects with CoC Bonus and DV Bonus funding. 🏠👏 Submit your letter of interest by Aug 15, 2023, to Michelle Herrera at mherrera@honorehg.org. Let's shape Orange County's... [See more](#)



August 09, 2023

CALL FOR FUNDING PROPOSALS

The Department of Housing and Urban Development has announced the FY 2023 Continuum of Care (COC) Program Competition. As the CoC Planning Coordinator of the Orange County Housing Consortium I have been instructed by the Board to provide this Call for Funding Proposals and encourage Orange County stakeholders who have never applied for this funding to consider doing so. We are now accepting requests

Connect with Mental Health Association in Orange County, Inc. on Facebook

Log In

or

Create new account

Manage Page

Orange County Continuum of Care/Housing Consortium

- Professional dashboard
- Insights
- Ad Center
- Create ads
- Settings
- More tools
- Meta Business Suite

Orange County Continuum of Care/Housing Consortium

Page health: good
Compared to similar Pages with high engagement.

- Link your WhatsApp account
- Invite friends to like your Page
- See more

Intro
The COC is a representative group and functions as a network of organizations/individuals with capac

Edit bio

Page · Nonprofit organization

+1 845-343-7115

mherrera@honorehg.org

Not yet rated (2 Reviews)

Featured
People won't see this unless you pin something. [Manage](#)

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[List view](#) [Grid view](#)

Orange County Continuum of Care/Housing Consortium
2h ·

The Department of Housing and Urban Development has announced the FY 2023 Continuum of Care (COC) Program Competition and the deadline for our local competition is September 28, 2023. The deadline for letters of interest was Friday, August 18, 2023 and the deadline for a paper submission is Friday, August 25, 2023. Each year the Orange County Housing Consortium (OCHC) competes with other Continuums across the country to secure federal funds to end homelessness through the U.S... [See more](#)

[See insights and ads](#) [Boost post](#)

Like Comment Share

Write a comment...

Michelle Herrera

From: Cathie Jones <cjones@safe-harbors.org>
Sent: Thursday, August 10, 2023 1:25 PM
To: Michelle Herrera
Subject: [EXTERNAL]FW: Orange County Housing Consortium RFP Posting
Attachments: FB post.jpg

Here you go.

Facebook screen shot attached.

Website: <https://safe-harbors.org/the-cornerstone/> ✨

Instagram:



Thanks

Cathie

Orange County Housing Consortium CoC

2023 Renewal Evaluation Standards and Scoring Tool

For all criteria, performance below the lowest indicated benchmark will receive zero points.

Evaluation Criteria	2023 Benchmark / Actual Average Results for FY2022	FY2022 SPM Results	2024 Proposed Standard	2022 Points	2nd 2022 Standard	2022 Points	3rd 2022 Standard	2022 Points
PERFORMANCE								
Efficient Use of Resources								
Spending on last year's HUD grant ¹	See Far Right Column for Benchmark	NA	Same	10	Projects over \$2M must spend at least 95% & leave less than \$75K unspent. Projects under \$100K must spend at least 90%. All other projects must spend at least 95% & leave less than \$50K unspent.			
Eligibility								
At least one Adult Participant per household with previous residence that indicates qualified literal homelessness	100%/104%	NA	100%	10				
PSH Only: At least one participant per household has a disability	100%/105%	NA	100%	10				
Participant Income/Resources								
Non-Youth Programs only: Percentage of adult participants who increased EARNED INCOME from entry to exit/follow-up (leavers and stayers) ²	25% PSH/10% 25% RRH/20% 40% TH/16%	9%	25% PSH 25% RRH 40% TH	5	20% PSH 20% RRH 30% TH	3	15% PSH 15% RRH 20% TH	1
Youth Programs only: Percentage of adult participants who increased EARNED INCOME from entry to exit/follow-up (leavers and stayers) ²	20%/31% (PSH = 0%, RRH = 60%, TH = 31%)	No specific youth outcome reported	20% PSH 40% RRH 40% TH	5	15% PSH 30% RRH 30% TH	3	10% PSH 20% RRH 20% TH	1
Percentage of adult participants who increased OTHER INCOME (NON-EARNED) from entry to exit of f/u (leavers and stayers) ²	35% PSH/45% 35% RRH/15% 45% TH/28%	36%	40% PSH 25% RRH 35% TH	10	30% PSH 15% RRH 25% TH	6	20% PSH 10% RRH 20% TH	3
All adult participants with NON-CASH benefits excluding health insurance (leavers and stayers) ^{2 & 3}	95%/90%	NA	95%	10	85%	6	75%	1
All participants with Health Insurance (leavers & stayers) ³	95%/93%	NA	95%	10	85%	6	75%	3
Rapid Exit/Length of Stay (LOS)								
TH Only (Non-DV): LOS for participants is 1 year or less	85%/87%	Avg LOT H'less = 122 days but bundled with Shelter & Safe Haven	90%	10	80%	6		
TH Only (DV Projects): LOS is 2 years or less	75%/97%		85%	10	75%	6		
Housing Stability								
PSH Only: Percentage of participants who remain in PSH or exited to permanent housing ⁴	95%/97%	98%	95%	10	90-94%	6	85-89%	2
RRH and TH Only: Percentage of leavers who exited to permanent housing ⁴	90%/90%	48% but includes Shelter	95%	10	85%	6		
Percentage of leavers who exited to homeless shelter, DV shelter, streets or unknown ⁴	Less than or equal to 10%/5%	RTH w/in 6 mos after PH exit: ES-13%, TH-7%, PH-5%	Less than or equal to 5%	10	6-10%	6		
CONSUMER SURVEYS								
Consumer Surveys - Response Rate	35%/69%	NA	35%	5	25%	3		
Consumer Surveys - Results	50 Points/43.9	NA	50.0	5				
COMPLIANCE								
Percentage of participants accepted into the program from the by-name list between October 1, 2020 and September 30, 2022 (excludes DV projects)	100%	NA	100%	5				
A Lateness Penalty: 10 points deducted for each document submitted late including Paper Consumer Surveys, Project Data Form, Agency Data Form, and/or Paper APR	NA	NA	Same	minus 10				
PERFORMANCE IMPROVEMENT (formerly CORRECTIVE ACTION) THRESHOLD CRITERIA								
Occupancy based on quarterly unit utilization (excludes new projects)	90%/108%	NA	90%	N/A				

¹ Excludes new projects and SROs.

² Excludes participants who are not yet required to have an annual assessment.

³ Excludes participants who are ineligible for benefits

⁴ Excludes deceased participants or programs with only 1 exit with a bad outcome. When a person exits a DV project to a shelter for safety purposes, agencies should report this as a "transfer" rather than an "exit to shelter" for the purposes of this evaluation.

DATA TO BE COLLECTED FOR DESCRIPTIVE OR TRACKING PURPOSES OR SETTING BENCHMARK FOR 2023- NOT SCORED

Evaluation Criteria	2023 Benchmark/Actual Results	FY 2022 SPM Results	2023 Benchmark	Notes
HMIS Universal Data Elements: Error rate of less than 5% for a minimum of 13 of 16 tracked data elements		NA	Same	Descriptive - result is average score for all programs. 15.4 data elements had error rate of <5%
PSH & RRH Only: Average length of time from matched to housed	NA	NA	85% housed within 30 days	Get Baseline for 2023 Evaluation
RRH Only: LOS from date housed is 6 months or less	50%/42%	NA	50%	Descriptive
Cost per household served for all projects and cost per PH exit for TH and RRH	None	NA	None	Descriptive

Newburgh, Middletown, Orange County CoC 2023 Individual Program Evaluation Report

Agency Name:

Component Type:

Program Name:

Grant Number:

Number of Participants:

Households:

Number of Units in Application:

Number of Stayers without required Annual Assessment:

Number of Leavers:

Adult Leavers:

Total Grant:

Amount Unspent:

Evaluation Criteria	2023 Benchmark/ Standard PSH	Program Performance	2023 Points	Awarded Points
PERFORMANCE				
Spending on last year's HUD grant ¹	Projects under \$100K must spend at least 90%. All other projects must spend at least 95% and leave less than 50K unspent	100%	10	
At least one adult participant per household with previous residence that indicates qualified literal homelessness	100%	100%	10	
PSH Only: At least one participant per household has a disability	100%	100%	10	
Percentage of all adult participants who increased EARNED INCOME from entry to exit/follow-up (leavers and stayers) ²	25%	57%	5	
Youth Programs Only: Percentage of adults participants who increased EARNED INCOME from entry to exit/follow-up (leavers and stayers)	20%	N/A	N/A	N/A
Percentage of all adult participants who increased OTHER INCOME (NON- EARNED) from entry to exit/follow-up (leavers and stayers) ²	35%	14%	10	
All adult participants with NON-CASH benefits excluding health insurance (leavers and stayers) ²	95%	57%	10	
All participants with health insurance (leavers and stayers) ²	95%	98%	10	
PSH Only: Percentage of all participants who remain in PSH or exited to permanent housing ³	95%	100%	10	
Percentage of all leavers who exited to shelter, streets or unknown ³	Less than or equal to 10%	0%	10	
Performance total score			85	
CONSUMER SURVEYS				
Consumer Surveys - Response Rate	35%	0%	5	
Consumer Surveys - Results	50 Points		5	
Consumer Surveys total score			10	
COMPLIANCE				
All project must/and do only accept participants from the CE list in HMIS during the period of October 1, 2021 to September 30, 2022 ⁴	100%	100%	5	
Compliance total score			5	
SCORING SUMMARY				
Total			100	
Total Score, converted to a percentage	formula = (Points Awarded / Points Available for Scoring)			
Lateness Penalty: 10 points deducted for each document submitted late.				
Grand Total				

¹ Excludes new projects.

² Excludes Participants who are not yet required to have an annual assessment

³ Excludes deceased participants and programs with only one exit resulting in a negative outcome. Also excludes participants who exit a project to a shelter for safety purposes.

⁴ Excludes DV programs. DV provider participates in CE meetings utilizing de-identifying client information.

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

<u>SCORES</u>	
Section 1 – Organizational Experience and Capacity	10
Section 2 –Unmet Need	5
Section 3 – Housing First	20
Section 4 – Supportive Service	20
Section 5 - Timeliness & Application/Budget Quality	15
Section 6 - DV Bonus (if applicable)	20
Section 7 – Project Expansion (if applicable)	20
Section 8 – Coordinated Entry (if applicable)	20
Bonus Points	10
Total Score 80/80	

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Section 1 – Organizational Experience and Capacity - 10 points
<p>See Section #1: (2 points)</p> <ul style="list-style-type: none">○ Do the applicant/subrecipient and key partner organization(s) appear to have the experience to successfully operate a HUD funded permanent housing program for homeless persons?○ Do the relevant organizations demonstrate significant and long-standing experience:<ul style="list-style-type: none">▪ operating successful Housing First programs?▪ linking participants to Medicaid and other mainstream services?▪ increasing participant income, including through SOAR?▪ helping participants to stabilize in housing?▪ assessing interest in/assisting with moving on from PSH (if applicable)?▪ renting units and administering rental assistance (if applicable)?
<p>See Section #1: (2 point)</p> <p>Based on outcome data provided, does the applicant appear to have a solid track record of achieving measurable success on relevant outcomes in projects they are currently operated that are similar to the projects they are proposing?</p>
<p>See Section #1:</p> <p>Is there a clear organizational structure for managing operations, coordinating among departments within the agency and with partner organizations and an adequate financial accounting system?</p>
<p>See Section #1: (2 point)</p> <p>Does the organization capacity to effectively use federal funds, and ensure timely project start up and full expenditure of new project funds?</p>
<p>See Section #1 (2 points)</p> <ul style="list-style-type: none">○ Has the organization demonstrated sufficient capacity related to:<ul style="list-style-type: none">▪ Resolving monitoring/audit findings?▪ Fully spending grant funds?▪ Avoiding/resolving outstanding arrears?▪ Regularly drawing down funds?▪ Timely submission of reports?

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Section 2 – Unmet Need (5 Points)

Extent to which the applicant:

- Clearly demonstrates (if applicable) that additional services are essential to assist eligible participants in one or more existing PSH projects to obtain and/or retain permanent housing?

Extent to which the applicant:

- Clearly demonstrates that there is an unmet need in for the type of project and the populations they are proposing to serve?
- Supported the existence of the unmet need with data?

Section 3 – Housing First (20 points)

Extent to which the applicant:

- Clearly describe a program design that is consistent with a Housing First approach (i.e., A model of housing assistance that is offered without preconditions, such as sobriety or a minimum income threshold, or service participation requirements; rapid placement and stabilization in permanent housing are primary goals)
- Does the applicant clearly demonstrate a model that offers initial access to housing without preconditions, such as sobriety, income requirements and service participation?
- Does the applicant clearly demonstrate a model in which continuation of housing is not contingent on service participation requirements or compliance with treatment or rules other than as established in a lease?
- Does the applicant clearly demonstrate that rapid placement and stabilization in permanent housing are primary goals of the project?
- Is there a clear description of how eligible participants obtain housing?
- Does the organization clearly explain how participants will be assisted to maintain their housing unit?
- Does the applicant clearly describe a project design that is adequate to accomplish those goals?

Section 4- Supportive Services (20 points)

Assistance with obtaining mainstream benefits (10 points)

- Is there a clear plan assist participants to secure mainstream benefits and other services?
- Does the project propose to provide all specified activities (i.e., transportation, follow-up, technical assistance) to maximize benefits/employment?
- To what extent are community amenities accessible?

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Assistance with increasing income/employment and promoting independence (10 points)

- Is there a clear plan to assist households in increasing their income from any source and/or increase income through employment?
- Does the organization describe a sound plan for promoting independence for participants?

Section 5: Timeliness & Application/Budget Quality (15 points)

(3 point)

- Extent to which the applicant demonstrated an adequate plan for rapid project start-up

Evaluate based on the entire application
Extent to which the applicant: (3 points)

- consistently followed instructions, completed all of and only the relevant sections of the application, deleted any irrelevant sections, included all required attachments?

See Section #6
Extent to which the project budget (9 points)

- was completed in accordance with the instructions?
- met the minimum matching requirement?
- included only eligible costs?
- provided sufficient detail?
- made sense given the project description and target population?

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Section 6 – DV BONUS & RRH (if applicable - 20 points)

See Section #4 DV Bonus Question #1. (6 points)

Do the applicant, subrecipient and key partner organization(s) appear to have experience providing supportive services and housing for homeless persons, who are survivors of domestic violence, dating violence, stalking, and human trafficking, including:

- Using a low-demand, Housing First model to rapidly locate permanent housing for survivors?
- Designing and operating programs that help survivors to increase their income and achieve long-term housing stability?
- Designing and operating programs that are focused on safety?
- Designing and operating programs that are strengths-based and survivor-driven and offer a range of options to support survivors to rebuild control over their lives and improve safety for themselves and their families?
- Designing and operating programs that are trauma-informed?
- Designing and operating programs that help survivors to navigate a range of systems
- Designing and operating programs that advocate for survivors' autonomy, safety, independence and housing stability

See Section #4 DV Bonus Question #2. (6 Points)

Extent to which the applicant demonstrates how the project will meet the specific needs of survivors, including

- Using a low-demand, Housing First model to rapidly locate permanent housing for survivors.
- Helping survivors to increase their income and achieve long-term housing stability.
- Ensuring a focus on safety.
- Ensuring that services are strengths-based and survivor-driven and offer a range of options to support survivors to rebuild control over their lives and improve safety for themselves and their families.
- Ensuring that services are trauma-informed.
- Helping survivors to navigate a range of systems

See Section #4 DV Bonus Question #3. (8 Points)

Based on outcome data and/or description provided, does the applicant appear to have a solid track record of achieving measurable success on relevant outcomes in projects they are currently operated that are serving DV survivors?

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Section 7 – Project Expansion (if applicable 20 points)

Extent to which the applicant demonstrates the following:

- address the entire scope of the project
- Location of units
- How the project implements housing first.
- Number of single adults and/or the number of families with children to be served at a point-in-time when the project is at full capacity, and annually
- Quantified Project Outcomes
- Goals of project
- Coordination with community partners
- Demonstrated timeliness in moving participants into permanent housing?
- Demonstrated low barrier project?
- Does or will participate in HMIS?
- How participants will be assisted to obtain and remain in PH?

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Section 8 – Coordinated Entry (if applicable 20 points)

- Extent to which the applicant demonstrates the following:
- address the entire scope of the project
 - covering the entire geography of the CoC
 - Easily accessible
 - Advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.
 - Utilizing a comprehensive, standardized assessment?
 - The referral process and how they ensure that participants are directed to appropriate housing and/or services.

Bonus Points – (10 points)

Bonus points for projects that provide information on their coordinated effort with mainstream employment organizations (including examples). (4 points)
Bonus points for projects that provide information a robust description of actives that will assist participants to increase income. (6 points)

Newburgh, Middletown, Orange County CoC 2023 Individual Program Evaluation Report

Agency Name: Regional Economic Community Action Program
 Program Name: RECAP Veterans 811
 Start date: 5/01/2021 end date 04/30/2022
 Number of Participants: 30
 Number of Leavers: 6

Households: 26
 Adult Leavers: 6

Component Type: PH
 Grant Number: NY811

Number of Units in Application: 16
 Number of Stayers without required Annual Assessment: 5
 Total Grant: \$ 241,331
 Amount Unspent:\$0

Evaluation Criteria	2023 Benchmark/ Standard PSH	Program Performance	2023 Points	Awarded Points
PERFORMANCE				
Spending on last year's HUD grant ¹	Projects under \$100K must spend at least 90%. All other projects must spend at least 95% and leave less than 50K unspent	100%	10	10
At least one adult participant per household with previous residence that indicates qualified literal homelessness	100%	100%	10	10
PSH Only: At least one participant per household has a disability	100%	100%	10	10
Percentage of all adult participants who increased EARNED INCOME from entry to exit/follow-up (leavers and stayers) ²	25%	17%	5	0
Youth Programs Only: Percentage of adults participants who increased EARNED INCOME from entry to exit/follow-up (leavers and stayers)	20%	N/A	N/A	N/A
Percentage of all adult participants who increased OTHER INCOME (NON- EARNED) from entry to exit/follow-up (leavers and stayers) ²	35%	44%	10	10
All adult participants with NON-CASH benefits excluding health insurance (leavers and stayers) ²	95%	96%	10	10
All participants with health insurance (leavers and stayers) ²	95%	100%	10	10
PSH Only: Percentage of all participants who remain in PSH or exited to permanent housing ³	95%	100%	10	10
Percentage of all leavers who exited to shelter, streets or unknown ³	Less than or equal to 10%	0%	10	10
Performance total score			85	80
CONSUMER SURVEYS				
Consumer Surveys - Response Rate	35%	100%	5	5
Consumer Surveys - Results	50 Points		5	5
Consumer Surveys total score			10	10
COMPLIANCE				
All project must/and do only accept participants from the CE list in HMIS during the period of October 1, 2021 to September 30, 2022 ⁴	100%	100%	5	5
Compliance total score			5	5
SCORING SUMMARY				
Total			100	95
Total Score, converted to a percentage		formula = (Points Awarded / Points Available for Scoring)		95%
Lateness Penalty: 10 points deducted for each document submitted late.				0
Grand Total				95

¹ Excludes new projects.

² Excludes Participants who are not yet required to have an annual assessment

³ Excludes deceased participants and programs with only one exit resulting in a negative outcome. Also excludes participants who exit a project to a shelter for safety purposes.

⁴ Excludes DV programs. DV provider participates in CE meetings utilizing de-identifying client information.

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Name: HONOR Housing First V

	Points	Awarded Points
Section 1 – Organizational Experience and Capacity	10	10
Section 2 –Unmet Need	5	5
Section 3 – Housing First	20	18
Section 4 – Supportive Service	20	20
Section 5 - Timeliness & Application/Budget Quality	15	14
Section 6 - DV Bonus (if applicable)	20	N/A
Section 7 – Project Expansion (if applicable)	20	N/A
Section 8 – Coordinated Entry (if applicable)	20	N/A
Bonus Points	10	10
Total Score	80/80	77/80 97%

FY 2023 Orange County Continuum of Care Scoring Sheet for NEW Project Applications

Section 1 – Organizational Experience and Capacity - 10 points	
<p>See Section #1: (2 points)</p> <ul style="list-style-type: none"> ○ Do the applicant/subrecipient and key partner organization(s) appear to have the experience to successfully operate a HUD funded permanent housing program for homeless persons? ○ Do the relevant organizations demonstrate significant and long-standing experience: <ul style="list-style-type: none"> ▪ operating successful Housing First programs? ▪ linking participants to Medicaid and other mainstream services? ▪ increasing participant income, including through SOAR? ▪ helping participants to stabilize in housing? ▪ assessing interest in/assisting with moving on from PSH (if applicable)? ▪ renting units and administering rental assistance (if applicable)? 	<p style="font-size: 2em; color: blue;">✓</p>
<p>See Section #1: (2 point)</p> <p>Based on outcome data provided, does the applicant appear to have a solid track record of achieving measurable success on relevant outcomes in projects they are currently operated that are similar to the projects they are proposing?</p>	<p style="font-size: 2em; color: blue;">✓</p>
<p>See Section #1:</p> <p>Is there a clear organizational structure for managing operations, coordinating among departments within the agency and with partner organizations and an adequate financial accounting system?</p>	<p style="font-size: 2em; color: blue;">✓</p>
<p>See Section #1: (2 point)</p> <p>Does the organization capacity to effectively use federal funds, and ensure timely project start up and full expenditure of new project funds?</p>	<p style="font-size: 2em; color: blue;">✓</p>
<p>See Section #1 (2 points)</p> <ul style="list-style-type: none"> ○ Has the organization demonstrated sufficient capacity related to: <ul style="list-style-type: none"> ▪ Resolving monitoring/audit findings? ▪ Fully spending grant funds? ▪ Avoiding/resolving outstanding arrears? ▪ Regularly drawing down funds? ▪ Timely submission of reports? 	<p style="font-size: 2em; color: blue;">✓</p>

2 pts

2 pts

2 pts

2 pts

2 pts

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

Section 2 –Unmet Need (5 Points)

Extent to which the applicant:

- Clearly demonstrates (if applicable) that additional services are essential to assist eligible participants in one or more existing PSH projects to obtain and/or retain permanent housing?

Extent to which the applicant:

- Clearly demonstrates that there is an unmet need in for the type of project and the populations they are proposing to serve?
- Supported the existence of the unmet need with data?

✓ 5pts

Section 3 – Housing First (20 points)

Extent to which the applicant:

- Clearly describe a program design that is consistent with a Housing First approach (i.e., A model of housing assistance that is offered without preconditions, such as sobriety or a minimum income threshold, or service participation requirements; rapid placement and stabilization in permanent housing are primary goals)
- Does the applicant clearly demonstrate a model that offers initial access to housing without preconditions, such as sobriety, income requirements and service participation?
- Does the applicant clearly demonstrate a model in which continuation of housing is not contingent on service participation requirements or compliance with treatment or rules other than as established in a lease?
- Does the applicant clearly demonstrate that rapid placement and stabilization in permanent housing are primary goals of the project?
- Is there a clear description of how eligible participants obtain housing?
- Does the organization clearly explain how participants will be assisted to maintain their housing unit?
- Does the applicant clearly describe a project design that is adequate to accomplish those goals?

✓ 18pts

Section 4- Supportive Services (20 points)

Assistance with obtaining mainstream benefits (10 points)

- Is there a clear plan assist participants to secure mainstream benefits and other services?
- Does the project propose to provide all specified activities (i.e., transportation, follow-up, technical assistance) to maximize benefits/employment?
- To what extent are community amenities accessible?

20pts

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

<p>Assistance with increasing income/employment and promoting independence (10 points)</p> <ul style="list-style-type: none"> • Is there a clear plan to assist households in increasing their income from any source and/or increase income through employment? • Does the organization describe a sound plan for promoting independence for participants? 	✓
<p>Section 5: Timeliness & Application/Budget Quality (15 points)</p>	
<p>(3 point)</p> <ul style="list-style-type: none"> ○ Extent to which the applicant demonstrated an adequate plan for rapid project start-up 	✓ 2 pts
<p>Evaluate based on the entire application Extent to which the applicant: (3 points)</p> <ul style="list-style-type: none"> ○ consistently followed instructions, completed all of and only the relevant sections of the application, deleted any irrelevant sections, included all required attachments? 	✓ 3 pts
<p>See Section #6 Extent to which the project budget (9 points)</p> <ul style="list-style-type: none"> ○ was completed in accordance with the instructions? ○ met the minimum matching requirement? ○ included only eligible costs? ○ provided sufficient detail? ○ made sense given the project description and target population? 	✓ 9 pts

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

N/A

Section 6 – DV BONUS & RRH (if applicable - 20 points)

See Section #4 DV Bonus Question #1. (6 points)

Do the applicant, subrecipient and key partner organization(s) appear to have experience providing supportive services and housing for homeless persons, who are survivors of domestic violence, dating violence, stalking, and human trafficking, including:

- Using a low-demand, Housing First model to rapidly locate permanent housing for survivors?
- Designing and operating programs that help survivors to increase their income and achieve long-term housing stability?
- Designing and operating programs that are focused on safety?
- Designing and operating programs that are strengths-based and survivor-driven and offer a range of options to support survivors to rebuild control over their lives and improve safety for themselves and their families?
- Designing and operating programs that are trauma-informed?
- Designing and operating programs that help survivors to navigate a range of systems
- Designing and operating programs that advocate for survivors' autonomy, safety, independence and housing stability

See Section #4 DV Bonus Question #2. (6 Points)

Extent to which the applicant demonstrates how the project will meet the specific needs of survivors, including

- Using a low-demand, Housing First model to rapidly locate permanent housing for survivors.
- Helping survivors to increase their income and achieve long-term housing stability.
- Ensuring a focus on safety.
- Ensuring that services are strengths-based and survivor-driven and offer a range of options to support survivors to rebuild control over their lives and improve safety for themselves and their families.
- Ensuring that services are trauma-informed.
- Helping survivors to navigate a range of systems

See Section #4 DV Bonus Question #3. (8 Points)

Based on outcome data and/or description provided, does the applicant appear to have a solid track record of achieving measurable success on relevant outcomes in projects they are currently operated that are serving DV survivors?

**FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications**

AAA

Section 7 – Project Expansion (if applicable 20 points)

Extent to which the applicant demonstrates the following:

- address the entire scope of the project
- Location of units
- How the project implements housing first.
- Number of single adults and/or the number of families with children to be served at a point-in-time when the project is at full capacity, and annually
- Quantified Project Outcomes
- Goals of project
- Coordination with community partners
- Demonstrated timeliness in moving participants into permanent housing?
- Demonstrated low barrier project?
- Does or will participate in HMIS?
- How participants will be assisted to obtain and remain in PH?

FY 2023 Orange County Continuum of Care
Scoring Sheet for NEW Project Applications

N/A

Section 8 – Coordinated Entry (if applicable 20 points)

Extent to which the applicant demonstrates the following:

- address the entire scope of the project
- covering the entire geography of the CoC
- Easily accessible
- Advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.
- Utilizing a comprehensive, standardized assessment?
- The referral process and how they ensure that participants are directed to appropriate housing and/or services.

Bonus Points – (10 points)

Bonus points for projects that provide information on their coordinated effort with mainstream employment organizations (including examples). (4 points)

Bonus points for projects that provide information a robust description of actives that will assist participants to increase income. (6 points)

ORANGE COUNTY HOUSING CONSORTIUM



Partners in Housing
Transforming Lives

President, Christopher Molinelli
Vice President, Judy Stanger
Secretary, Charles Quinn
Treasurer, Catherine Jones

August 29, 2023

During the FY 2023 Continuum of Care (CoC) Program Competition the Orange County Housing Consortium (OCHC) did not reject or reduce any projects.

Should you have any questions, please feel free to contact me at 845-343-7115 ext.314 and/or mherrera@honorehg.org.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Michelle Herrera', written over a light blue circular stamp.

Michelle Herrera
CoC Coordinator

Michelle Herrera

From: Michelle Herrera
Sent: Tuesday, August 29, 2023 3:33 PM
To: Liz Schmidt
Cc: Chris Molinelli
Subject: HONOR CoC Bonus - Accepted
Attachments: Letter FY 2023 Accepted New Project CoC Bonus.pdf

Hi Liz,

Congratulations! I am pleased to notify you that your project HONOR Bonus has been accepted for the FY 2023 Continuum of Care (CoC) Program Competition. Please attached letter.

Thank you,

Michelle Herrera
CoC Planning Coordinator
HONOR
185 Monhagen Avenue
Middletown, NY 10940
Office: 845-343-7115 ext. 314
Cell: 845-467-9071
E-Mail: mherrera@honorehg.org



How may I help you?

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ORANGE COUNTY HOUSING CONSORTIUM



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Treasurer, Catherine Jones

August 29, 2023

Liz Schmidt
HONOR
38 Seward Avenue
Middletown, NY 10940

Dear Ms. Schmidt:

The Orange County Housing Consortium (OCHC) is pleased to notify you that the Selection Committee has determined that the application you submitted for HONOR Bonus through the FY 2023 Continuum of Care (CoC) Program Competition Consolidated Application meets the Housing and Urban Development (HUD) threshold criteria, the HUD and OCHC's Policy Priorities for funding with a score of 77 (with highest possible score of 80) and will be included in the ranking of new and renewal projects for this round of HUD Competitive funding.

Should you have any questions concerning this announcement please feel free to contact me at 845-343-7115 ext.314 or mherrera@honorehg.org.

Sincerely,

A handwritten signature in blue ink that reads 'Michelle Herrera'. The signature is fluid and cursive, written over a light blue background.

Michelle Herrera
CoC Coordinator

Michelle Herrera

From: Michelle Herrera
Sent: Monday, September 11, 2023 1:14 PM
To: Catherine Jones cjones@safe-harbors.org; Charlie Quinn <cquinn@recap.org>; Chris Molinelli; Judy Stanger jstanger@mhaorangen.com; Jesse Howard president@newburghinterfaith.org; Roberta West rwest@newburghinterfaith.org; Cheryl Cohen <ccohen@recap.org>; Liz Schmidt
Subject: FY 2023 Ranking /Scoring Report
Attachments: FY 2023 Ranking Scoring Report.pdf
Importance: High

Good Afternoon Project Applicants,

This is to serve as official notice: Attached please find the Ranking Report for FY2023 program competition for the NY-602 Consortium Consolidated Application Process.

Thank you,

Michelle Herrera
CoC Planning Coordinator
HONOR
185 Monhagen Avenue
Middletown, NY 10940
Office: 845-343-7115 ext. 314
Cell: 845-467-9071
E-Mail: mherrera@honorehg.org



How may I help you?

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**NY-602 Newburgh, Middletown, Orange County Housing Consortium
Final Project Scores for All Projects
Renewal Projects**

Ranking	Agency Name	Project Name	Grant Number	Total GIW ARA	Project Score	Project Status
1	Regional Economic Community Action Program, Inc.	RECAP NY 811 Veterans	NY0811L2T022212	\$241,331	95.0	Accepted
2	Mental Health Association in Orange County, Inc.	MHA NY0448 Individuals	NY0448L2T022215	\$79,704	95.0	Accepted
3	Emergency Housing Group, Inc.	Stephen Saunders Residence	NY0449L2T022215	\$95,265	90.0	Accepted
4	Safe Harbors of the Hudson, Inc.	Safe Harbors Cornerstone Residence	NY0446L2T022215	\$188,984	85.0	Accepted
5	Mental Health Association in Orange County, Inc.	Family Supportive Housing	NY0450L2T022215	\$161,432	85.0	Accepted
6	Mental Health Association in Orange County, Inc.	MHA HDH	NY0440L2T022215	\$126,992	85.0	Accepted
7	Mental Health Association in Orange County, Inc.	MHA NY0437 Enhanced MH/DD	NY0437L2T022215	\$79,704	85.0	Accepted
8	Emergency Housing Group, Inc.	HONOR Housing First III	NY1119L2T022206	\$150,144	80.0	Accepted
9	Emergency Housing Group, Inc.	HONOR ehg (PSH) Bonus	NY0986L2T022208	\$423,005	75.0	Accepted
10	Emergency Housing Group, Inc.	Permanent Housing Bonus Money	NY0856L2T022210	\$76,923	75.0	Accepted
11	Regional Economic Community Action Program, Inc.	NY-602 REN Regional Economic Community Action Program	NY0445L2T022215	\$674,680	70.0	Accepted
12	Newburgh Interfaith Emergency Housing Inc.	Project LIFE Rapid Rehousing Program	NY1170L2T022205	\$144,956	65.0	Accepted
13	Mental Health Association in Orange County, Inc.	Home To Stay	NY0439L2T022215	\$280,167	45.0	Accepted
14	CARES of NY, Inc.	Orange CoC HMIS	NY0441L2T022215	\$65,809	Not Scored	HMIS - Accepted
15	Emergency Housing Group, Inc./HONOR	HONOR Coordinated Entry	NY1467L2T022200	\$87,000	Not Scored	CE- Accepted
16	Emergency Housing Group, Inc./HONOR	HONOR / Fearless Domestic Violence Project	NY1390D2T022201	\$291,816	Not Scored	Accepted

New Projects

Ranking	Agency Name	Project Name	Funding Amount	Score or Status
17	Emergency Housing Group, Inc./HONOR	HONOR Housing First V	\$221,750	97.0
N/A	Emergency Housing Group, Inc./HONOR	CoC Planning Project Application FY2023	\$158,396	N/A

**All projects accepted.
There were no projects reduced or rejected.**

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**All projects accepted.
There were no projects reduced or rejected.**

2023 HDX Competition Report

PIT Count Data for NY-602 - Newburgh, Middletown/Orange County CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	471	280	339	491
Emergency Shelter Total	331	186	291	385
Safe Haven Total	0	0	0	0
Transitional Housing Total	57	56	28	41
Total Sheltered Count	388	242	319	426
Total Unsheltered Count	83	38	20	65

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	68	35	41	62
Sheltered Count of Chronically Homeless Persons	23	11	27	19
Unsheltered Count of Chronically Homeless Persons	45	24	14	43

2023 HDX Competition Report

PIT Count Data for NY-602 - Newburgh, Middletown/Orange County CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	60	35	53	83
Sheltered Count of Homeless Households with Children	60	35	53	82
Unsheltered Count of Homeless Households with Children	0	0	0	1

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	19	8	7	9	7
Sheltered Count of Homeless Veterans	9	6	3	7	7
Unsheltered Count of Homeless Veterans	10	2	4	2	0

*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report

HIC Data for NY-602 - Newburgh, Middletown/Orange County CoC

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	217	195	195	100.00%	22	22	100.00%	217	100.00%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	47	47	47	100.00%	0	0	NA	47	100.00%
RRH Beds	75	37	75	49.33%	0	0	NA	37	49.33%
PSH Beds	297	255	297	85.86%	0	0	NA	255	85.86%
OPH Beds	66	66	66	100.00%	0	0	NA	66	100.00%
Total Beds	702	600	680	88.24%	22	22	100.00%	622	88.60%

2023 HDX Competition Report

HIC Data for NY-602 - Newburgh, Middletown/Orange County CoC

2023 HDX Competition Report

HIC Data for NY-602 - Newburgh, Middletown/Orange County CoC

Notes

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

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

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

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

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	294	294	304	257

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

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	5	7	8	17

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	29	39	46	75

2023 HDX Competition Report

HIC Data for NY-602 - Newburgh, Middletown/Orange County CoC

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for NY-602 - Newburgh, Middletown/Orange County CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	838	1261	52	46	-6	23	19	-4
1.2 Persons in ES, SH, and TH	879	1314	58	53	-5	23	21	-2

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

2023 HDX Competition Report
FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	920	1317	215	192	-23	60	51	-9
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	961	1370	218	201	-17	62	56	-6

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	0	0		0		0		0	
Exit was from ES	345	32	9%	4	1%	27	8%	63	18%
Exit was from TH	2	0	0%	0	0%	0	0%	0	0%
Exit was from SH	0	0		0		0		0	
Exit was from PH	77	1	1%	1	1%	4	5%	6	8%
TOTAL Returns to Homelessness	424	33	8%	5	1%	31	7%	69	16%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	280	339	59
Emergency Shelter Total	186	291	105
Safe Haven Total	0	0	0
Transitional Housing Total	56	28	-28
Total Sheltered Count	242	319	77
Unsheltered Count	38	20	-18

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	882	1331	449
Emergency Shelter Total	840	1278	438
Safe Haven Total	0	0	0
Transitional Housing Total	68	92	24

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	168	187	19
Number of adults with increased earned income	19	23	4
Percentage of adults who increased earned income	11%	12%	1%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	168	187	19
Number of adults with increased non-employment cash income	39	50	11
Percentage of adults who increased non-employment cash income	23%	27%	4%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	168	187	19
Number of adults with increased total income	52	65	13
Percentage of adults who increased total income	31%	35%	4%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	44	33	-11
Number of adults who exited with increased earned income	4	9	5
Percentage of adults who increased earned income	9%	27%	18%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	44	33	-11
Number of adults who exited with increased non-employment cash income	14	12	-2
Percentage of adults who increased non-employment cash income	32%	36%	4%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	44	33	-11
Number of adults who exited with increased total income	16	18	2
Percentage of adults who increased total income	36%	55%	19%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	806	1225	419
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	179	280	101
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	627	945	318

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	860	1275	415
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	192	284	92
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	668	991	323

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	0	20	20
Of persons above, those who exited to temporary & some institutional destinations	0	15	15
Of the persons above, those who exited to permanent housing destinations	0	1	1
% Successful exits		80%	

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

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	691	1003	312
Of the persons above, those who exited to permanent housing destinations	293	321	28
% Successful exits	42%	32%	-10%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	264	276	12
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	259	268	9
% Successful exits/retention	98%	97%	-1%

2023 HDX Competition Report

FY2022 - SysPM Data Quality

NY-602 - Newburgh, Middletown/Orange County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	218	187	195	54	54	44	297	297	313	29	39	46			
2. Number of HMIS Beds	187	187	195	54	54	44	268	268	284	22	22	31			
3. HMIS Participation Rate from HIC (%)	85.78	100.00	100.00	100.00	100.00	100.00	90.24	90.24	90.73	75.86	56.41	67.39			
4. Unduplicated Persons Served (HMIS)	788	844	1283	60	70	92	213	285	291	117	133	155	614	13	31
5. Total Leavers (HMIS)	788	725	1042	55	44	66	60	33	35	100	70	43	0	0	15
6. Destination of Don't Know, Refused, or Missing (HMIS)	16	33	212	0	0	3	1	2	0	4	8	2	0	0	0
7. Destination Error Rate (%)	2.03	4.55	20.35	0.00	0.00	4.55	1.67	6.06	0.00	4.00	11.43	4.65			0.00

2023 HDX Competition Report
FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for NY-602 - Newburgh, Middletown/Orange County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/27/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/27/2023	Yes
2023 HIC Count Submittal Date	4/27/2023	Yes
2022 System PM Submittal Date	2/16/2023	Yes



DEPARTMENT OF SOCIAL SERVICES

Darcie M. Miller, LCSW–R
Commissioner

Irene E. Kurlander
Deputy Commissioner

Steven M. Neuhaus
County Executive

Box Z, 11 Quarry Road
Goshen, NY 10924
Tel: (845) 291-4000 ● Fax: (845) 291-4338
www.orangecountygov.com

FROM:

September 21, 2023

Darcie Miller, LCSW-R, Commissioner
Orange County Department of Social Services & Mental Health
30 Harriman Drive
Goshen, NY 10924

SUBJECT: Housing Subsidies for HONOR Housing Program in CoC NY-602

To Whom It May Concern:

The Orange County Department of Social Services (OC DSS) provides temporary help to eligible individuals and families with social service and financial needs in order to assist them with leading safe, healthy and independent lives. OC DSS is proud to support Emergency Housing Group, Inc (dba HONOR) in its mission of providing individualized and integrated services to people who may be combating chemical dependency in need of transitional housing or requiring crisis intervention.

OC DSS has awarded a grant of \$2,355,600 to support HONOR's housing and homeless services programs. Specifically, this housing grant includes a commitment to fund at least two of the housing units described in the new PH-PSH project (project name 'CoC Bonus-Housing First', project number 213169) that HONOR is applying for in Orange County (CoC NY-602) in the FY23 CoC NOFO.

The support for these housing units is expected to be renewed annually and includes a commitment for the period 10/1/24 – 9/30/25. The support for these specific units is valued at \$44,000 annually.

OC DSS is proud to invest in partnerships in Orange County that advance the communitywide commitment to the goal of ending homelessness.

Sincerely,

Darcie Miller, LCSW-R, Commissioner
Orange County Department of Social Services & Mental Health



Referral Agreement
Healthcare for the Homeless Ancillary Services

This Referral Agreement ("Agreement") is entered into between Cornerstone Family Healthcare (Cornerstone) located at 2570 Route 9W, Cornwall NY 12518 and OCHC Continuum of Care (the CoC) located at 185 Monhagen Avenue, Middletown NY 10940 effective September 1, 2023. Each signatory to this Agreement may be referred to as a "party," and collectively as "parties."

WHEREAS, Cornerstone is a nonprofit corporation, a federally qualified health center providing primary care in Orange County, NY and

WHEREAS, the CoC offers to improve the quality of life for our communities by cultivating and promoting access to housing opportunities. The CoC offers to serve the human and housing needs of Orange County residents by providing a forum to aid in the effective implementation of community development, economic development and affordable housing programs and practices.

NOW THEREFORE, in the interest of collaborating to coordinate the care of patients who have an identified barrier to their wellbeing that includes housing. The CoC and Cornerstone will work together to serve homeless patients in need of medical services, housing, care management as referred by the Cornerstone and the CoC respectively, and

WHEREAS the Parties desire to enter into an Agreement that clearly identifies the roles and responsibilities of each party with respect to the development and implementation of Primary Care Services at Cornerstone.

ARTICLE I: TERM AND TERMINATION

1.1 Term. The initial term of this Agreement shall be from September 1, 2023, for a period of one year. Upon expiration of the Initial Term, this Agreement shall be automatically renewed for successive one-year terms, each commencing on the first day following the date on which the preceding initial term or renewal term shall have expired.

1.2 Modification. This Agreement may be modified at such time that an update or change is required to reflect the status of each party, or the patients mutually served, or terminated and in accordance with Section 1.3.

1.3. Termination. Notwithstanding any other provision in this Agreement, this AGREEMENT may be terminated on the first to occur of the following:

(a) Either Party may terminate this AGREEMENT, with or without cause and with or without providing reasons for termination, upon giving the other Party ninety (90) days' prior written notice.

(b) Either Party may terminate this AGREEMENT for breach upon giving the other Party thirty (30) days' prior written notice of intent to terminate and a description of the specific breach of the AGREEMENT. If the breaching Party has not cured the breach by the end of the 30-day notice period, this AGREEMENT shall terminate immediately at the expiration of the 30-day period.

ARTICLE II RESPONSIBILITIES

2.1. Responsibilities of the CoC will include:

- a. Offer referral to housing and care management services for patients of Cornerstone who may be experiencing homelessness
- b. Review referral requests and triage according to urgency
- c. Refer client, if eligible to Coordinated Entry list (CE is list of undomiciled clients searching for permanent housing)
- d. Work with referring primary care practice to expedite care in urgent cases.
- e. Consider and manage the special needs of patient/family
- f. Agree to engage in pre-referral consult if requested
- g. Provide primary care practice with number for direct contact for urgent/immediate matters.
- h. Provide appropriate and adequate information in a timely manner
- i. Notify referring primary care practice (Cornerstone) if patient fails to follow through with referral for assistance
- j. Document client encounters

The CoC, employees, and contractors providing services through this agreement will be appropriately licensed, certified, and/or otherwise qualified to furnish services as assigned.

The CoC shall provide all services pursuant to this agreement in accordance with applicable state and federal law and any performance standards established by Cornerstone and the CoC.

2.2. Responsibilities of Cornerstone. Cornerstone shall:

- a. Cornerstone will provide access to primary care for individuals and families who are experiencing homelessness, or are at-risk of homelessness
- b. Cornerstone will provide on-site primary care services at the emergency housing shelter through the mobile health van (weather permitting)
- c. Prepare patient for referral to the CoC
- d. Use referral guidelines where available, including all applicable forms
- e. Patient/family made aware of and in Agreement with reason for referral, type of referral, and selection of subspecialist/specialist
- f. Track and manage the patients through the referral process
- g. Provided patients with expectations for events and outcomes of referral
- h. Provide appropriate and adequate information including necessary demographic and insurance information
- i. Provide appropriate and adequate access for patients regardless of their ability to pay for the referred service
- j. Document the reason for referral, including
 - i. With consent, provide demographic data on patient
 - ii. Provide clinical data pertinent to reason for referral
 - iii. Document any special needs of patient
 - iv. Indicate type of referral requested
 - v. Provide pre-visit preparation and assistance as applicable
 - vi. Provide consultation (evaluate and advise when necessary)
- k. Provide an indication of urgency
- l. Make direct contact with subspecialist/specialist for urgent cases
- m. Provide subspecialty/specialty practice with number for direct contact for additional information or urgent matters
- n. Review secondary diagnoses or suggested referrals identified by subspecialist/specialist.
- o. Provide subspecialty/specialty practice with any changes in patient's clinical status relevant to the condition being addressed by the subspecialty/specialty practice
- p. Contact the patient, if deemed appropriate, when notified by subspecialty/specialty practice of failure to keep appointment.
- q. Provide assistance with any follow-up care recommended by the subspecialty/specialty practice

ARTICLE III LIABILITY AND INSURANCE

3.1 Liability. Each Party shall be solely liable for any and all claims, costs, and expenses arising from or out of any act or omission in the performance of its obligations thereunder.

3.2 Insurance. Each Party shall maintain such policies of general, malpractice and professional liability insurance as shall be necessary to insure it, its Board of Directors, and its employees against any claim or claims for damages arising by reason of an act or omission in the performance of its respective obligations hereunder. Such policies shall be carried in on a per occurrence basis. Each party shall further maintain worker's compensation and unemployment compensation policies for its employees.

ARTICLE IV CONFIDENTIALITY

4.1 Cornerstone and the CoC are covered entities for the purpose of Health Insurance Portability and Accountability Act (HIPPA) and subject to 45 CFR and 164 of the HIPPA Privacy Regulation.

4.2 To the Extent that employees are participating, employees shall;

- a. Receive training by Cornerstone and the CoC respectively on, compliance with, all privacy policies adopted pursuant to the Protected Health Information, and
- b. Not disclose any Protected Health Information, as the term is defined by applicable State and Federal Law.

ARTICLE V GENERAL PROVISIONS

It is mutually understood and agreed by and agreed by and between parties that:

1. Participation in Similar Activities: This instrument in no way restricts the CoC or Cornerstone from participating in similar activities with other public or private agencies, organizations, and individuals.
2. This agreement may be extended or amended upon written request of the CoC or Cornerstone and the subsequent written concurrence of the other(s). The CoC or Cornerstone may terminate this agreement with a 30-day written notice to the other(s).
3. Responsibility of Others: The CoC and Cornerstone and their respective agencies and office will handle their own activities and utilize their own resources, including the expenditure of their own funds, in pursuing these objectives. Each party will carry out its separate activities in a coordinated and mutually beneficial manner.


4. PRINCIPAL CONTACTS: The principal contacts for this instrument are:

CoC: Michelle Herrera, CoC Coordinator

Cornerstone: Sybil Medina, COO

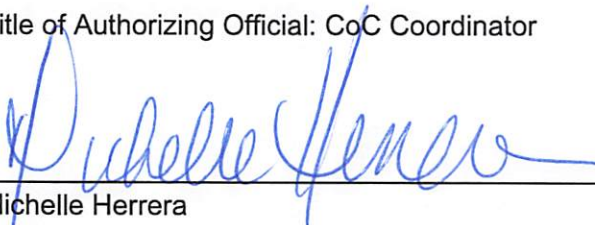
5. AUTHORIZED REPRESENTATIVES: By signature below, Cornerstone and the CoC certifies that the individuals listed in this document as representatives of the Parties are authorized to act in their respective areas for matters related to this Agreement.

Title of Authorizing Official: President and Chief Executive Officer



David Jolly
Cornerstone Family Healthcare

Title of Authorizing Official: CoC Coordinator



Michelle Herrera
Orange County Housing Consortium, CoC

BUSINESS ASSOCIATE AGREEMENT

This Business Associate Agreement entered into this 03rd day of August, 2023 (“Agreement”) by and between MONTEFIORE ST. LUKE’S CORNWALL (“Covered Entity”) and Orange County Continuum of Care (“Business Associate”). Covered Entity and Business Associate shall also be referred to herein individually as a “party” and collectively as the “parties”.

WHEREAS, Business Associate may create, receive, maintain or transmit protected health information while performing activities on behalf of, or providing certain services to, Covered Entity pursuant to an agreement or arrangement between the parties (collectively the “Services Agreement”); and

WHEREAS, the parties wish to safeguard the confidentiality and security of protected health information in accordance with applicable federal, state and local law, including, but not limited to, HIPAA, HITECH and the HIPAA Regulations, governing the use and/or disclosure of protected health information by Business Associate.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows:

1. DEFINITIONS.

a. General. Terms used and not defined in this Agreement, capitalized or not, shall have the same meaning given to those terms by HIPAA, HITECH and the HIPAA Regulations as currently in effect or as amended from time to time.

b. Specific.

i. “Breach” shall mean the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, subject to the presumptions and exceptions set forth in 45 CFR 164.402.

ii. “Electronic Protected Health Information” or “EPHI” shall have the same meaning as the term “electronic protected health information” in 45 CFR § 160.103, limited to the information that Business Associate creates, receives, maintains, or transmits from or on behalf of Covered Entity.

iii. “Individual” shall have the same meaning as the term “individual” in 45 CFR § 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR § 164.502(g).

iv. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996.

v. "HIPAA Regulations" means the regulations promulgated under HIPAA and/or HITECH by the United States Department of Health and Human Services, including, but not limited to, 45 CFR Parts 160 and 164 as amended from time to time.

vi. "HITECH" means the Health Information Technology for Economic and Clinical Health Act, enacted under Title XIII of the American Recovery and Reinvestment Act of 2009.

vii. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information set forth in the HIPAA Regulations.

viii. "Protected Health Information" or "PHI" shall have the same meaning as the term "protected health information" in 45 CFR § 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

ix. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.

x. "Security Incident" means the attempted or successful unauthorized access, use, disclosure, modification or destruction of information or interference with system operations in an information system.

xi. "Security Rule" shall mean the Security Standards set forth in the HIPAA Regulations.

xii. "Services Agreement" shall mean any present or future agreements or arrangements, either written or oral, between Covered Entity and Business Associate under which Business Associate provides services to Covered Entity which involves the use or disclosure of PHI.

xiii. "Unsecured PHI" means PHI that is not rendered unusable, unreadable or indecipherable to unauthorized individuals through the use of a technology or methodology specified by the Secretary.

2. OBLIGATIONS AND ACTIVITIES OF BUSINESS ASSOCIATE.

a. Use and Disclosure. Business Associate agrees not to use or disclose PHI other than as permitted or required by the Services Agreement, this Agreement or as required by law. Business Associate shall comply with the provisions of this Agreement relating to privacy and security of PHI and all present and future provisions of HIPAA, HITECH and the HIPAA Regulations that relate to the privacy and security of PHI and that are applicable to Covered Entity and/or Business Associate. Without limiting the foregoing, to the extent the Business Associate will carry out one or more of the Covered Entity's obligations under the Privacy Rule,

Business Associate shall comply with the requirements of the Privacy Rule that apply to the Covered Entity in the performance of such obligations.

b. Appropriate Safeguards. Business Associate agrees to use appropriate safeguards and comply, where applicable, with the Security Rule to prevent the use or disclosure of the PHI other than as provided for by this Agreement. Without limiting the generality of the foregoing sentence, Business Associate will:

i. Implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of EPHI as required by the Security Rule; and

ii. Ensure that any subcontractor to whom Business Associate provides EPHI agrees in writing to implement reasonable and appropriate safeguards and comply, where applicable, with the Security Rule to protect EPHI and comply with the other requirements of Section 2(a) above.

iii. To the extent commercially practicable, Business Associate shall encrypt EPHI which it creates, receives, maintains or transmits on behalf of Covered Entity. In no event shall Business Associate store EPHI on a mobile device (e.g. laptop, cell phone, flash drive) unless such device is encrypted and the PHI is considered Secured under the HIPAA Regulations.

c. Reporting to Covered Entity. Business Associate agrees to promptly, and at most within ten (10) calendar days, report to Covered Entity any of the following:

i. Any use or disclosure of PHI not permitted by this Agreement of which Business Associate becomes aware.

ii. Any Security Incident of which Business Associate becomes aware, provided, however, the parties acknowledge and agree that this section constitutes notice by Business Associate to Covered Entity of the ongoing existence and occurrence of attempted but Unsuccessful Security Incidents (as hereafter defined) for which no additional notice to Covered Entity shall be required. "Unsuccessful Security Incidents" shall include, but not be limited to, pings and other broadcast attacks on a firewall, port scans, isolated unsuccessful log-on attempts, denial-of-service attacks, malware (e.g. worm or virus) or any combination of the foregoing, so long as such incident does not result in unauthorized access, use, disclosure, modification, or destruction of EPHI.

iii. The discovery of a Breach of Unsecured PHI, with "discovery" understood to mean the first day on which the Breach is known, or reasonably should have been known, to Business Associate or any employee, officer or agent of Business Associate, other than the individual committing the Breach.

Any notice of a Security Incident or Breach of Unsecured PHI shall include, to the extent known or reasonably available to Business Associate at the time of the initial report: (i) the identification of each individual whose PHI has been, or is reasonably believed by Business Associate to have been, accessed, acquired, disclosed or destroyed during such Security Incident or Breach; (ii) the nature of the PHI subject of the Security Incident / Breach; (iii) the date of the Security Incident / Breach; and (iv) any other relevant information regarding the Security Incident / Breach. Business Associate shall thereafter supplement the initial report as such information becomes known or reasonably available to it. The initial or supplemental report shall be made in writing and directed to Covered Entity pursuant to the notice provisions of the Services Agreement, with a copy to the Covered Entity's Privacy Officer.

d. **Investigation.** Business Associate agrees to reasonably cooperate and coordinate with Covered Entity in the investigation of any violation of the requirements of this Agreement and/or any Security Incident or Breach and provide Covered Entity such information as is necessary for Covered Entity to comply with its obligations under HIPAA, HITECH and the HIPAA Regulations.

e. **Reports and Notices.** Business Associate shall also reasonably cooperate and coordinate with Covered Entity in the preparation of any reports or notices to the individual, a regulatory body or any third party required under HIPAA, HITECH, the HIPAA Regulations or any other federal or state laws, rules or regulations. Covered Entity shall make such reports or notices unless, in Covered Entity's sole discretion, it determines that Business Associate shall undertake such tasks, in which event such reports or notices shall be subject to the prior written approval of Covered Entity.

f. **Mitigation.** Business Associate agrees to mitigate, to the extent practicable, any harmful effect known to Business Associate of a use or disclosure of PHI by Business Associate or its employees, officers, agents or subcontractors in violation of the requirements of this Agreement (including, without limitation, any Breach of Unsecured PHI or Security Incident). Such obligation shall include, but is not limited to, taking those actions which are common in the industry based on comparable facts and circumstances, such as providing credit monitoring to affected individuals and/or setting up a call center. Business Associate shall keep Covered Entity fully apprised of all mitigation efforts of the Business Associate required under this Section 2(f), which shall include the submission of a written report to Covered Entity no later than twenty (20) calendar days after discovery of the Breach of Unsecured PHI or Security Incident, describing in detail: (i) the actions taken by Business Associate to mitigate any harmful effect of such Breach or Security Incident; and (ii) the corrective action Business Associate has taken or shall take to prevent future similar Breaches or Security Incidents.

g. **Subcontractors.** Business Associate shall ensure that any subcontractor to whom Business Associate provides PHI created, received, maintained or transmitted on behalf of Covered Entity agrees in writing to the same restrictions and conditions that apply through this Agreement to Business Associate with respect to such information.

h. Access to Designated Record Sets. To the extent that Business Associate possesses or maintains PHI in a Designated Record Set, and only in that event, Business Associate agrees to provide access to, or amend the contents of, the Designated Record Set in accordance with the requirements of HIPAA Regulations, within twenty (20) calendar days of such a request or directive from Covered Entity. If a request for access to, or directive to amend, PHI is made directly to Business Associate, Business Associate shall notify Covered Entity within twenty (20) calendar days of such request and allow Covered Entity to send the response to the individual.

i. Access to Books and Records. Business Associate agrees to make its internal practices, books, and records, including policies and procedures, relating to the use and disclosure of PHI under this Agreement available to the Secretary in the time and manner designated by the Secretary, for purposes of determining Covered Entity's compliance with the HIPAA Regulations. In such event, Business Associate shall also provide Covered Entity with access to its books and records within twenty (20) calendar days of the Secretary's request.

j. Accountings. Business Associate agrees to document such disclosures of PHI and maintain information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with HIPAA, HITECH and the HIPAA Regulations. Business Associate further agrees to provide to Covered Entity, within twenty (20) calendar days of a request by Covered Entity, information collected in accordance with the foregoing to permit Covered Entity to respond to a request for an accounting of disclosures of PHI. If a request for an accounting is made directly to Business Associate, Business Associate shall notify Covered Entity within twenty (20) calendar days of such request and allow Covered Entity to send the response to the individual.

3. PERMITTED USES AND DISCLOSURES BY BUSINESS ASSOCIATE.

a. Services Agreement. Except as otherwise limited in this Agreement, Business Associate may use or disclose PHI to perform functions, activities, or services for, or on behalf of, Covered Entity as specified in the Services Agreement, provided that such use or disclosure would not violate HIPAA, HITECH or the HIPAA Regulations if done by Covered Entity.

b. Use for Administration of Business Associate. Except as otherwise limited in this Agreement, Business Associate may use and disclose PHI for the proper management and administration of the Business Associate or to meet its legal responsibilities, provided: (i) the disclosures are required by law, or (ii) Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.

c. To Report Violations. Business Associate may use and disclose PHI to report violations of law to appropriate federal and state authorities, consistent with the HIPAA Regulations.

d. **Data Aggregation.** Business Associate may use and disclose PHI in its possession to provide Data Aggregation services relating to the Health Care Operations of Covered Entity.

e. **De-Identified Information.** Business Associate may use information which has been de-identified in accordance with the safe harbor set forth at 45 CFR § 164.514(b)(2), provided: (i) Business Associate maintains any documentation required by the HIPAA Regulations; (ii) Business Associate removes any identifiers of the Covered Entity from the information being de-identified; (iii) Business Associate does not know, or have reason to know, that the information can be used alone or in combination with other information to identify an individual who is a subject of the information; and (iv) Business Associate agrees to be solely liable for improper de-identification.

4. PERMISSIBLE REQUESTS BY COVERED ENTITY. Covered Entity shall not request Business Associate to use or disclose PHI in any manner that would not be permissible under the Privacy Rule if done by Covered Entity or that is not otherwise expressly permitted under this Agreement.

5. TERM AND TERMINATION.

a. **Term and Termination.** This Agreement shall be effective as of the date of this Agreement and shall remain in effect until the expiration or termination of the Services Agreement. Notwithstanding the foregoing, in the event either party determines that the other party has violated a material term of this Agreement, the non-breaching party will provide the breaching party with twenty (20) days' notice and an opportunity to cure the violation within such notice period. If the breaching party fails to cure within the notice period, or a cure is infeasible, the non-breaching party may immediately terminate both the Services Agreement and this Agreement.

b. **Effect of Termination.**

i. Upon termination of this Agreement, Business Associate agrees to return to Covered Entity or destroy, within thirty (30) days, all PHI in the possession of Business Associate and/or its agents or subcontractors. Business Associate shall retain no copies of the PHI. If the PHI is destroyed, Business Associate shall timely provide Covered Entity with written confirmation of its destruction.

ii. In the event Business Associate determines that returning or destroying the PHI is infeasible, Business Associate shall provide to Covered Entity written notification of the conditions that make return or destruction infeasible. Upon mutual agreement of the parties that return or destruction of PHI is infeasible, Business Associate shall extend the protections of this Agreement to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such PHI.

6. **INDEMNITY.** Each party (the "Indemnifying Party") shall defend, indemnify and hold harmless the other party, its officers, directors, partners, employees, and agents (collectively "Indemnified Party") from and against all claims, liabilities, penalties or damages (including reasonable attorney's fees and mitigation costs) arising out of a material breach of this Agreement or a violation of HIPAA, HITECH or the HIPAA Regulations by the Indemnifying Party or its employees, agents or subcontractors.

7. **COMPLIANCE WITH HIPAA TRANSACTION STANDARDS.** Business Associate agrees that if it (or its agent or subcontractor) conducts an electronic transmission which the Department of Health and Human Services has defined as a "standard transaction," that such transaction will comply with the requirements of 45 CFR 160 and 162 (Standards for Electronic Transactions) as may be amended from time to time. Business Associate agrees that such compliance shall be at its sole cost and expense.

8. **MISCELLANEOUS.**

a. **No HIPAA Agency Relationship.** It is not intended that an agency relationship (as defined under the Federal common law of agency) be established hereby expressly or by implication between Covered Entity and Business Associate for purposes of liability under HIPAA, HITECH or the HIPAA Regulations. No terms or conditions contained in this Agreement shall be construed to make or render Business Associate an agent of Covered Entity.

b. **Regulatory References.** A reference in this Agreement to a section in HIPAA, HITECH or the HIPAA Regulations means the section currently in effect or as amended or modified from time to time, including any corresponding provisions of subsequent superseding laws or regulations.

c. **Amendment.** This Agreement may not be amended or modified, except in writing signed by authorized representatives of the parties. In the event a term of this Agreement is determined in good faith to violate any federal or state law or regulation governing PHI, or there is a change in such laws or regulations, the parties agree to amend this Agreement to achieve and maintain compliance with the requirements of federal or state law or regulation. In the event Business Associate fails to agree upon such an amendment within twenty (20) calendar days of being notified by Covered Entity of the noncompliance or change, Covered Entity may immediately terminate both the Services Agreement and this Agreement.

d. **Waiver.** No failure or delay by a party in exercising any right, power or remedy will operate as a waiver of that right, power or remedy, and no waiver will be effective unless it is in writing and signed by an authorized representative of the waiving party. If a party waives any right, power or remedy, the waiver will not waive any successive or other right, power or remedy the party may have under this Agreement.

e. **Survival.** Sections 3(e), 5(b)(i), 6 and 8 shall survive the termination of this Agreement, provided, however, in the event the post-termination return or destruction of PHI is infeasible, Sections 2 and 5(b)(ii) shall also survive the termination of this Agreement.

f. **Interpretation and Severability.** Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with HIPAA, HITECH, the HIPAA Regulations and any other applicable law or regulation protecting the privacy, security and confidentiality of PHI. If any provision of this Agreement shall be determined to be illegal, invalid, or unenforceable, the remaining provisions shall remain in full force and effect.

g. **Controlling Agreement.** The Services Agreement shall be deemed to incorporate the terms of this Agreement. In the event of a conflict between the terms of this Agreement and the terms of the Services Agreement, the terms of this Agreement shall prevail. Business Associate's obligations hereunder shall not be subject to any limitations of liability or remedies in the Services Agreement. The terms of the Services Agreement which are not modified by this Agreement shall remain in full force and effect in accordance with the terms thereof.

h. **Entire Agreement.** The Services Agreement together with this Agreement constitutes the entire agreement between the parties with respect to the subject matter contained herein, and this Agreement supersedes and replaces any former business associate agreement or addendum entered into by the parties.

i. **Notice.** All notices required or permitted to be given hereunder shall be in writing and made pursuant to the notice provisions of the Services Agreement, except as modified herein.

j. **No Third Party Beneficiaries.** Nothing express or implied in this Agreement is intended or shall be deemed to confer upon any person other than Covered Entity, Business Associate and their respective successors and assigns any rights, obligations, remedies or liabilities whatsoever.

k. **Governing Law and Venue.** This Agreement shall be governed by, and construed in accordance with, the laws of the State of New York, exclusive of conflict of law rules. Any dispute relating to, arising out of or regarding this Agreement shall be submitted to the exclusive jurisdiction of the state courts in the County of Orange, State of New York or the U.S. District Court for the Southern District of New York, White Plains Courthouse.

l. **Counterparts and Electronic Signatures.** This Agreement may be executed in one or more counterparts, each of which shall be deemed an original, and all of which together shall constitute one and the same instrument. It is further agreed that signatures on this Agreement transmitted via facsimile, document imaging, or other electronic means shall be deemed to be, and have the same legal effect as, original signatures.

(signature page follows)

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the date first set forth above.

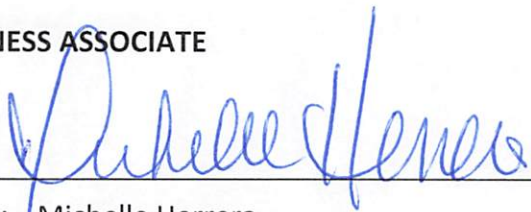
MONTEFIORE ST. LUKE'S CORNWALL

By: _____

Name: _____

Title: _____

BUSINESS ASSOCIATE

By:  _____

Name: Michelle Herrera

Title: CoC Planning Coordinator

MEMORANDUM OF UNDERSTANDING

Memorandum of Understanding – Individuals/Families Exiting Rapid Rehousing Program

This Memorandum of Understanding (MOU) has been created and entered on **June 30, 2023** by PathStone Corporation, 1 Industrial Drive, Suite 3, Middletown, NY 10940 and NY-602 Orange County Continuum of Care 193 Monhagen Avenue Middletown, NY 10940 hereafter known as the “CoC”.

I. Introduction and Goals

PathStone, Local Administrator (LA) for New York State Homes and Community Renewal and NY-602 through accepting referrals from the rapid re-housing program seek to prevent and end homelessness among individuals and families. The NYSHCR Administrative Plan states that each Local Administrator (LA) must dedicate 5% of its voucher allocation to those exiting rapid re-housing who have been referred by the appropriate, local Continuum of Care (CoC). The LA will accept referrals from the CoC of applications for those individuals/families exiting a Rapid Rehousing Program. This is effective until 5% of the allocation is met.

Lead Agency Liaisons

Name and title of PHA staff position: Tara Barnhart, Senior Director Section 8 Programs

Name and title CoC staff position: Michelle Herrera, CoC Planning Coordinator

II. Individuals and Families Eligibility under the Qualifying Categories

In order to be eligible for a referral, the family must be a qualified family exiting rapid re-housing, as defined under 24 CFR § 576.104, with a referral from the CoC.

III. Roles and Responsibilities

A. PHA Roles and Responsibilities

1. Coordinate and consult with the CoC in developing the referral process for the rapid re-housing program.
2. Accept direct referrals for eligible individuals and families through the CoC/Rapid Re-Housing program.
3. Commit a sufficient number of staff and necessary resources to ensure that the application, certification, and voucher issuance processes are completed in a timely manner.
4. Commit a sufficient number of staff and resources to ensure that inspections of units are completed in a timely manner.
5. Designate a staff to serve as the lead Homeless/Rapid Re-Housing liaison.
6. Comply with the provisions of this MOU.

B. CoC Roles and Responsibilities

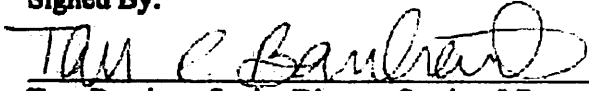
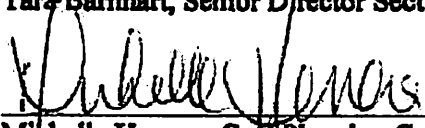
1. Designate and maintain a lead rapid re-housing liaison to communicate with the PHA.
2. Refer eligible individuals and families to PHA.
3. Through the Coordinated Entry process support eligible individuals and households in completing and applying for supportive documentation to accompany admissions application to the PHA (i.e., application, self-certifications, birth certificate, social security card, etc.).
4. Attend participant briefings when needed.
5. Assess all households referred for benefits and supportive services available to support eligible individuals and families through their transition.
6. Identify and provide supportive services to families. (While participants are not required to participate in services, the CoC should assure that services are available and accessible.)
7. Comply with the provisions of this MOU.

V. Length of Memorandum of Understanding

PathStone and CoC agree to cooperate with this MOU with the understanding that changes in the Administrative Plan may result in modifications or termination of the MOU.

Furthermore, this MOU will remain in effect as long as less than 10% of an LA's tenant-based vouchers are dedicated to homeless/rapid rehousing households. Once that threshold is met, PathStone is obligated to serve applicants on its waiting list under the remaining preferences.

Signed By:

	6/30/2023
Tara Barnhart, Senior Director Section 8 Programs	Date
	6/28/23
Michelle Herrera, CoC Planning Coordinator	Date

MEMORANDUM OF UNDERSTANDING

FOR STABILITY VOUCHER PROGRAM IN NEW YORK STATE

THIS MEMORANDUM OF UNDERSTANDING (“MOU”) is made and entered into as of the 1st day of July 2023 (the “Effective Date”) by and between the New York State Homes and Community Renewal (“HCR”), and its affiliate subsidiaries including the Housing Trust Fund Corporation (“HTFC”) and the Division of Housing and Community Renewal (“DHCR”), having its principal office at 38-40 State Street, Albany, NY 12207 and HONOR, having its principal office at 38 Seward Avenue, Middletown, NY 10940, New York, NY 10006, referred individually as the Party, or collectively as the Parties.

Signing this MOU, as the Lead Agency and authorized representative for:

NY-602 Orange County CoC

The following counties shall be within the CoC Service Area for the purpose of this MOU:

Orange County

The following HCR Local Administrator(s) (“LA”) shall be designated to serve within the CoC Service Area for the purpose of this MOU:

Pathstone Corporation

WITNESSETH:

WHEREAS, the Consolidated Appropriations Act, 2021 (Public Law 116-260) (the “2021 Act”), authorized over \$43.3 million for new incremental voucher assistance under Section 8(o) of the United States Housing Act of 1937 for use by individuals and families experiencing or at-risk of homelessness; those fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking; and veterans and families that include a veteran family member that meets one of the proceeding criteria; and

WHEREAS, the Consolidated Appropriations Act, 2022 (Public Law 117-103 (the “2022 Act”) further provided that the U.S. Department of Housing and Urban Development (“HUD”) may waive certain statutory and regulatory provisions to administer the Stability Voucher (“SV”) program, except for those requirements related to tenant rights and protections, rent setting, fair housing, nondiscrimination, labor standards and the environment, upon a finding that any such waivers or alternative requirements are necessary to facilitate the use of funds made available for SVs; and

WHEREAS, funding for SVs were allocated by HUD to a Public Housing Agency (“PHA”) that partners with eligible Continuums of Care (“CoC”), or other entities serving the targeted population, and demonstrated a strategy to coordinate assistance with services available in the community; and

WHEREAS, HTFC, as the PHA for New York State, has received an allocation of SVs, and is required to coordinate with CoCs to provide such services throughout the State; and

WHEREAS, the above-named CoC is an eligible CoC capable and willing to collaborate with HCR to refer eligible individuals and families to HCR's Local Administrator's within the CoC Service Area, and to identify any CoC-funded available supportive services that may be paired with SVs; and

WHEREAS, the above-named entity listed as the Lead Agency for the CoC is authorized by the CoC Board to execute this MOU on behalf of the CoC;

NOW, THEREFORE, pursuant to and in consideration of the above, and other mutual covenants and obligations herein contained, the Parties agree to the following:

I. GOALS AND OBJECTIVES

- a. The Parties agree that the goals of this MOU is to prevent and end homelessness among individuals and families in New York State ("State") who are experiencing or at-risk of homelessness, those fleeing or attempting to flee domestic violence dating violence, sexual assault, stalking, and human trafficking, and veterans and families that include a veteran family member. The primary objective of this MOU is for the CoC to make direct referrals of qualifying individuals and families to HCR and to identify any CoC-funded available supportive services that may be paired with SVs.

II. HCR's OBLIGATIONS

- a. HCR shall amend the HCV Administrative Plan ("Administrative Plan"), attached hereto as **Exhibit A**, which provides the rules for the SV program. At its discretion, HCR reserves the right to make changes to this MOU and the Administrative Plan, as deemed necessary. HCR may establish additional policies and procedures as necessary to ensure the timely and appropriate utilization of federal funds and resources.
- b. HCR shall communicate the relevant rules of the SV program to the CoC Lead Agency and/or CoC lead SV liaison.
- c. HCR shall coordinate with Local Administrator(s) within the CoC Service Area to administer the SVs, including receiving referrals, processing applications, determining eligibility, calculating subsidy, issuing vouchers, and performing inspections. The LA will serve as HCR's designated agent for the purpose of this MOU, and such LA shall designate a lead SV liaison.
- d. HCR shall initiate communication between the CoC and the LA(s) within the CoC Service Area, and the LA(s) will act on HCR's behalf; the LA(s) will be subject to the terms of this MOU and all applicable federal and state regulations, including any relevant and applicable data privacy requirements articulated in writing by the CoC.

- e. HCR shall ensure that the LA(s) within the CoC Service Area commits a sufficient number of staff and necessary resources to ensure that the application, certification, and voucher issuance processes are completed in a timely manner.
- f. HCR shall ensure that the LA(s) within the CoC Service Area commits a sufficient number of staff and resources to ensure that inspections of units are completed in a timely manner.
- g. HCR shall designate a staff person to serve as a liaison between the CoC and the LA(s).
- h. Once activated, HCR will provide a secure, online portal for applicants to upload required documents with the assistance of the CoC.
- i. HCR will provide trainings for CoC staff regarding SV program policies and procedures, as necessary.
- j. HCR will provide an Implicit Bias Training option to CoC members and staff, as necessary.
- k. HCR will provide guidance as needed on any updates that substantially change the obligations of the CoC.

III. CoC's OBLIGATIONS

a. Compliance with Standard Clauses

- i. Agency's Standard Terms. The CoC shall comply in all respects with the Agency's Standard Contract Clauses (the "Standard Clauses") set forth in **Appendix I** attached hereto and incorporated by reference herein.
- ii. HUD's Section 8 General Provisions. The CoC shall comply in all respects with HUD's Section 8 General Provisions for Contracts (the "Section 8 General Provisions") set forth in **Appendix III** attached hereto and incorporated by reference herein.
- iii. In the event of a conflict between the terms of this Agreement, including the Scope of Work, and terms of the Standard Clauses and HUD's Section 8 General Provisions, the order of precedence will be as follows:
 1. Section 8 General Provisions
 2. Standard Clauses
 3. This MOU

b. General Responsibilities

- i. The CoC shall designate and maintain a lead SV liaison to communicate with HCR and the LA(s) within the CoC Service Area. The CoC lead SV liaison shall be responsible for the transmission of referrals, at minimum.
- ii. The CoC shall commit sufficient staff and resources to ensure eligible individuals and families are identified and determined eligible in a timely manner.
- iii. The CoC shall refer eligible individuals and families to LA(s) within the CoC Service Area using the Coordinated Entry System or through another acceptable method as stipulated in this MOU.
- iv. The CoC shall provide support to eligible individuals and households in completing and applying for supportive documentation to accompany

admissions application to LAs within the CoC Service Area, as necessary (i.e., self-certifications, birth certificate, social security card, etc.).

- v. The CoC shall assess all households referred for SV for mainstream benefits and supportive services available to support eligible individuals and families through their transition.
- vi. The CoC shall identify and provide supportive services to SV families.
- vii. The CoC shall attend SV briefings when needed.

c. Eligibility Verification

- i. The CoC shall provide referrals of households to the LA(s) within the CoC Service Area that meet one of four SV eligibility categories:
 - 1. Individuals and families who are currently experiencing homelessness;
 - 2. Individuals and families at risk of homelessness;
 - 3. Individuals and families fleeing or attempting to flee domestic violence, dating violence, stalking, sexual assault; and
 - 4. Veterans and families that include a veteran family that meet one of the preceding criteria
- ii. The CoC shall verify that the households it refers meet the SV eligibility requirements outlined in Section III(c)(i) of this MOU, including the regulations at 24 CFR part 982, and the requirements in PIH Notice 2022-24, and qualify under which they are being referred.
- iii. The CoC shall provide supporting documentation to the LA of the CoC's verification that the household meets one of the four eligible categories for SV assistance.

d. Referrals

- i. The CoC shall provide referrals of eligible households to the LA within the CoC Service Area through the method prescribed by HCR, as provided in its Administrative Plan, and in accordance with federal and state rules. Once activated, referrals shall be made by the CoC using HCR's online portal, as outlined in **Exhibit B**.
- ii. The CoC shall provide the LA with a list of eligible referrals including but not limited to, the name, address, and contact phone number for each adult individual who is being referred; a completed release form for each adult family member; and a written certification for each referral indicating they are SV eligible.
- iii. The CoC, in consultation with LA, will apply permissive prohibition to the screening of SV applicants. Determinations using permissive prohibitions will be made based on an individualized assessment of relevant mitigating information in accordance with policies in Section 3-III.E. of the Administrative Plan.
- iv. The CoC shall be responsible for ensuring compliance with all requirements and guidance issued by HUD related to inclusiveness and diversity, and shall take proactive steps to ensure that all potentially eligible households within the CoC Service Area are provided fair and equal access to housing

assistance. The CoC will identify and collaborate with other local partners within their region to establish a single point of entry for all households who may be eligible for SVs, including those who may not currently be included within their existing Coordinated Entry System. This may include but is not limited to coordinating with organizations serving victims of domestic violence or human trafficking and establishing a secure methodology to receive referrals from these organizations while maintaining the privacy of the victims.

- v. The CoC shall assist applicants in assembling the required application documents as listed in **Exhibit A**. Where necessary, the CoC will assist the applicant in submitting their application data and required documents to the LA, or by using HCR's online portal, if activated, and communicating and receiving correspondence to HCR or HCR's designated agent. The CoC shall provide HCR data in the manner prescribed by **Exhibit B**. The CoC shall be responsible for ensuring that its staff maintain confidentiality and securely handle and store any data received, including Personal Identification Information, in compliance with all applicable federal and state regulations.
- vi. If the CoC does not have a sufficient number of eligible families to refer or identify families that may be eligible for SV assistance because they are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, HCR or the LA may take direct referrals outside of the CoC. If the additional agency/entity can certify SV eligibility, HCR or the LA shall either enter into an MOU or add the entity to the existing MOU between HCR/LA and CoC in order to receive direct referrals from that other entity.

e. Supportive Services

- i. The CoC shall identify any CoC-funded available supportive services that may be paired with SVs.
- ii. The CoC shall develop a plan to utilize any existing partnerships with health and behavioral health care providers and agencies, state Medicaid agencies and agencies and organizations that may be leveraged to provide ongoing tenancy and wrap-around supportive services for those that may benefit from such services to maintain housing stability.

IV. VOUCHER REFERRAL

- a. HCR does not guarantee a minimum number of SVs for any LA within the CoC Service Area. The SV allocation to the LA(s) within the CoC Service Area, for which the CoC shall provide referrals of eligible households, will be the following
 - One (1) SV
- b. Any referrals made by the CoC to the LA shall be made in accordance to Section III of this MOU.

- c. The allocation of SVs to the LA within the CoC Service Area is subject to change at HCR discretion, and is subject to available budget authority.

V. PROGRAM EVALUATION

- a. HCR and the CoC agree to cooperate with HUD, provide requested data to HUD or HUD-approved contractor delegated the responsibility of program evaluation protocols established by HUD or HUD-approved contractor.

VI. TERM

- a. This MOU shall commence as of the Effective Date and shall terminate on June 30, 2025. This MOU may be extended by either Party with mutual, written consent.
- b. In no event shall this MOU continue in effect beyond the expiration of this MOU or if federal funds are no longer available.

VII. PROCEDURES

- a. The Parties agree that **Exhibit B**, the Data Collection Plan, sets forth the details of the Confidential Data which the CoC shall furnish to HCR or its designated agent.

VIII. CONFIDENTIALITY

- a. During the course of this MOU, it may be necessary for the CoC to share confidential information, including names, social security numbers, addresses to HCR or its designated agent in order to arrange for eligible families to receive SVs. HCR or its designated agent shall not share any of this confidential information at any time.
- b. In connection with its receipt, use, and disclosure of Confidential Data received from the CoC pursuant to this MOU, HCR or its designated agent shall ensure its staff, contractor or agents shall:
 - i. Use Confidential Data received from the CoC only for the authorized purposes specified in this MOU;
 - ii. Limit access to Confidential Data to the authorized employees of HCR or its designated agent and its staff, agents or contractors.
 - iii. Store and maintain Confidential Data in a place and manner that is physically secure from access by unauthorized persons (e.g., locked cabinets or storage room);
 - iv. Store and process Confidential Data obtained from the CoC which is maintained in an electronic format, such as magnetic tapes or discs, in such a way that unauthorized persons cannot obtain the information by any means. HCR or its designated agent shall ensure that Confidential Data are never remotely accessed or maintained in a mobile or portable device, and if it is, HCR or its designated agent shall ensure that the security is maintained in the manner outlined in this section;

- v. Undertake precautions to limit access to disclosed Confidential Data to authorized persons;
 - vi. Adopt safeguards and procedures to protect the confidentiality of Confidential Data and to limit dissemination only to authorized individuals as necessary for their work on the project;
 - vii. Not disseminate, use, or permit the dissemination or use of Confidential Data in any manner not described in this MOU without express prior written consent from the CoC;
 - viii. Destroy thoroughly and irretrievably all Confidential Data received under this MOU from the CoC after completion of the purpose for which the data was disclosed is served. Upon request, HCR and its designated agent shall provide proof satisfactory to the CoC that the Confidential Data have been so destroyed, including the date of destruction and the method utilized, which method must be acceptable to the CoC;
 - ix. Not make, retain, copy, duplicate, or otherwise use any copies of Confidential Data after completion of the purpose for which the data disclosed is served without prior written permission from the CoC; and
 - x. Maintain a system and/or procedures for handling, storage, use, and destruction of Confidential Data governed by this MOU sufficient to allow the CoC, and/or their designee(s) to audit compliance with this MOU.
- c. This section remains in full force and effect even after termination of the Agreement by its natural termination or the early termination by either party.
 - d. The CoC, its agents, and its employees shall not disclose any documents or data received from HCR and marked as confidential. The CoC shall not make comments to the news media or in any publicly accessible, on-line forum, regarding HCR or the administration of this program without HCR's written consent.

IX. COMPLIANCE

- a. It is the responsibility of the Parties to remain current on all federal rules, including new guidance issued by HUD during the contract period, to ensure that all staff employed for the program are properly trained and certified in accordance to HUD standards. In addition, the parties must remain current on all applicable State and Local laws, regulations and rules. Parties agree to cooperate with any program evaluation efforts undertaken by HUD, or a HUD-approved contractor, including compliance with HUD evaluation protocols and data sharing requests.

X. CoC COMPENSATION FOR SERVICES

- a. HCR shall not provide additional funding to the CoC Lead Agency for any SV referrals performed under this MOU. Any compensation to be made to the CoC Lead Agency for services performed under this MOU shall be made at the discretion of HCR, and is subject to the availability of federal funds and resources.

XI. TERMINATION

- a. Either HCR or the CoC may terminate this agreement with 30 days' notice. The Notice of Termination must be issued pursuant to Section XIV of this MOU. In the event that funding allocated for the SV program by the 2021 Act becomes exhausted, unfunded, or amended such that this funding is not available then this MOU shall terminate. The CoC shall then contact HCR for guidance. Nevertheless, this MOU will terminate upon the latest funding date of the 2021 Act.
- b. The MOU may be terminated immediately if one Party is found to be in default by HUD or another federal or state regulatory agency.

XII. NEW YORK STATE EXECUTIVE LAW ARTICLE 15-A

- a. The CoC acknowledges HCR's obligation under the law to promote opportunities for minority- and women-owned business enterprises ("MWBEs"). Where applicable, the CoC shall comply with the provisions of the Agency's Participation by Minority Group Members and Women Requirements and Procedures for Contracts, attached hereto and incorporated herein as **Appendix II**.

XIII. PROGRAM ADMINISTRATION CONTACTS

- a. Except as otherwise specified herein, HCR's designated contact concerning programmatic questions pertaining to this MOU, shall be:

Name: Iryna Mogilevich
 Title: Deputy Director, Specialized Housing Choice Voucher Programs
 Address: New York State Homes and Community Renewal
 25 Beaver Street
 New York, NY 10004
 Phone: (718) 751-6133
 E-mail: iryna.mogilevich@nyshcr.org

HCR may designate a new or alternate contact by providing the CoC a written notice to that effect.

- b. The CoC designated contact concerning this MOU, and acting as the lead SV liaison, shall be:

Name: Michelle Herrera
 Title: CoC Planning Coordinator
 Address: Orange County CoC/HONOR
 185 Monhagen Avenue
 Middletown, NY 10940
 Phone: 845-343-7115 ext.314
 E-mail: mherrera@honorehg.org

the exclusive jurisdiction of the state courts located in New York, NY for any actions, suits or proceedings arising out of or relating to this MOU.

- g. If any of the provisions of this MOU shall be held or made invalid by a statute, rule, regulation, decision of a tribunal or otherwise, the remainder of this MOU shall not be affected thereby and, to this extent, the provision of this MOU shall be deemed to be severable.
- h. HCR, at its discretion, may exercise its option to modify any provision in this MOU including, but not limited, on as needed basis, with mutual written consent of the parties.
- i. This MOU may be executed in one or more counterparts, each of which will be deemed the original and all of which taken together as a whole, shall constitute one and the same instrument.
- j. Upon the expiration of this MOU, all provisions of this MOU related to confidentiality and security will survive.

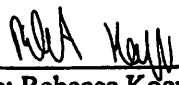
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IN WITNESS WHEREOF, the Parties executed this MOU on the day and year first written above.

CONTINUUM OF CARE LEAD ORGANIZATION

By: 
Name: Michelle Herrera
Title: CoC Planning Coordinator

NEW YORK STATE HOMES AND COMMUNITY RENEWAL

By: 
Name: Rebecca Koepnick
Title: Senior Vice President and Chief Strategy Officer for Portfolio Preservation

Approved as to Form by Legal Counsel

By: 
Stephanie Ruiz, HTFC Senior Attorney

Approved as to Fiscal Sufficiency

By: 
Stacey Mickle, HTFC Treasurer