

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.

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

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1A-1. CoC Name and Number: MA-500 - Boston CoC

1A-2. Collaborative Applicant Name: City of Boston Acting by and through its PFC

1A-3. CoC Designation: CA

1A-4. HMIS Lead: City of Boston Acting by and through its PFC

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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|-------|---|--|
| 1B-1. | Inclusive Structure and Participation–Participation in Coordinated Entry. | |
| | NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p. | |

In the chart below for the period from May 1, 2020 to April 30, 2021:

| | |
|----|---|
| 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 of CoC Board Members | Participated in CoC's Coordinated Entry System |
|-----|---|------------------------------|--|--|
| 1. | Affordable Housing Developer(s) | Yes | Yes | Yes |
| 2. | Agencies serving survivors of human trafficking | Yes | Yes | Yes |
| 3. | CDBG/HOME/ESG Entitlement Jurisdiction | Yes | Yes | Yes |
| 4. | CoC-Funded Victim Service Providers | Yes | Yes | Yes |
| 5. | CoC-Funded Youth Homeless Organizations | Yes | Yes | Yes |
| 6. | Disability Advocates | Yes | Yes | Yes |
| 7. | Disability Service Organizations | Yes | Yes | Yes |
| 8. | Domestic Violence Advocates | Yes | Yes | Yes |
| 9. | EMS/Crisis Response Team(s) | Yes | Yes | Yes |
| 10. | Homeless or Formerly Homeless Persons | Yes | Yes | Yes |
| 11. | Hospital(s) | Yes | Yes | Yes |
| 12. | Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations) | Nonexistent | No | No |
| 13. | Law Enforcement | Yes | No | No |
| 14. | Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates | Yes | Yes | Yes |
| 15. | LGBT Service Organizations | Yes | Yes | Yes |
| 16. | Local Government Staff/Officials | Yes | Yes | Yes |
| 17. | Local Jail(s) | Yes | No | No |
| 18. | Mental Health Service Organizations | Yes | Yes | Yes |

| | | | | |
|-----|---|-----|-----|-----|
| 19. | Mental Illness Advocates | Yes | Yes | Yes |
| 20. | Non-CoC Funded Youth Homeless Organizations | Yes | No | Yes |
| 21. | Non-CoC-Funded Victim Service Providers | Yes | No | No |
| 22. | Organizations led by and serving Black, Brown, Indigenous and other People of Color | Yes | Yes | Yes |
| 23. | Organizations led by and serving LGBT persons | Yes | Yes | Yes |
| 24. | Organizations led by and serving people with disabilities | Yes | No | Yes |
| 25. | Other homeless subpopulation advocates | Yes | Yes | Yes |
| 26. | Public Housing Authorities | Yes | Yes | Yes |
| 27. | School Administrators/Homeless Liaisons | Yes | No | Yes |
| 28. | Street Outreach Team(s) | Yes | Yes | Yes |
| 29. | Substance Abuse Advocates | Yes | Yes | Yes |
| 30. | Substance Abuse Service Organizations | Yes | Yes | Yes |
| 31. | Youth Advocates | Yes | Yes | Yes |
| 32. | Youth Service Providers | Yes | Yes | Yes |
| | Other:(limit 50 characters) | | | |
| 33. | | | | |
| 34. | | | | |

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

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| 1B-2. | Open Invitation for New Members. | |
| | NOFO Section VII.B.1.a.(2) | |

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| | Describe in the field below how your CoC: |
| 1. | communicated the invitation process annually to solicit new members to join the CoC; |
| 2. | ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats; |
| 3. | conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and |
| 4. | invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities). |

(limit 2,000 characters)

1-Membership recruitment to the CoC is continuous & open all year to any person or entity w/ interest in preventing & ending homelessness in Boston. There are no barriers to entry & new participation across sectors is actively pursued by the CoC. Those w/an interest in the work of the CoC may contact the City via its website to be added to the CoC listserv. CoC efforts are advertised via its webpage, the City's website, social media platforms, open meetings, radio & TV & by the Mayor's press office. 2-The CoC Leadership Council & CoC work groups frequently assess representation in general CoC membership & w/i the work group structure to ensure broad representation, most especially of those least likely to participate, incl. those w/ lived experience & those living w/ disabling conditions. Those requiring assistive technology to access CoC information may utilize the City's Disability Commission for support. 3-The CoC has strong consumer advisory boards. BacHOME is the CoC's consumer council & the Boston YAB is a YYA focused consumer group. Both have membership representative of many subpops, incl. those w/ disabling

conditions, veterans, women, racial minorities & the LGBTQ community. Consumer members are invited to prepare for CoC meetings w/ CoC liaisons to review agenda subject matter. 4-During the C-19 public health emergency it became even more critical to reach grassroots, culturally specific communities to ensure access to federal, state & local resources needed to support the health & safety of their communities. The CoC worked closely w/ our city government colleagues, incl. the Office of New Bostonians & the Boston Resiliency Fund (BRF) to ensure robust outreach to community-based groups that might otherwise not connect w/ the CoC. The CoC collaborated on funding awards w/ the BRF. Through that link, connections were forged w/ grassroots orgs serving myriad populations, incl. Latinx, Haitian, & those w/ a focus on the needs of justice-involved citizens.

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| 1B-3. | CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. | |
| NOFO Section VII.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; and | |
| 3. | took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness. | |

(limit 2,000 characters)

1-In June of 2021, the CoC launched a public series of forums to create a vision of how Boston's adult shelter system should operate and a plan for transformation. This effort has engaged a broad array of organizations and perspectives, including people with lived experience who participate in Boston's Youth Action Board (YAB) and Boston's advisory council of adults who have experienced homelessness (BacHOME), hospitals, PSH providers, day and night shelters, street outreach programs, behavioral health providers, state & city officials, & advocacy organizations. Similarly, the CoC participates in the Boston Family Roundtable, a regular public meeting convened by United Way that includes family shelter and housing providers, state and city officials, and funders..

2-As with any public forum, the CoC presents info about relevant topics and resources e.g. EHV's. The CoC then gathers feedback about improvements or new approaches to preventing and ending homelessness. The CoC maintains a list serv & a webpage that allows the external sharing of information on CoC resources and activities. Interested parties are provided with info on how to join the CoC on the webpage.

3-The CoC gathers info/feedback at community meetings related to the public's concern. Most recently a public forum about street homelessness was held & as a result CoC targeted additional resources in a Street 2 Home initiative. Additionally, the CoC has a Leadership team and several active working groups organized around CoC goals that continually provide feedback and input through regular meetings; these settings provide a forum for setting goals and workshopping approaches to improve our collective response to preventing homelessness through diversion efforts or if a homeless crisis can't be avoided, how to ensure that it is rare, brief & non-recurring.

| | | |
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| 1B-4. | Public Notification for Proposals from Organizations Not Previously Funded. | |
| | NOFO Section VII.B.1.a.(4) | |

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| | Describe in the field below how your CoC notified the public: |
| 1. | that your CoC's local competition was open and accepting project applications; |
| 2. | that your CoC will consider project applications from organizations that have not previously received CoC Program funding; |
| 3. | about how project applicants must submit their project applications; |
| 4. | about how your CoC would determine which project applications it would submit to HUD for funding; and |
| 5. | how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats. |

(limit 2,000 characters)

1-The CoC publicly announced new funding and reallocation opportunities for the 2021 CoC competition at multiple CoC meetings, including the CoC's Housing and Stabilization Leadership meeting on 10/7/21, the CoC's General Membership meeting on 9/9/2021 and at the Boston CoC Competition Oversight Committee meeting on 9/23/2021. The availability of the Request for Proposals was posted to the CoC on the web page and via email blast on 9/27/2021. The CoC used several additional methods to advertise the availability of new funding during the competition, including a daily newspaper (Boston Herald) which covers the entire CoC geographic area, at CoC work group meetings, and web postings on the main City of Boston website. 2-The CoC uses a public procurement process to solicit proposals from interested parties. The advertisement stipulates the opportunity is open to 501(c)(3) organizations that serve homeless populations and isn't limited to those already receiving CoC funds. The CoC targets agencies that serve underrepresented populations, such as youth, women or those affected by DV. The CoC hosted an Applicants' Conference on 9/30/2021 to provide further instruction and detail on how to respond to the procurement and 33% of the agencies represented at the conference are not currently funded by CoC funding. 3-Applications are available for download via the City's supplier portal in accessible PDF format. 4-Applications are scored in accordance with tools approved by the Oversight Committee. Details regarding the transparent scoring and review process are disclosed in the Request for Proposals. Those requiring assistive technology to access CoC information may utilize the City's Disability Commission for these needs.

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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| 1C-1. | Coordination with Federal, State, Local, Private, and Other Organizations. | |
| | NOFO Section VII.B.1.b. | |

In the chart below:

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|----|--|
| 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 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) | Nonexistent |
| 11. | Organizations led by and serving Black, Brown, Indigenous and other People of Color | Yes |
| 12. | Organizations led by and serving LGBT persons | Yes |
| 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) | |

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| 18. | other local CoCs; Veteran Services Org | Yes |
|-----|--|-----|

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| 1C-2. | CoC Consultation with ESG Program Recipients. | |
| | NOFO Section VII.B.1.b. | |

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| | Describe in the field below how your CoC: |
| 1. | consulted with ESG Program recipients in planning and allocating ESG and ESG-CV 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 within your CoC's geographic area so it could be addressed in Consolidated Plan update. |

(limit 2,000 characters)

1-The COVID-19 public health emergency required CoCs to coordinate a nimble communication structure to ensure life saving resources were deployed quickly to those most at risk of an adverse outcome from COVID-19. Boston, like many other communities, received an influx of federal funding through the CARES Act, including ESG-CV. The City's Department of Neighborhood Development (DND) serves as the CA for the CoC, the lead agency responsible for the development of the ConPlan & is the recipient for Boston's ESG allocation. Having these responsibilities centralized with one agency allowed for swift solicitation of input from CoC and ESG stakeholders on how to best deploy the funding tranches. The community advised that the initial tranche support the shelter providers' immediate needs as they first responded to C-19, while utilizing the subsequent award to focus on rehousing efforts. In addition, the Boston CoC coordinated closely with the State's ESG investment efforts, to ensure optimal coordination of funding for Boston's providers.

2-DND hired additional staff to help monitor these investments, principally through desk reviews, virtual check- ins, and any available new data.

3- As a single plan jurisdiction, the homeless & homelessness prevention sections of the ConPlan are updated annually by CoC & ESG staff working in conjunction w/ policy & research staff as the ConPlan is developed, using data from Federal reports including the PIT, HIC, CoC application, CAPER & LSA & HMIS warehouse reports for data on clients interacting w/ our homeless response system.

4-CoC staff conduct broad outreach to CoC members to solicit input into the ConPlan. A # subrecipients receive both CoC & ESG funded contracts, so funded activities are coordinated to best address system gaps & maximize resources.

| | | |
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| 1C-3. | Ensuring Families are not Separated. | |
| | NOFO Section VII.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 gender:

| | | |
|----|---|----|
| 1. | Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are | No |
|----|---|----|

| | | |
|----|---|-----|
| | not separated. | |
| 2. | Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated. | No |
| 3. | Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients. | Yes |
| 4. | Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance. | No |
| 5. | Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers. | No |
| 6. | Other. (limit 150 characters) | |
| | | |

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| 1C-4. | CoC Collaboration Related to Children and Youth—SEAs, LEAs, Local Liaisons & State Coordinators. | |
| | NOFO Section VII.B.1.d. | |

Describe in the field below:

| | |
|----|---|
| 1. | how your CoC collaborates with youth education providers; |
| 2. | your CoC's formal partnerships with youth education providers; |
| 3. | how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA); |
| 4. | your CoC's formal partnerships with SEAs and LEAs; |
| 5. | how your CoC collaborates with school districts; and |
| 6. | your CoC's formal partnerships with school districts. |

(limit 2,000 characters)

1&2-Youth education providers are critical to Boston's community response to prevent & end YYA homelessness & to connect HHs w/ school aged kids to local education resources. The CoC collaborates w/ the HERN, Youth Harbors, Youth Flex Fund, the Commission on Unaccompanied Youth Homelessness & others detailed below, that include CoC youth ed. providers. Youth Harbors, a CoC& YHDP partner, participates in HERN meetings & works w/ school-based homeless liaisons to triage unaccompanied YYA to housing resources. Youth Harbors' BPS Peer Housing Navigator receives referrals by BPS homeless liaisons & directly from YYA in need of ES, safety planning, or housing programs. Youth Harbors assesses YYA for the CoC's CES & offers YYA pathways to PH programs. 3&4- CoC members attend the LEA & SEA meetings & LEA& SEA members attend CoC meetings & committees. BPS- the school district & the LEA, is involved in several initiatives to support education among school aged kids experiencing homelessness. BPS leads the Homeless Education Resource Network (HERN) to support students w/o PH to ensure access to equitable/high quality education; & by providing the resources needed for social-emotional success. The MA CoC leads participate on the MA Commission on Unaccompanied Youth Homelessness together w/ the SEA coordinator. The CoC leverages state efforts to support homeless students in higher ed. through partnerships w/ the community college & UMass system. 5- The BPS homeless school liaisons & other staff have been trained on resources available for YYA experiencing homelessness/ housing instability, such as the Flex Fund, which provides 1X \$ assistance for YYA to move into PH. 6-In '17 BPS signed an MOU for Boston's Family-Led Stability Pilot to help BPS HHs access safe housing. FLSP grew in 2020, as BPS, BHA, & the CoC partnered to house nearly 1K homeless HHs in BPS w/ S8. BPS has 1 voting seat on the YYA homelessness executive committee, filled by Director of Opportunity Youth

@ BPS.

| | | |
|--------|--|--|
| 1C-4a. | CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility. | |
| | NOFO Section VII.B.1.d. | |

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

(limit 2,000 characters)

Boston Public Schools (BPS) collects data on students meeting DOE M-V homeless definition & collaborates w/ the state's DHCD which oversees the MA family shelter system, when BPS HHs are placed in shelters. EA family shelter staff & BPS informs YYA & families who become homeless of their eligibility for education services. BPS provides that every school now has an identified homeless liaison that works with homeless students & their families through multiple channels, including school support teams, written materials including a comprehensive resource guide, posters that are displayed in schools, community centers, clinics and shelters, & a website. Materials are available in multiple languages & translation services are available. In addition, BPS & DND collaborated w/ a Rapport fellow to create a triage tool for homeless liaisons to connect unaccompanied youth w/ housing resources & services support, including school based food pantries & laundry. Additionally, BPS convenes the Homeless Education Resource Network (HERN) Council. The HERN is composed of community stakeholders knowledgeable on issues of family & YYA homelessness & includes two representatives from the CoC Lead Agency, one oversees ESG homeless prevention resources, the 2nd oversees CoC & ESG RRH resources. HERN members work collaboratively to assess the effectiveness of existing policies & procedures that impact BPS households experiencing homelessness. The Council members make recommendations to BPS staff & leadership to broaden in-reach to those in BPS that are experiencing homelessness to ensure they are informed of M-V educational rights & available community-based resources.

| | | |
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| 1C-4b. | CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers. | |
| | NOFO Section VII.B.1.d. | |

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

| | | MOU/MOA | Other Formal Agreement |
|----|--|---------|------------------------|
| 1. | Birth to 3 years | Yes | Yes |
| 2. | Child Care and Development Fund | No | Yes |
| 3. | Early Childhood Providers | Yes | 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 | Yes |
| 9. | Tribal Home Visiting Program | No | No |
| | Other (limit 150 characters) | | |
| 10. | Cradles to Crayons, Child Care Choices of Boston, Jump Start, Room to Grow, United Way, Vital Village | Yes | Yes |

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| 1C-5. | Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Annual Training—Best Practices. | |
| | NOFO Section VII.B.1.e. | |

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

| | |
|----|--|
| 1. | Project staff that addresses safety and 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 safety and 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 2,000 characters)

1-DND in conjunction with the Family Justice Center (FJC) and local hospitals, coordinated a training in early 2021 on how to best respond to an increase in calls from HH experiencing multiple forms of domestic violence. In an effort to support staff responding to these calls, the FJC receives VOCA funding and has trained clinicians that focus on assessing immediate safety needs and assisting in safety planning and shelter access as needed. FJC training objectives include giving providers skills to identify needs and provide appropriate services to vulnerable populations at risk of experiencing DV, SA, HT and other forms of violence. FJC trainings are tailored to the audience and are available free of charge.

2-Attendees at the 2021 training included hotline and Coordinated Entry staff. Topics covered included safety planning, trauma-informed care, client-centered approaches to effective service delivery and how non-victim service providers can assess whether a client may be experiencing some form of domestic or dating violence or trafficking. These client centric practices are also incorporated into the CoC's CES assessment tools and referral process, to ensure that the CES process addresses the physical and emotional safety, privacy and confidentiality needs of households fleeing DV. CES staff provide confidential referrals through the CES system and safety planning protocols include unique id #'s, releases of information with specific and limited identifying information, and confidential unidentified location and contact information. Additionally, the CoC successfully applied for HUD's HMIS Capacity Building NOFA. The project plan includes training 2 CoC staff in best practices of data collection utilizing a Trauma Informed Care approach under a "train the trainer" model, so that this expertise can be disseminated to all CoC and ESG provider agencies to put into use when working with survivors that interact with our system.

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| 1C-5a. | Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Using De-identified Aggregate Data. | |
|--------|--|--|

NOFO Section VII.B.1.e.

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

(limit 2,000 characters)

The Boston CoC uses multiple data sources to assess the scope of the need related to those fleeing domestic violence, dating violence, sexual assault, and stalking. The CoC maintains an HMIS data warehouse which contains data on 98% of the ES beds in the CoC and 100% of the Street Outreach programs in the CoC. Under VAWA, Victim Service providers are prohibited from contributing their data to this warehouse; however these providers through the usage of their HMIS comparable database can generate aggregate reports, federally mandated and ad-hoc, to report to the CoC. DV providers report to the CoC for the PIT count, APRs for CoC funded programs and ad-hoc upon request. Additionally, one of the Boston CoC funded DV provider partners operates the State-wide DV hotline and regularly shares information regarding the number of calls or interventions within the CoC. In addition to HMIS, PIT and APR information, the CoC also has access to the national survey DV providers complete each year to calculate local need for DV resources. The CoC has extrapolated that information to calculate the need specifically for the CoC, as the survey is conducted for a state-wide count. Finally, because the CoC has chosen to implement its Coordinated Entry System using a technology platform, DV and other non-HMIS providers are piloting a de-identified data collection and matching process using the CoC's CAS Housing Matching system. This de-identified data will enable the CoC to measure time to housing across multiple populations both identified and de-identified as well as information about other housing barriers and resource gaps that may impact this vulnerable population.

1C-5b. Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Coordinated Assessment—Safety, Planning, and Confidentiality Protocols.

NOFO Section VII.B.1.e.

Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

1. prioritize safety;
2. use emergency transfer plan; and
3. ensure confidentiality.

(limit 2,000 characters)

1-Survivors in need of safe housing resources are assisted to locate a safe unit through trained staff to ensure the survivors' feelings of safety & control. CES screening tools allow for the quick identification of those fleeing a DV situation & ensure the immediate triage of survivors to SafeLink, a DV hotline that can make immediate referrals to programs. SafeLink is a 24/7, toll-free, multilingual, statewide, confidential hotline w/ advocates that are trained to provide victim-centered & trauma-informed support, assistance w/ safety planning, & information & referral services.

2-The CoC has an emergency transfer plan for victims of domestic violence, dating violence, sexual assault, & stalking; the plan is included as part of all

CoC funded contracts. In accordance w/ VAWA, the CoC allows tenants to request emergency transfer to another housing unit if they are in danger. A tenant experiencing DV is eligible for emergency transfer if the tenant reasonably believes there is threat of imminent harm from additional violence by remaining in the unit. Tenants not in good standing may request transfer if they meet VAWA emergency transfer requirements. The transfer plan recognizes survivors' feelings of safety, choice and control are of the utmost importance & therefore staff practice a trauma informed approach. The transfer plan also ensures that the eligibility & documentation processes do not create barriers nor risk re-traumatizing victims.

3-The CES safety protocol for those fleeing DV is to de-identify information when matching a household to a resource. Those fleeing DV are immediately prioritized for resource matching, maximizing options & client choice. Clients may be served by either a victim service provider or a mainstream provider, depending on resource availability and choice. Once matched, access to additional resources for survivors, such as those funded by MA Department of Public Health or Federal HHS or DOJ can be coordinated as appropriate.

| | | |
|-------|--|--|
| 1C-6. | Addressing the Needs of Lesbian, Gay, Bisexual, Transgender–Anti-Discrimination Policy and Training. | |
| | NOFO Section VII.B.1.f. | |

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

| | | |
|-------|---|--|
| 1C-7. | Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen. | |
| | NOFO Section VII.B.1.g. | |

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> 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 2020 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? |
|---|---|---|---|
| Boston Housing Authority | 64% | Yes-Both | Yes |
| Department of Housing & Community Development | 10% | Yes-HCV | Yes |

| | | |
|--------|---|--|
| 1C-7a. | Written Policies on Homeless Admission Preferences with PHAs. | |
|--------|---|--|

NOFO Section VII.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 2,000 characters)

The CoC continues to partner with the Boston Housing Authority (BHA) and the State's Department of Housing and Community Development (DHCD), the 2 largest PHA's in the City of Boston to administer a homeless admission preference. The BHA is the largest affordable housing provider in the CoC and has a long- standing partnership with the Boston CoC to adopt preferences for homeless populations in its public housing, PBV and HCV portfolios. BHA's Admin Plan gives a homeless priority across its portfolio and also has a long-term homeless preference for the entire PBV portfolio, which was created based on advocacy from the CoC. The BHA has also adopted a policy that households in a RRH program maintain their homeless status. BHA has Memoranda of Agreement (MOAs) with numerous homeless, public health, hospital or social services agencies. Over 1000 Public housing units, Project- or Tenant-based Vouchers go to Family Households with Children via: A Healthy Start in Housing (BPHC); Health Starts at Home (Boston Medical Center), HomeBase FastTrack (Metro Boston Housing Partnership), Leading the Way Home matches 500 BHA mobile vouchers and EA-funded stabilization to Boston families with the longest length of stay in ES; Family Unification Program (FUP) vouchers house over 190 DCF-involved families. DND's Deputy Director of Supportive Housing and DND's Advisor for Boston's System to End Homelessness meet regularly with BHA senior leadership to review utilization, ensure smooth referrals from CoC agencies to BHA and monitor service match. BHA is a leader in the CoC Housing and Stabilization Leadership group and participates in the case conferencing work group and the veterans work group.

| | | |
|--------|---|--|
| 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 Tax Credit (LIHTC) developments | Yes |
| 4. | Local low-income housing programs | No |
| | Other (limit 150 characters) | |
| 5. | | |

| | | |
|--------|--|--|
| 1C-7c. | Including PHA-Funded Units in Your CoC's Coordinated Entry System. | |
| | NOFO Section VII.B.1.g. | |

| | |
|--|-----|
| Does your CoC include PHA-funded units in the CoC's coordinated entry process? | Yes |
|--|-----|

| | | |
|----------|---|--|
| 1C-7c.1. | Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System. | |
| | NOFO Section VII.B.1.g. | |

If you selected yes in question 1C-7c., describe in the field below:

| | |
|----|---|
| 1. | how your CoC includes the units in its Coordinated Entry process; and |
| 2. | whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs. |

(limit 2,000 characters)

1-Boston CoC partners with the Boston Housing Authority (BHA), our local PHA, to include their funded units in our CES. Homeless clients who are assessed through our CE assessment tool are asked questions that determine their interest in types of housing opportunities (RRH, TBV, PBV), including BHA units. Clients who are housed through a RRH program are assessed w/ the PSH to RRH Transfer Assessment that also asks about their interest in housing opportunities. BHA reports vacancies (TBV, PBV) & eligibility requirements, including the priority populations (shelter stayer, outside stayer, DV client, transfer client) for that specific resource, to the CoC CES manager who creates a list of eligible clients from the assessment lists, ranks them on cumulative days homeless for the CE assessment or score in the RRH to PSH Transfer Assessment, and sends a referral list to BHA. BHA then follows up directly with the client and their case manager. 2-BHA and the CoC have MOUs for different resources that details the eligible resources, priority populations, services to be provided to clients (case management), CoC to BHA referral process, housing search and placement (including funding move in costs), post-placement stabilization services, and PHA and CoC roles and responsibilities (staffing, referrals, engagement). Specific details of how clients are assessed and prioritized are not written into the MOU, though BHA is on the CoC Housing and Stabilization Leadership Committee and has been part of the conversations around the methods by which clients are prioritized and referred. In addition, DND organizes housing surges in coordination with the Boston Housing Authority, the state, and service providers to pair housing authority units or vouchers with supportive services. Housing surges are one-time events for eligible clients who are at the top of the CES priority list; the goal is for guests to walk out with a housing offer from BHA and enrolled in supportive services.

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

| | |
|---|-----|
| Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)? | Yes |
|---|-----|

| | | |
|----------|--|--|
| 1C-7d.1. | CoC and PHA Joint Application—Experience—Benefits. | |
|----------|--|--|

NOFO Section VII.B.1.g.

If you selected yes to question 1C-7d, describe in the field below:

| | |
|----|--|
| 1. | the type of joint project applied for; |
| 2. | whether the application was approved; and |
| 3. | how your CoC and families experiencing homelessness benefited from the coordination. |

(limit 2,000 characters)

BHA coordinated with the Boston CoC to apply for Mainstream vouchers. This application was approved and Boston received 410 Mainstream vouchers. The BHA's homeless priority applies to these vouchers. BHA committed 100 mainstream vouchers to the CoC's Street to Home Initiative, targeting the most vulnerable homeless individuals who are sleeping unsheltered through a fast-track referral process as outlined in a draft MOU between the CoC and the BHA. The initiative involves representatives from multiple City departments, including Boston Public Health Commission's Office of Recovery Services, Boston Housing Authority and the Department of Neighborhood Development (as lead for CoC and ESG-CV), Boston Health Care for the Homeless, Pine Street Inn Street Outreach team, St. Francis House, Eliot Human Services and many other providers involved in providing housing and services to unsheltered persons. These partners developed a by-name-list of 250 people and have been working to assess and connect these individuals to the mainstream vouchers. The initiative is also leveraging ESG-CV funding. In addition, BHA has committed to project-basing mainstream vouchers in two large scale PSH developments in the pipeline. One of these developments, located at 140 Clarendon St, is a partnership between Pine Street Inn and Beacon Communities and will have 111 units of PSH. The other Development, located at 3368 Washington St is a partnership between Pine Street Inn and The Community Builders will have 140 units of PSH. The PSH units in both of these developments will be filled through Boston's Coordinated Entry System referrals.

| | | |
|--------|---|--|
| 1C-7e. | Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers. | |
| | NOFO Section VII.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 |
|--|-----|

| | | |
|----------|---|--|
| 1C-7e.1. | Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program--List of PHAs with MOUs. | |
| | Not Scored--For Information Only | |

| | |
|---|-----|
| Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program? | Yes |
|---|-----|

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

Applicant: Boston CoC

MA-500

Project: MA-500 CoC Registration FY 2021

COC_REG_2021_181801

| PHA |
|----------------------|
| Boston Housing Au... |
| MA Department of ... |

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

Name of PHA: Boston Housing Authority

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

Name of PHA: MA Department of Housing and Community
Development

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

| | | |
|-------|----------------------------------|--|
| 1C-8. | Discharge Planning Coordination. | |
| | NOFO Section VII.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 |

| | | |
|-------|---|--|
| 1C-9. | Housing First–Lowering Barriers to Entry. | |
| | NOFO Section VII.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 2021 CoC Program Competition. | 39 |
| 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 2021 CoC Program Competition that have adopted the Housing First approach. | 39 |
| 3. | This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing. | 100% |

| | | |
|--------|-----------------------------------|--|
| 1C-9a. | Housing First–Project Evaluation. | |
| | NOFO Section VII.B.1.i. | |

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

(limit 2,000 characters)

The Boston CoC requires that all of its programs - RRH and PSH - follow Housing First principles when working w/ clients. After assessment & prioritization, clients are referred to housing opportunities through the Coordinated Access System (CAS). CAS allows the CoC to track progress of

clients from match to lease up, if they decline the opportunity, or the housing program rejects the client. CAS only allows clients to be rejected by a provider for limited reasons. Allowable rejections include ineligibility for the resource (due to funder eligibility restrictions), self resolution, client unresponsiveness, falsification of documents, or documented health & safety concern for staff & other clients w/ the specific agency to which the client was matched. There is also the possibility of additional screening criteria imposed by third party landlords. There is no allowance for preconditions that clients must meet before program entry, but for one sober living house that requires sobriety for enrollment. For every match rejection, the CE Manager follows up w/ the agency to confirm the reason for rejection; annual program monitoring also reviews if/when/why a matched client would be rejected from the program. The client's CM is also able to provide information via CAS if there are concerns the rejection violates HF policy. If such concerns are present, the issue can be raised at the weekly Case Conference Working Group, chaired by the CE Manager for resolution. CAS also allows the CoC to track process efficiency to ensure that clients are not unnecessarily delayed in accessing the resources they are matched to. At 30 days, CAS automatically alerts all parties if a client is stuck at a stage in the housing process. If affiliated agencies report that the client is stuck at a step due to housing agency concerns the CE Manager addresses in CAS, by email, or in the Case Conference WG.

| | | |
|--------|---------------------------------|--|
| 1C-9b. | Housing First–Veterans. | |
| | Not Scored–For Information Only | |

| | |
|---|-----|
| Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach? | Yes |
|---|-----|

| | | |
|--------|-------------------------|--|
| 1C-10. | Street Outreach–Scope. | |
| | NOFO Section VII.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 2,000 characters)

Despite Covid-19 the Boston CoC Street Outreach Network continues to cover the entire CoC 365 days/year. To ensure a timely response to all persons in need an Unsheltered Persons Service Request option was added to the 24Hr City hotline in May 2020. The portal routes 200+ service calls a month to a multi-agency Coordinated Response Team. DND's Asst. Director for Street Homelessness, EMS, BPD and community providers triage and refer to outreach or shelter. Pine St. Inn ESG-funded teams conduct mobile day and overnight outreach 24/7 and conference with DMH and BEST clinicians for persons with mental health emergencies anywhere in the CoC. Bridge Over Troubled Waters outreaches to runaway or homeless YYA via street workers,

medical van and a 24/7 crisis hotline. At the epicenter of the CoC opioid epidemic Boston Public Health expanded outreach from 8 to 16 workers and Eliot, the State PATH Provider collaborates to promote treatment for opioid/substance users and housing or motel placements. The BPD Homeless Outreach Unit increased from 3 to 8 officers trained in mental health first aid and BEST mental health co-responders increased from 5 to 15 to ensure persons previously unknown to the system not seeking shelter or services due to untreated mental illness or SUD are assessed and assisted. In June 2021, DND began a new Street to Home initiative offering low-threshold housing to 300 persons least likely to request assistance. ESG-CV RRH, BHA Mainstream and Emergency Housing Vouchers for PSH are being offered to all eligible unsheltered persons on a By Name List. Housing, shelter and supportive services information is shared to all regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status or disability via outreach, low-threshold sites. All outreach is multilingual. Spanish, Chinese, Haitian or Cape Verdean Creole, other language translation and ASL are available via Mayor's Health Line & area Medical Centers.

| | | |
|--------|---|--|
| 1C-11. | Criminalization of Homelessness. | |
| | NOFO Section VII.B.1.k. | |

Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC's geographic area:

| | | |
|----|---|-----|
| 1. | Engaged/educated local policymakers | Yes |
| 2. | Engaged/educated law enforcement | Yes |
| 3. | Engaged/educated local business leaders | Yes |
| 4. | Implemented communitywide plans | Yes |
| 5. | Other:(limit 500 characters) | |
| | N/A | No |

| | | |
|--------|---|--|
| 1C-12. | Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC). | |
| | NOFO Section VII.B.1.l. | |

| | 2020 | 2021 |
|---|-------|-------|
| Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of “Current.” | 1,598 | 1,388 |

| | | |
|--------|--|--|
| 1C-13. | Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization. | |
| | NOFO Section VII.B.1.m. | |

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

| | Type of Health Care | Assist with Enrollment? | Assist with Utilization of Benefits? |
|----|---|-------------------------|--------------------------------------|
| 1. | Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services) | Yes | Yes |
| 2. | Private Insurers | Yes | Yes |
| 3. | Nonprofit, Philanthropic | Yes | Yes |
| 4. | Other (limit 150 characters) | | |
| | Free care clinics for unsheltered women; Mobil Harm Reduction Teams for SUD/Opioid users | Yes | Yes |

| | | |
|---------|--|--|
| 1C-13a. | Mainstream Benefits and Other Assistance—Information and Training. | |
| | NOFO Section VII.B.1.m | |

| | |
|----|--|
| | Describe in the field below how your CoC provides information and training to CoC Program-funded projects by: |
| 1. | systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area; |
| 2. | communicating information about available mainstream resources and other assistance and how often your CoC communicates this information; |
| 3. | working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and |
| 4. | providing assistance with the effective use of Medicaid and other benefits. |

(limit 2,000 characters)

As convening entity for the Boston CoC, DND is responsible for the overall CoC strategy to link those experiencing homelessness with the mainstream benefits they qualify for. Despite the Covid Pandemic the CoC continues to systematically provide Mainstream (MS) Benefit info to its provider network via listserv, website and CoC meetings. An annual Basic Benefits Training series provides updates on changes affecting client eligibility. In FY20, 100% of renewal & new projects assisted homeless households in obtaining MS benefits. Boston's Family Shelter Collaborative at United Way convenes 18 family providers operating 38 shelter sites to share information regarding MS benefits, including SNAP and WIC, basic needs and digital technology for information, referral and resource sharing. 100% of family shelter providers ensure eligible family households enroll in TANF, SNAP, WIC, Children's Health Insurance or other MS benefits. Boston Health Care for the Homeless, Boston Medical Center Medical & Legal Partnership for Children and Mayor's Health Line enroll disabled adults in Medicaid, Medicare, SSI or SSDI at 70 emergency shelter clinics, family sites and McInnis House respite. The Mayor's Health Line provides certified navigators for all forms of health insurance through the State connector, plus information on Child Care Assistance, Elder Home Care, Community Health Centers, Dental/Oral health, free clinics, mental health and substance use services. DND encourages eligible agencies to become MassHealth CSPECH providers. (Community Support Program for People Experiencing Chronic Homelessness) a Medicaid funding for supportive housing services. Lead agencies in DND's Covid Housing Initiative and Street to Home have applied to the State to expand CSPECH MS benefits to cover more persons with disabilities. The State PATH Program lead is using SAMHSA funds to expand enrollment at the epicenter of the opioid epidemic for unsheltered persons with dual diagnoses.

| | | |
|--------|---|--|
| 1C-14. | Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen. | |
| | NOFO Section VII.B.1.n. | |

| | |
|----|--|
| | Describe in the field below how your CoC's coordinated entry system: |
| 1. | covers 100 percent of your CoC's geographic area; |
| 2. | reaches people who are least likely to apply for homeless assistance in the absence of special outreach; |
| 3. | prioritizes people most in need of assistance; and |
| 4. | ensures people most in need of assistance receive assistance in a timely manner. |

(limit 2,000 characters)

1-The CE system covers 100% of CoC geographic area as City of Boston & CoC share identical geography 2- CES includes participation of service providers, schools, early ed. providers & BPD. CoC employs a "no wrong door" CE approach to ensure access for all HHs in housing crisis. Access points to interventions are throughout the CoC via established partnerships. Partnerships include a referral mechanism from 311 to catch people least likely to apply & in housing crisis. Callers seeking assistance are routed to DND's Office of Housing Stability. OHS conducts an initial assessment to determine need & refer to an appropriate homeless prevention/ homeless assistance resource. To assure that outreach is assertively made to those least likely to seek assistance, all entities that work w/ those experiencing literal homelessness, incl. street outreach, day & night shelters, drop in spaces, victim service providers, YYA providers & housing search agencies are trained to assess clients & make referrals based on CES Written Standards / Prioritization. The CoC uses a locally tested & developed assessment; at initial contact, the Assessor will focus on diversion & rapid exit / return strategies to identify an immediate solution to end the crisis. If the episode can't be resolved immediately, the Assessor will continue to engage the guest as LOS increases, based on resource & uniform sub-pop prioritization (i.e. youth and DV). 3-Our assessment prioritizes clients most in need of assistance based on the greatest barriers to housing, which we use cumulative days homeless in the last three years, to determine. Clients having the largest number of days homeless are at the top of the list for referrals to housing resources. 4- In CE if a client is stuck at any stage in the housing process for greater than 30 days, CAS alerts the CE Manager and all staff connected to the resource and client so that any issue can be quickly resolved.

| | | |
|--------|---|--|
| 1C-15. | Promoting Racial Equity in Homelessness–Assessing Racial Disparities. | |
| | NOFO Section VII.B.1.o. | |

| | |
|--|-----|
| Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years? | Yes |
|--|-----|

| | | |
|---------|--|--|
| 1C-15a. | Racial Disparities Assessment Results. | |
|---------|--|--|

NOFO Section VII.B.1.o.

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

| | | |
|----|---|-----|
| 1. | People of different races or ethnicities are more likely to receive homeless assistance. | Yes |
| 2. | People of different races or ethnicities are less likely to receive homeless assistance. | Yes |
| 3. | People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance. | No |
| 4. | People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance. | No |
| 5. | There are no racial or ethnic disparities in the provision or outcome of homeless assistance. | No |
| 6. | The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance. | No |

| | | |
|---------|---|--|
| 1C-15b. | Strategies to Address Racial Disparities. | |
| | NOFO Section VII.B.1.o. | |

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. | No |
| 2. | The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC. | Yes |
| 3. | The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups. | Yes |
| 4. | The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups. | No |
| 5. | The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness. | 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. | N/A | No |

| | | |
|---------|---|--|
| 1C-15c. | Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment. | |
| | NOFO Section VII.B.1.o. | |

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

The CoC took steps to address systemic causes of housing instability & homelessness & underrepresentation in CoC funded partners. W/ CoC input & participation, the Fair Housing Unit (FHU) of DND drafted & implemented policies for tenant selection & resident services in multi-family developments in Boston. New housing developers are required to set aside 10% of total units for formerly homeless HH. Therefore, multi-family properties are a sector the CoC can reduce entry barriers & improve housing retention via appropriate service responses. Policies address housing entry & retention barriers that are more likely to impact HHs of color, such as mitigation for lower credit scores & eviction hx at entry & minimizing the use of law enforcement responses to mental health crises in housing. The City's Fair Chance Tenant Selection Policy is in rewrite to target needs of homeless HH for entry & will impact POC who are more likely to exp homelessness, have tenant screening barriers, & have extended housing search times. Resident Services are encouraged to respond to mental health needs w/ methods that do not rely upon law enforcement & to provide more eviction prev info. The FHU is making formal recommendations to multi family dev for training of property managers & marketing agents on anti-racist, anti-ableist, trauma informed practices & creation of supporting policies for income restricted units. Also, the CoC updated its procurement practices, which may encourage new partners w/ expertise serving POC. The CoC Lead Agency/ City of Boston's goal is to implement equitable procurement policies - promoting equitable procurement of services & homeless service providers. For every contract over \$10,000, CoC Lead Agency collaborates w/ the City's Office of Economic Development Equity & Inclusion Unit to identify any businesses that are owned by women, minorities, & veterans as well as those that are small or local, & outreach to any who provide the services we are procuring.

| | | |
|--------|---|--|
| 1C-16. | Persons with Lived Experience—Active CoC Participation. | |
| | NOFO Section VII.B.1.p. | |

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five 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 and provide input that is incorporated in the local planning process. | 27 | 1 |
| 2. | Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing. | 27 | 1 |
| 3. | Participate on CoC committees, subcommittees, or workgroups. | 4 | 1 |
| 4. | Included in the decisionmaking processes related to addressing homelessness. | 8 | 2 |
| 5. | Included in the development or revision of your CoC's local competition rating factors. | 1 | 0 |

| | | |
|--------|---|--|
| 1C-17. | Promoting Volunteerism and Community Service. | |
| | NOFO Section VII.B.1.r. | |

Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

| | | |
|----|--|-----|
| 1. | The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities. | Yes |
| 2. | The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry). | No |
| 3. | The CoC works with organizations to create volunteer opportunities for program participants. | Yes |
| 4. | The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials). | Yes |
| 5. | Provider organizations within the CoC have incentives for employment and/or volunteerism. | Yes |
| 6. | Other:(limit 500 characters) | |
| | N/A | No |

1D. Addressing COVID-19 in the CoC's Geographic Area

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

| | | |
|-------|---|--|
| 1D-1. | Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness. | |
| | NOFO Section VII.B.1.q. | |
| | Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in: | |
| 1. | unsheltered situations; | |
| 2. | congregate emergency shelters; and | |
| 3. | transitional housing. | |

(limit 2,000 characters)

1-Unsheltered guests were initially encouraged to come to nearby day program, shelter or community meal sites where testing was available; later mobile testing was offered via street outreach teams. The City opened comfort stations for unsheltered individuals, to provide restrooms, hand washing stations & outreach services. 2-In Mar 2020, Boston Health Care for the Homeless Program, Boston Public Health Commission, City Dept of Neighborhood Services, MA DPH, & homeless service providers/Boston CoC developed & implemented a citywide COVID-19 care model for ppl. in congregate ES. Components included symptom screening @ all congregate shelters, expedited pop-up site testing, isolation & management venues for symptomatic clients & those w/ confirmed disease, quarantine for asymptomatic exposed people, contact investigation & tracing. During the first 6 weeks of operation, 33.1% sheltered clients tested positive for COVID-19. Real-time disease surveillance caught a large COVID outbreak at a major shelter during week 3 of operations, necessitating rapid adaptations to the care model. Quarantine, isolation management & auxiliary sites to deconcentrate sheltered populations were rapidly expanded; 7 non-congregate sites were stood up to deconcentrate congregate ES. Universal testing was a focal point & these efforts brought positivity rates down to zero by summer 2020 & kept them low during the second wave. The City helped distribute PPE to family shelters, incl. masks, gloves, hand sanitizer & other PPE. The City funded a grant to a group of 18 family shelter providers to purchase grocery store gift cards for families, create a basic needs fund to purchase hygiene supplies needed in congregate settings, & provide telecommunications support. 3- The majority of Boston's TH are VA GPD beds at NECHV. The GPD beds were de-densified by placing

veterans into hotel rooms which successfully kept rates low in TH.

| | | |
|-------|---|--|
| 1D-2. | Improving Readiness for Future Public Health Emergencies. | |
| | NOFO Section VII.B.1.q. | |

Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

The Boston CoC Covid-19 response strengthened and improved Boston's readiness to respond to future public health emergencies. The CoC strengthened communications links with CoC-wide & regional networks of homeless providers, creating unified protocols and practices that can be replicated in the event of future emergencies. The Boston Public Health Commission enrolled CoC agencies for Medical Information Center/Office of Public Health Preparedness (MIC/OPHP) updates on infectious diseases; CoC leaders are working to transform shelters to reduce density by increasing non-congregate shelter options, the CoC and Boston Housing Authority are using Emergency Housing Vouchers to increase supportive housing for 500 households (families and indivs) and additional vouchers and RRH for 300 unsheltered clients least likely to receive care due to staying in locations not meant for human habitation. The CoC is also working to improve discharge monitoring from hospitals, corrections, and other systems of care; increase flexible triage and diversion pathways prioritizing persons with chronic health issues at higher risk of infection in congregate settings; and implementing structural/operational improvements such as physical distancing in clinics, dining or dormitory areas, removal of bunk beds, improved ventilation and adaptive reuse of outdoor spaces for testing, clinical care, recreation or respite. Although the Public Health Emergency officially ended on 6/15/21 and auto-sharing of data is currently disabled, Covid related data can still be collected and shared with the appropriate Releases of Information at this time, and the CoC has the infrastructure and capability to re-activate Public Health Emergency data sharing with minimal effort when needed as it was designed and built with the intent to be operationalized in the event of future emergencies. Training of direct care/operations staff and first responders on public health readiness and protocols is on-going.

| | | |
|-------|--|--|
| 1D-3. | CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds. | |
| | NOFO Section VII.B.1.q | |

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

| | |
|----|--------------------------|
| 1. | safety measures; |
| 2. | housing assistance; |
| 3. | eviction prevention; |
| 4. | healthcare supplies; and |
| 5. | sanitary supplies. |

(limit 2,000 characters)

Boston received an influx of federal funding through the CARES Act, including ESG-CV. The City's Department of Neighborhood Development (DND) serves as the CA for the CoC, the lead agency responsible for the development of the ConPlan & is the recipient for Boston's ESG allocation. Having these responsibilities centralized with one agency allowed for swift solicitation of input from CoC and ESG stakeholders on how to best deploy the funding tranches. The community advised that the initial tranche support the shelter providers' immediate safety needs as they first responded to C-19. (1,4,5.)DND issued a Request for Proposals in Spring 2020 that prioritized activities necessary to keep populations experiencing homelessness and front line staff safe, including cleaning supplies & services, PPE, testing and screening supplies & modifications to shelter space to better protect against the spread of COVID. Providers sought assistance to support bonus pay to attract and retain shelter staff to uphold public health recommendations re: social distancing, sanitizing, etc. The City coordinated these initial investments with the State and with other local sources of funding to ensure coordination and to extend assistance as needed. (1,2) DND issued a second RFP upon receipt of the City's 2nd ESG-CV award, with rapid rehousing and long-term improvements and modifications to large congregate shelters to protect against future outbreaks as prioritized areas of investment. This procurement has resulted in an ESG-CV investment of \$16.5M in rapid rehousing, representing housing pathways for approximately 1368 households. DND is also utilizing ESG-CV flexibilities to pilot landlord incentives so that RRH participants can compete in a very competitive rental market. 3-DND's OHS is utilizing other federal sources to heavily invest in eviction prevention efforts.

| | | |
|---|--|--|
| 1D-4. | CoC Coordination with Mainstream Health. | |
| | NOFO Section VII.B.1.q. | |
| Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to: | | |
| 1. | decrease the spread of COVID-19; and | |
| 2. | ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks). | |

(limit 2,000 characters)

1-The CoC and its providers coordinated with lead local health agencies and hospitals at the onset of the pandemic, including Boston Health Care for the Homeless Program, Boston Public Health Commission (BPHC), MA DPH, Boston Medical Center, MGH & other local hospitals. BPHC held daily coordination calls to ensure situational awareness & that safety measures were implemented. Local health agencies established screening @ all congregate ES, expedited pop-up site testing, isolation & management venues for symptomatic clients & those w/ confirmed disease, quarantine for asymptomatic exposed people, contact investigation & tracing. Quarantine, isolation management & auxiliary sites to deconcentrate shelters were rapidly expanded; 7 non-congregate sites were stood up to deconcentrate congregate ES & stop the spread of COVID. 2 large medical isolation sites were established for PEH; East Newton Pavilion (BMC and the MA DPH) & Boston HOPE (co-staffed by BMC, MGH and BHCHP) at the Boston convention center. Universal testing has been a focal point & these efforts brought positivity rates down to zero by summer 2020 & kept them low during the 2nd wave. Mobile testing was offered via street outreach teams. CoC built infrastructure to import testing data &

vaccination data from Boston Health for the Homeless' EMR system. 2-BPHC provided on site TA to CoC & other providers on infection control, compliance w/ CDC & MDPH social distancing, handwashing & cleaning recommendations & issued a number of documents / created new protocols & factsheets specific to PEH, incl. social distancing messages specific to PEH. BPHC also created opportunities to talk w/ local infectious disease experts & provided PPE & cleaning supplies. The CoC created a team focused on meeting the basic needs of individuals who were newly housed, such as food, cell phones, & face masks. PEH were prioritized for testing and vaccination.

| | | |
|-------|--|--|
| 1D-5. | Communicating Information to Homeless Service Providers. | |
| | NOFO Section VII.B.1.q. | |
| | Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on: | |
| 1. | safety measures; | |
| 2. | changing local restrictions; and | |
| 3. | vaccine implementation. | |

(limit 2,000 characters)

1-On 3/4/20 the Boston Public Health Commission(BPHC) proactively convened the first of daily calls to share a Covid advisory w/ CoC partners. The State declared a public health emergency on 3/10/20 and BPHC & Boston Health Care for the Homeless (BHCHP) coordinated and communicated updates on Covid screening & testing initiatives, isolation, shelter & recovery capacity. 2-BPHC & DND convened large adult congregate providers 2x's weekly to provide status updates on infection rates, updates on state, local & CDC prevention & control measures & guidance, & bed availability as shelters de-densified congregate sites. DND created & broadly shared a bilingual on-line inventory of homeless programs, & BPHC registered agencies for fact sheets in 10 languages with translation available in 140 languages via the Mayor's Health Line. The CoC held weekly calls for day programs & soup kitchens on health & safety measures & created a learning community for safety measures, effective testing & vaccination efforts. The CoC coordinated w/ the State on weekly calls w/ family, YYA & individual shelter providers to provide updates, & CoC staff sent weekly emails to family & adult shelter providers about how to access PPE, how to apply for City and State allocations of ESG-CV & shared philanthropic resources. To track testing & infection rates the Boston CoC HMIS built out a Public Health Emergency infrastructure in our HMIS Data warehouse to import testing & vaccination data from BHCHP Electronic Medical Record system. The HMIS COVID-19 Tool created a Health Emergency Alert tab on client search pages, showing Screening, Isolation, & Testing high-level information & dates.3-As vaccines became available, BPHC & BHCHP communicated vaccine outreach & schedules to overnight & day shelters and mobile outreach teams, using HMIS system to track a remarkable 77+% second dose vaccine rate among PEH.

| | | |
|-------|--|--|
| 1D-6. | Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination. | |
| | NOFO Section VII.B.1.q. | |

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

(limit 2,000 characters)

Boston is very fortunate to have a robust health care system especially Boston Health Care for the Homeless (BHCH) Program who worked closely with shelter providers, street outreach programs and others to make sure clinics were accessible. Family and individual shelter providers worked closely with their clients and guests were educated and informed about vaccines – all strictly voluntary. BHCH hosted virtual calls in English and in Spanish with family shelters, open to staff and families, to promote vaccine awareness. Some held raffles and offered snacks to make attending a vaccine clinic a more pleasant experience. BPHC maintained an updated schedule of vaccine clinics and disseminated, shared across the city and CoC. The local protocol required the state to prioritize people in congregate shelter settings as a first priority for vaccination, followed by unsheltered persons. CoC HMIS began the build-out of a Public Health Emergency infrastructure within our CoC HMIS Data warehouse once Governor Baker declared a public health emergency on March 10, 2020. The declaration of the public health emergency allowed the release of otherwise HIPAA-protected data to service providers in order to lessen or prevent the threat of imminent health and safety of individuals and the public. The CoC's HMIS team built the infrastructure to import both testing data and vaccination data from the Boston Healthcare for the Homeless Electronic Medical Record system. This feed was updated multiple times daily. The HMIS team also built an email notification tool that would alert designated members when new data was entered and direct them to a newly built by-name report with the updated information. As vaccinations became available, the system was updated to include the dates of additional shots that were scheduled and these were included in the notification tool and report.

| | | |
|-------|---|--|
| 1D-7. | Addressing Possible Increases in Domestic Violence. | |
| | NOFO Section VII.B.1.e. | |

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

Boston's state of emergency went into effect on March 10, 2020, shutting down most public venues. As Boston & the CoC pivoted to respond to immediate public health and safety needs, one issue that quickly emerged was risk of higher incidents of domestic violence due to the stay at home mandate. Recognizing that isolation & increased stress contribute to the likelihood of domestic violence, the City rapidly made funding available to support victim service providers throughout the CoC. In a matter of weeks, Boston created the Boston Resiliency Fund (BRF) w/ private contributions to assist non-profit and grassroots agencies serving vulnerable populations. To date, the BRF has made awards in excess of \$34.1M, including a sizable award to Casa Myrna & the Boston Domestic Violence Partnership, a leading victim service provider, to ensure they had the funds necessary to depopulate existing DV shelter to COVID-safer levels & to increase non-congregate shelter capacity to meet

increased demand for access. Both the City & State collaborated closely w/ DV providers to ensure funding alignment across Federal, State & local resources. This collaboration allowed victim service providers to serve a higher volume of households in non-con settings, as well as increasing investments in housing pathways through ESG-CV RRH. To address the specific needs of YYA experiencing unsafe living arrangements, the City funded 16 ES hostel beds & increased funding for RRH. In addition to increased resource allocation, the City hosted a specialized training for CoC staff interfacing w/ callers that were reporting unsafe living situations, exacerbated by the lock down. This training, hosted by DND, local hospitals & the Family Justice Center, reviewed safety planning protocols for those reporting feeling unsafe, to ensure staff have a trauma-informed approach to supporting & directing constituents to the right resources. Casa Myrna hosted a similar training for the Youth Working Group.

| | | |
|-------|--|--|
| 1D-8. | Adjusting Centralized or Coordinated Entry System. | |
| | NOFO Section VII.B.1.n. | |

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

The Boston CoC's CES shifted a number of times during the pandemic. In the initial days of the pandemic, the focus was on securing food and household items for housed clients to ensure safety when most of the food pantries in the City shut down. The team Coordinated with the office of Food Access and Age Strong to get food deliveries to clients. Once clients' food needs were stabilized, we focused on housing clients then moved away from our CAS, which was automatically matching clients to RRH and PSH opportunities. RRH became direct referrals, to allow for immediate housing to help depopulate the shelters without coordination, and PSH opportunities were matched manually. PSH units were presented at the twice-wkly Case Conference Working Group. Staff submitted eligible clients who were interested in the types of units being offered and clients were ranked on cumulative days homeless in the last three years. Prioritization for CoC resources shifted from CH to dedicated+ during this period. In the Fall of 2020 the CoC launched the new COVID Pathways assessment which scored clients on cumulative days homeless in addition to questions about vulnerability to COVID (living situation, health risks) and need for intensive stabilization services, allowing us to prioritize clients in crowded auxiliary sites who were at the highest risk of contracting COVID. Clients were once again matched to PSH resources through CAS. The Data/Performance Wkg Grp tracked clients matched to PSH through CAS and shared back to CoC Leadership that matches were not meeting racial equity requirements as put forth by the CoC due to assessment questions that favored white clients (presence of disability, location of night stays). The CoC agreed to shift prioritization back to cumulative days homeless in the last three years, which balanced out the racial equity concerns.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

| | | |
|-------|---|--|
| 1E-1. | Announcement of 30-Day Local Competition Deadline—Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen. | |
| | NOFO Section VII.B.2.a. and 2.g. | |

| | | |
|----|--|------------|
| 1. | Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition. | 09/27/2021 |
| 2. | Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process. | 10/20/2021 |

| | | |
|-------|--|--|
| 1E-2. | Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below. | |
| | NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d. | |

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. | Used data from a comparable database to score projects submitted by victim service providers. | Yes |
| 5. | Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve. | Yes |
| 6. | Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing. | No |

| | | |
|--------|--|--|
| 1E-2a. | Project Review and Ranking Process—Addressing Severity of Needs and Vulnerabilities. | |
|--------|--|--|

NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:

| | |
|----|--|
| 1. | the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and |
| 2. | 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 2,000 characters)

1-The Boston CoC expects that projects practice a Housing First/Low Barrier model and therefore serves those with severe needs and vulnerabilities as exemplified by the adoption of the Orders of Priority in CPD Notice-16-11 and through local policies that govern operation of the Coordinated Access System (CAS). Renewal and new apps are ranked by score as described in Boston CoC's FY21 Review, Rating and Selection Criteria. Projects are evaluated to ensure all meet threshold criteria. Severity of need is determined via objective data, weighting is as follows on renewal apps: 41% System Performance Measurements and 46% objective criteria, which includes evaluation of the following: HMIS data quality, Project Financial Performance and HUD & CoC policy priorities alignment.

2- The alignment with HUD & CoC policies awards additional points to programs that serve specific vulnerabilities that may prevent them from entering housing due to the following barriers: vulnerability to victimization (history of domestic violence), criminal histories, current or past substance use, very little or no income at entry, chronic homelessness, and projects that are the only one of its kind in the CoC serving special homeless populations/sub-populations (e.g. youth, families with children, veterans). Additionally, greater points are awarded to programs that do not screen out for CORI issues and emphasize service engagement and problem solving over punitive actions that could lead to terminations. Source documentation reviewed for project scoring includes: HUD project applications, a local CoC application, System Performance Measures, Coordinated Entry participation, Annual Performance Reports, and CoC monitoring reports / desk reviews. Each project is reviewed by a team of CoC staff to ensure a fair and thorough Rating & Ranking process. Projects are scored and ranked by consensus.

1E-3. Promoting Racial Equity in the Local Review and Ranking Process.

NOFO Section VII.B.2.e.

Describe in the field below how your CoC:

| | |
|----|--|
| 1. | obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications; |
| 2. | included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; |
| 3. | rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented). |

(limit 2,000 characters)

1-The CoC delegates the rating and ranking design to the Boston CoC Competition Oversight Committee. The committee is reflective of the broader Boston community, but not fully balanced to reflect the homeless population

accessing services, as certain groups such as BIPOC are over-represented in accessing homeless services. 2-Rating and ranking factors were weighted based on objective criteria, including HUD project threshold requirements, fidelity to Housing First, cost effectiveness and quality of HMIS participation. Objective data for rating was the information source with the least bias in application to projects. All awarded projects in this competition will commit to the Boston CoC's Statement of Racial Equity, adopted November 2020. The Statement of Intent was created by and for providers in the Boston CoC and guides our work to end homelessness with an equity lens.3-CoC statement of Racial Equity includes a public commitment to consistently seek out and create opportunities for people from marginalized communities to advance both in the field and system leadership, including the CoC Competiton Oversight Committee, to ensure that diverse perspectives are incorporated into the development of rating and ranking factors that are used to evaluate CoC project applications.

| | | |
|-------|---|--|
| 1E-4. | Reallocation–Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below. | |
| | NOFO Section VII.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 projects through this process during your local competition this year; |
| 3. | whether your CoC reallocated any low performing or less needed projects during its local competition this year; |
| 4. | why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and |
| 5. | how your CoC communicated the reallocation process to project applicants. |

(limit 2,000 characters)

1)Reallocation process for the '21 competition was determined through close collaboration with CoC providers. The unprecedented challenges and new funding opportunities presented by COVID-19 changed the programmatic landscape, as additional Federal, State and local resources were made available to prevent evictions and to rapidly rehouse households experiencing homelessness. CoC staff evaluated spending and utilization rates of programs and those identified as underperforming were approached to discuss the factors contributing to low utilization. 2) As a result of this evaluation, two family RRH programs were identified as candidates for reallocation. Providers reported that the eviction moratorium, coupled with the infusion of new resources to prevent evictions and stabilize tenancies, had led to decreasing numbers of households eligible for Co C-funded RRH programs. 3) Both providers agreed to reallocate these lower performing programs to support other identified system needs 4)N/A & 5) the availability of reallocated funds was announced through the release of a publicly advertised Request for Proposals for New CoC projects, notification was sent via the CoC's listserv, an announcement was published on the CoC's web page and verbal announcements were provided in multiple CoC meetings.

| | | |
|--------|--|--|
| 1E-4a. | Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below. | |
| | NOFO Section VII.B.2.f. | |

| | |
|--|----|
| Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021? | No |
|--|----|

| | | |
|-------|--|--|
| 1E-5. | Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes. | |
| | NOFO Section VII.B.2.g. | |

| | | |
|----|--|------------|
| 1. | Did your CoC reject or reduce any project application(s)? | Yes |
| 2. | If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. | 10/29/2021 |

| | | |
|--------|--|--|
| 1E-5a. | Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen. | |
| | NOFO Section VII.B.2.g. | |

| | |
|---|------------|
| 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. | 10/29/2021 |
|---|------------|

| | | |
|-------|--|--|
| 1E-6. | Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen. | |
| | NOFO Section VII.B.2.g. | |

| | |
|--|------------|
| Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected. | 11/12/2021 |
|--|------------|

2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

| | |
|--|----------|
| Enter the name of the HMIS Vendor your CoC is currently using. | Bitfocus |
|--|----------|

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

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

| | | |
|-------|-----------------------------|--|
| 2A-3. | HIC Data Submission in HDX. | |
| | NOFO Section VII.B.3.a. | |

| | |
|---|------------|
| Enter the date your CoC submitted its 2021 HIC data into HDX. | 05/18/2021 |
|---|------------|

| | | |
|-------|---|--|
| 2A-4. | HMIS Implementation—Comparable Database for DV. | |
| | NOFO Section VII.B.3.b. | |

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

| | |
|----|---|
| 1. | have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and |
| 2. | submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead. |

(limit 2,000 characters)

1-State Department of Public Health is the main funder of Victim Service Providers (VSP) state-wide for housing, shelter and services and as such had begun the process of reviewing and certifying comparable databases starting in 2019. During that process, MA BOSCoC HMIS staff made the determination that there were comparable databases in use that would not be certified. At that time, as the Boston CoC was not a funder of any of the programs that were on the HIC and operating in the CoC, it was best for the funder to continue to manage the compliance aspects since Boston would not have had the leverage that the funder did. MA BoSCoC worked for a number of months with the vendor and HUD to bring into compliance, however the vendor made the decision it would not make the changes that HUD was requiring to provide an identified export of data when the providers that it served were federally prohibited from producing that type of report. This has necessitated the migration of multiple VSP comparable databases to a new software product which is ongoing now. Boston CoC newly awarded funds to VSPs while this was in process and those VSPs will be using the State certified comparable database. We understand that HUD has recently begun to provide more thorough and directive guidance on comparable databases for VSPs to HMIS staff. VSPs in Boston have historically contributed de-identified data to the CoCs reporting during the PIT count and ad hoc as needed and requested. Additionally CoC funded VSPs submit APRs and CAPERs for their grant periods from their comparable systems.

2- The CoC has not requested the submission of SPMs for VSPs.

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

Enter 2021 HIC and HMIS data in the chart below by project type:

| Project Type | Total Beds 2021 HIC | Total Beds in HIC Dedicated for DV | Total Beds in HMIS | HMIS Bed Coverage Rate |
|-----------------------------------|---------------------|------------------------------------|--------------------|------------------------|
| 1. Emergency Shelter (ES) beds | 4,880 | 97 | 4,709 | 98.45% |
| 2. Safe Haven (SH) beds | 60 | 0 | 60 | 100.00% |
| 3. Transitional Housing (TH) beds | 455 | 10 | 445 | 100.00% |
| 4. Rapid Re-Housing (RRH) beds | 1,388 | 32 | 437 | 32.23% |
| 5. Permanent Supportive Housing | 3,119 | 0 | 3,117 | 99.94% |
| 6. Other Permanent Housing (OPH) | 5,457 | 57 | 3,571 | 66.13% |

| | | |
|--------|--|--|
| 2A-5a. | Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5. | |
| | NOFO Section VII.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 2,000 characters)

1- CoC is at 66% of OPH beds and at 32% coverage of RRH beds. OPH= City of Boston & CoC have a long standing policy of requiring that all affordable rental developments containing 10 or more units that are awarded City funding through its Affordable Housing funding rounds dedicate at least 10% of units to homeless households-known as the Homeless Set Aside units. Over the last 18mths the CoC has incorporated these units into our CES. Upon placement into a unit, the subcontracted service provider will enter the Universal Data Elements into a newly re-designed configuration that has come about through the migration of the CoC's front end HMIS. RRH= all CoC and ESG funded RRH units are in HMIS, but we have a large state funded RRH program for families that are not reported by CoC- i.e. the state does not give the CoCs data on these RRH units nor does the state report in our HMIS system. We will continue to work with the state policy planners on how to receive that data from the state.

2- For the OHP units, integration into CE is a new process and the CoC will work to increase bed coverage rates of these units over the next year. Additionally, a large percentage of OPH units are subsidized w/ PBV and managed by the BHA that has its own reporting requirements to HUD and the CoC does not require HMIS participation for these units. CoC attempted to integrate the VA HOMES data utilizing the newly created processes of the Federal Partners, however we received no response from the VA technical partners, the CoC will continue to try to engage the VA partners again, over the next year. The CoC will continue to engage with the state funded Homebase program to work on a plan to enter these state funded RRH beds into HMIS in the future.

| | | |
|--------|--|--|
| 2A-5b. | Bed Coverage Rate in Comparable Databases. | |
| | NOFO Section VII.B.3.c. | |

| | |
|---|---------|
| Enter the percentage of beds covered in comparable databases in your CoC's geographic area. | 100.00% |
|---|---------|

| | | |
|----------|---|--|
| 2A-5b.1. | Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b. | |
| | NOFO Section VII.B.3.c. | |

| | |
|----|--|
| | If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below: |
| 1. | steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and |
| 2. | how your CoC will implement the steps described to increase bed coverage to at least 85 percent. |

(limit 2,000 characters)

Not Applicable

| | | |
|-------|---|--|
| 2A-6. | Longitudinal System Analysis (LSA) Submission in HDX 2.0. | |
| | NOFO Section VII.B.3.d. | |

| | |
|---|-----|
| Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST? | Yes |
|---|-----|

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

| | | |
|-------|---|--|
| 2B-1. | Sheltered and Unsheltered PIT Count—Commitment for Calendar Year 2022 | |
| | NOFO Section VII.B.4.b. | |

| | |
|---|-----|
| Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022? | Yes |
|---|-----|

| | | |
|-------|--|--|
| 2B-2. | Unsheltered Youth PIT Count—Commitment for Calendar Year 2022. | |
| | NOFO Section VII.B.4.b. | |

| | |
|--|-----|
| Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience? | Yes |
|--|-----|

2C. System Performance

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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- 24 CFR part 578

| | | |
|-------|--|--|
| 2C-1. | Reduction in the Number of First Time Homeless—Risk Factors. | |
| | NOFO Section VII.B.5.b. | |

Describe in the field below:

| | |
|----|--|
| 1. | how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time; |
| 2. | how your CoC addresses 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 or to end homelessness for individuals and families. |

(limit 2,000 characters)

1-CoC analysis of assessment data at adult ES reveals consistent risk factors for 1st X homelessness for individuals, w/ nuance between males & females: institutional discharge, disabling condition, elderly, coming from outside Boston, having no alternative place to stay. FDT staff report that more often by the time females present for shelter, they are less likely to be diverted through problem solving & generally seek access when they have exhausted other options. For families, state data on risk factors for 1st X homelessness incl. doubled up, sleeping in places not meant for human habitation, eviction or DV. DND OHS housing court data analysis showed 78% of evictions are due to rent arrearages; however, the pandemic and subsequent eviction moratorium all but eliminated housing court evictions for 2020 and federal & state eviction prevention resources continue to stabilize the tenancies of thousands of households impacted economically by C-19.

2-For single adults seeking access to shelter during C-19, the City invested local funding to further enhance its Front Door programs to allow for increased assistance for problem solving solutions to divert to a safe alternative housing placement. The CoC also collaborated with the State's ICHH to develop updated Discharge Planning protocols to ensure those exiting other systems of care were not inappropriately discharged. The CoC continues to deploy a 3-prong strategy to assist HHs at risk of 1st X homelessness: 1) Rent arrearage /rental assistance for families presenting at shelter intake to divert. 2) Triage/Diversion at adult ES for persons w/ safe alternatives 3) Prevent Eviction through representation / mediation.

3-DND coordinates emergency shelter FDT and prevention via OHS. State DHCD serves as intake to family shelter.

| | | |
|-------|--|--|
| 2C-2. | Length of Time Homeless–Strategy to Reduce. | |
| | NOFO Section VII.B.5.c. | |
| | Describe in the field below: | |
| 1. | your CoC's strategy to reduce the length of time individuals and persons in families remain homeless; | |
| 2. | 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 2,000 characters)

1-CoC's strategy is to prioritize households with the longest LOT for housing and to increase investments to assist HHs in exiting ES to PH destination. As of July 2021, the CoC's Hsg & Stabilization leadership team, the CoC's decision-making board for CES, decided to prioritize hsg primarily based on LOT homeless. The board also agreed to prioritize many of the EHV's to families and individuals with the longest LOT homeless.

2-The City funded a new landlord incentive and liaison model through ESG-CV to reduce LOT by building a pool of landlords for households exiting homelessness. The CoC invested in housing navigation teams with both CoC & City funding to improve access to housing and reduce LOT homeless. RRH programs include wrap-around services, housing search, RA & stabilization to move families & indiv from shelter & streets to RRH/PSH. Families can access resources through both state EA system & local CoC. Families eligible for ES are offered state-funded RRH assistance at entry to shelter to move to PH; these state funds can be combined w/City RRH funds. For individuals, the city continues to invest local \$, in addition to CoC, & ESG-CV, to create RRH and PH. LOT is tracked via HMIS data warehouse for CoC & ESG funded programs through entry/exit dates or bednights per the project descriptors. HMIS Data Warehouse uses HUD rules to calculate days homeless in the last 3 years & all days homeless. This data is available on clients dashboard. SPM shows an inc in LOT of 25 days for persons in ES and SH and 27 days for persons in ES, SH, & TH. COVID impacted the availability of rental units during the shut down. Despite this disruption, the CoC partners continued housing households throughout the pandemic.

3-DND & the CoC board oversee strategies to reduce LOT for individuals, YYA & those fleeing DV while the State's DHCD, in conjunction w/ local CoCs oversees strategies for families.

| | | |
|-------|---|--|
| 2C-3. | Exits to Permanent Housing Destinations/Retention of Permanent Housing. | |
| | NOFO Section VII.B.5.d. | |
| | Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in: | |
| 1. | emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and | |
| 2. | permanent housing projects retain their permanent housing or exit to permanent housing destinations. | |

(limit 2,000 characters)

1-Over the last year, 16% of households moved from Street outreach to

permanent housing, which is an increase of 3% from the prior year. Successful exits from ES, SH, TH and RRH increased 16% points to 45% of exiting households. We believe some of this increase is due to improved data quality as a result of Boston's HMIS capacity building grant. CoC has targeted the majority of the EHV allocation to households exiting emergency shelter, safe havens, TH and transfers from RRH to further increase exits to permanent housing. City focused ESG-CV investments on RRH to increase the number of housing exits among families, youth and individuals.

2-In addition City has partnered with the Boston Housing Authority to use PBV HCV and Mainstream vouchers in 2 large upcoming PSH developments funded with local development funding. The referrals for these PSH units will come through Boston's CES and will target households with the longest LOT homeless. The CoC also has implemented the CE system which includes a PSH/RRH matching engine (CAS), which the CoC recently expanded to include mainstream affordable housing units that are set aside for homeless households. The overall retention of RRH and PH is at 97%, only 1% decrease from prior year. We believe this small decrease is a result of increased targeting of PH resources to longer-term homeless households and instability caused by isolation and stress from the COVID-19 pandemic. Finally, the CoC has worked w/ service providers & Medicaid providers to increase the number of agencies providing billable stabilization services to support client retention of PH placements. DND has oversight of PSH for CoC and ESG, the RRH system, the CAS match, the CE System & the development of homeless set aside units for prioritized homeless households while DHCD oversees the placement and stabilization of EA families in permanent housing as funder of the state's family shelter system.

| | | |
|-------|--|--|
| 2C-4. | Returns to Homelessness—CoC's Strategy to Reduce Rate. | |
| | NOFO Section VII.B.5.e. | |
| | Describe in the field below: | |
| 1. | how your CoC identifies individuals and families who return to homelessness; | |
| 2. | 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 2,000 characters)

1-According to SPM, Boston's rate of recidivism is 5% w/i 6 months. In the HMIS Warehouse, authorized staff can view a client's service history across housing providers & shelters. The CoC's Front Door Triage WG developed & released practice standards in May 2021, which include guidance on engaging in housing problem solving with "returners" who are seeking shelter after having been housed. Front Door Triage staff look up clients in the warehouse who are seeking shelter to identify if they've had previous stays in the system, including to identify they recently exited housing or are still enrolled in a housing program, & problem solve to prevent a return to homelessness when possible. The Homelessness Re-Entry report in the HMIS warehouse contains clients who have re-entered during a specified time after a 60 day or more break. This report contains details on the current entry, how long since last exit & previous destination type. When a client exits to PH, stabilization is assertively offered to assist in establishing tenancy & community integration.

2-Case managers & landlords are trained to spot predictive factors (late rent

payments, behavioral lease violations, isolation, etc.) that could result in housing loss. In spring 2021, a WG developed a RRH to PSH transfer assessment and it was approved by the Housing & Stabilization leadership group, the CoC's board that is responsible for CES & system outcomes. In July 2021, the CoC board approved a new priority category for people who have been housed in RRH for at least 6 months & are assessed to be struggling with housing stability & in need of PSH as determined by the transfer assessment; 1 in 7 PSH vacancies will go to a HH that needs to transfer from RRH to PSH to maintain stability and prevent returns to homelessness.

3-The CoC's HMIS WG is charged w/operationalizing the reports & tools and the Boston CoC Housing & Stabilization leadership group is responsible for strategy & implementation & tracking outcomes.

| | | |
|------------------------------|--|--|
| 2C-5. | Increasing Employment Cash Income-Strategy. | |
| | NOFO Section VII.B.5.f. | |
| Describe in the field below: | | |
| 1. | your CoC's strategy to increase employment income; | |
| 2. | how your CoC works with mainstream employment organizations to help individuals and families increase their 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 2,000 characters)

1- The CoC consistently fosters partnerships w/ a wide range of workforce development providers funded via CoC, DOL, Boston's Neighborhood Jobs Trust & other sources. In scaling up RRH as a main pathway out of homelessness the CoC ensures RRH participant access to opportunities to increase income from employment. The CoC CES tool screens persons seeking job skills training & employment early in the assessment process. Clients are referred to RRH partner agencies specializing in increasing access to employment opportunities, career / job planning & direct connection to MassHire for training vouchers & other benefits. 2021 SPMs indicated decreases in earned income for both leavers and stayers due to economic impact of the pandemic. 2- To increase performance in this area, the CoC funded St. Francis House's SSO-CE "Income First" project: persons experiencing homelessness are assertively offered income maximization services during assessment for housing pathways. SFH, a Wagner-Peyser funded American Job Center Access Point expanded services to connect 250 homeless job seekers to WIOA funded Individual job training/employment vouchers. Project Place enrolled 535 homeless clients in workforce dev't programs, 246 in 4-week job readiness training, 83 obtained industry-specific certification, 56 found transitional jobs via 20+ private employers. Families served via by State emergency shelter system are prioritized for TANF-linked employment services. EMPATH a family shelter, employment & training agency, helped 627 households, half homeless and half at-risk, to increase earned income from \$17k to \$23k/yr. Bridge Over Troubled Waters, More Than Words & Breaktime Cafe provide supportive job training for YYA. 3- As part of its overall management of the CoC RRH system, DND is the responsible agency for overseeing the CoC strategy to increase job & income growth from employment for individuals & the State DHCD oversees these strategies for families in conjunction w/ the CoC.

| | | |
|--------|---|--|
| 2C-5a. | Increasing Employment Cash Income–Workforce Development–Education–Training. | |
| | NOFO Section VII.B.5.f. | |

| | | |
|----|--|--|
| | Describe in the field below how your CoC: | |
| 1. | promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and | |
| 2. | is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants. | |

(limit 2,000 characters)

1 - Through existing partnerships, the CoC continues to make connections between agencies that serve those experiencing homelessness & employers & workforce development organizations. The CoC's partner agencies have hosted job fairs (virtual and in-person) for homeless job seekers in an attempt to pair those seeking employment w/ employers looking to hire; St Francis House funds a full time employer relations specialist. Several provider agencies offer job training programs on site, in areas such as safe food preparation, janitorial services and vending machine maintenance. The skills participants gain through these programs have led to employment opportunities at establishments such as Sweetgreen & Whole Foods. 2 - St. Francis House, the CoC's largest day shelter, serves as an access point for mainstream workforce system. In addition to these mainstream workforce services, SFH also offers access to more entrepreneurial training tracks, such as pet grooming and dog walking and volunteer opportunities. SFH developed a program to connect clients with the downtown Boston Improvement District to act as Ambassadors, to maintain clean streets & create an overall welcoming atmosphere for visitors to the downtown area. Other progress includes successful collaborative grant application by the CoC Lead Agency and The Mayor's Office of Workforce Development for funding aimed at incorporating the workforce development system into Boston's coordinated community response to address youth homelessness. This funding complements and expands on Boston's YHDP efforts. This project has built in deep engagement w/ YYA experiencing homelessness, training for front line staff & engagement w/ employers to identify approaches that support the hiring & retention of YYA experiencing homelessness. Lessons learned from this effort will inform at a systems level the overall CES protocols for improved collaboration w/the workforce development system.

| | | |
|--------|--|--|
| 2C-5b. | Increasing Non-employment Cash Income. | |
| | NOFO Section VII.B.5.f. | |

| | | |
|----|--|--|
| | Describe in the field below: | |
| 1. | your CoC's strategy to increase non-employment cash income; | |
| 2. | your CoC's strategy to increase access to non-employment cash sources; and | |
| 3. | provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income. | |

(limit 2,000 characters)

1-Recognizing that many people will not be able to work until they address their immediate housing crisis or potentially ever, all CoC housing and SSO programs have access to SOAR certified staff to assist households in accessing mainstream cash benefits. Similarly, benefits specialists also assist in applications for SNAP, EAEDC, and other benefits. 2-SOAR certified staff members participate in a regional SOAR subcommittee which meets quarterly to increase communication, promote coordination, & share knowledge of best practices with consumer facing agencies that serve those experiencing homelessness. To improve SOAR outcomes, Boston's SOAR TA team recently presented to the CoC's Housing & Stabilization leadership group to brainstorm ways to support improved access to benefits. Additionally, SNAP outreach counselors are embedded in day shelters and drop in locations throughout the CoC. In an effort to further people's self-determination, several CoC agencies offer classroom based assistance to households to assist them with completing their applications for benefits. Trainings on assisting clients in obtaining cash mainstream benefits or on appealing denials of benefits are offered by Greater Boston Legal Services at provider roundtable discussions, such as the Housing Advocate and Navigator forum attended by front line staff at agencies serving individuals and families. 3 - DND oversees this strategy with the partnership of the CoC service providers and SOAR staff. The city is able to run data on non-employment cash income changes and can review trends within the system as well as at individual programs. The State's DHCD oversees the family shelter system and access to mainstream benefits, including access to Federal and State funded non-employment cash assistance is a core focus of shelter case management.

3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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- 24 CFR part 578

| | | |
|--------------|--|--|
| 3A-1. | New PH-PSH/PH-RRH Project—Leveraging Housing Resources. | |
| | NOFO Section VII.B.6.a. | |

| | |
|---|----|
| Is your CoC applying for a new PSH or RRH project(s) 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-1a. | New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen. | |
| | NOFO Section VII.B.6.a. | |

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

| | | |
|----|---|----|
| 1. | Private organizations | No |
| 2. | State or local government | No |
| 3. | Public Housing Agencies, including use of a set aside or limited preference | No |
| 4. | Faith-based organizations | No |
| 5. | Federal programs other than the CoC or ESG Programs | No |

| | | |
|--------------|---|--|
| 3A-2. | New PSH/RRH Project—Leveraging Healthcare Resources. | |
| | NOFO Section VII.B.6.b. | |

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

| | | |
|--------|--|--|
| 3A-2a. | Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen. | |
| | NOFO Section VII.B.6.b. | |

| | | |
|----|--|-----|
| 1. | Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)? | Yes |
| 2. | Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider? | Yes |

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

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

| Project Name | Project Type | Rank Number | Leverage Type |
|----------------------|--------------|-------------|---------------|
| Saint Francis Hou... | PSH | 40 | Healthcare |

3A-3. List of Projects.

1. What is the name of the new project? Saint Francis House - Constitution Inn PSH

2. Select the new project type: PSH

**3. Enter the rank number of the project on
your CoC's Priority Listing:** 40

4. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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- 24 CFR part 578

| | | |
|-------|---|--|
| 3B-1. | Rehabilitation/New Construction Costs—New Projects. | |
| | NOFO Section VII.B.1.r. | |

| | |
|--|----|
| 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 VII.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 2,000 characters)

N/A

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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- 24 CFR part 578

| | | |
|-------|--|--|
| 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 VII.C. | |

| | |
|--|----|
| 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. You Must Upload an Attachment to the 4B. Attachments Screen. | |
| | NOFO Section VII.C. | |

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 2,000 characters)

N/A

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

| | | |
|-------|------------------------------------|--|
| 4A-1. | New DV Bonus Project Applications. | |
| | NOFO Section II.B.11.e. | |

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

| | | |
|--------|-------------------------|--|
| 4A-1a. | DV Bonus Project Types. | |
| | NOFO Section II.B.11. | |

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing.

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

You must click “Save” after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-3 and 4A-3a.

| | | |
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| 4A-2. | Number of Domestic Violence Survivors in Your CoC's Geographic Area. | |
| | NOFO Section II.B.11. | |

| | | |
|----|--|--------|
| 1. | Enter the number of survivors that need housing or services: | 36,000 |
| 2. | Enter the number of survivors your CoC is currently serving: | 9,000 |
| 3. | Unmet Need: | 27,000 |

| | | |
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| 4A-2a. | Calculating Local Need for New DV Projects. | |
| | NOFO Section II.B.11. | |

Describe in the field below:

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|----|---|
| 1. | how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and |
| 2. | the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects); or |
| 3. | if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs. |

(limit 2,000 characters)

1-The state-wide hotline, Safelink, receives approximately 5,200 calls annually state-wide, for people seeking shelter and services, with an estimated 45% originating from the Boston CoC. Additionally, there are 9,000 DV incidents reported each year to the Boston Police Department. It is estimated that only 25% of DV incidents are reported; therefore, extrapolation would suggest that overall, the Boston CoC has over 36,000 domestic incidents annually. Based on our PIT and HIC from 2021, we are currently serving 244 people fleeing DV, in DV dedicated beds. The discrepancy between the housing resources dedicated to this population and the estimated number of households seeking safety suggests a large unmet need.

2- CoC uses several sources for data collection; DV comparable database, data from BPD, external data from Safelink (DV call center), the 2021 PIT and HIC counts, and, extrapolation and the theory based on NCADV of underreporting of DV incidents.

3-We need more resources, as we are maximizing applications for available DV bonus funds this year, and plan to apply every year DV funds are available in future NOFOs. DV survivors are also in our CE system (unidentifiable), and they are eligible to receive other CoC (non-DV specific) housing resources, when they are matched with other eligible resources.

| | | |
|-------|---|--|
| 4A-4. | New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information. | |
| | NOFO Section II.B.11. | |

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

| Applicant Name | |
|----------------------|--|
| Casa Myrna Vazque... | |
| Elizbeth Stone House | |

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

| | | |
|-------|--|--|
| 4A-4. | New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2021 Priority Listing:

| | | |
|----|--|--------------------------|
| 1. | Applicant Name | Casa Myrna Vazquez, Inc. |
| 2. | Rate of Housing Placement of DV Survivors–Percentage | 51.00% |
| 3. | Rate of Housing Retention of DV Survivors–Percentage | 100.00% |

| | | |
|--------|---|--|
| 4A-4a. | Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below:

| | |
|----|---|
| 1. | how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and |
| 2. | the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects). |

(limit 1,000 characters)

The project calculated the rates as follows:
Over the past 2 years, CMV worked with 395 survivor households. Of those, 262 were seeking assistance obtaining permanent housing and 133 sought support with rental assistance/arrearages, landlord mediation, moving costs, and housing advocacy. Of the 262 who sought permanent housing, 134 households moved into permanent housing n=51%.
Of those housed, 134 or 100% retained housing for over 1 year.
The data source used to calculate is CMV's comparable database.

| | | |
|--------|--|--|
| 4A-4b. | Providing Housing to DV Survivor–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below how the project applicant:

| | |
|----|---|
| 1. | ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing; |
| 2. | prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.; |
| 3. | connected survivors to supportive services; and |
| 4. | moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends. |

(limit 2,000 characters)

Because CMV's priority is to reduce & prevent the homelessness of domestic violence survivors, we employ a multipronged approach that includes: staff & resources to help survivors access shelter and other emergency units (e.g., hotels) & PH as quickly as possible; utilization of public & private financial resources to mitigate barriers to housing; & policy advocacy to increase the supply of affordable housing available to survivors. Due to the expansion of our RRH program, our access to state subsidized housing for the longest shelter stayers, collaboration with Boston Housing Authority, and relationships w/ multifamily housing providers, we have been able to facilitate unprecedented rates of survivors moving into housing quickly. To reduce the length of time they are homeless, we work w/survivors immediately to obtain PH and gain employment/inc their income so they can sustain housing and achieve economic stability. Although access to our emergency shelters is extremely low barrier, upon entry, the one requirement is to participate in active housing search. Our Housing Program staff are knowledgeable about both state and City housing resources, and assist survivors in understanding eligibility for different resources, with the application process, and with the appeals process if necessary. Also our Housing Program staff assist survivors in identifying private housing. We utilize our relationships with landlords in the Boston area to "vouch" for survivors that do not have positive landlord/housing, credit and criminal histories. Landlords know that if a survivor is working with Casa Myrna, we will support the survivor and be available to the landlord in the event an issue arises. Through our Housing 1st Families at Home & STEP RRH programs, we are able to move most households quickly into PH. If those two resources are exhausted, we assist survivors in accessing HomeBase & RAFT funds from the state of MA DHCD, & other private housing supports.

| | | |
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| 4A-4c. | Ensuring DV Survivor Safety--Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

| | |
|----|--|
| | Describe in the field below examples of how the project applicant ensured the safety of DV survivors experiencing homelessness by: |
| 1. | training staff on safety planning; |
| 2. | adjusting intake space to better ensure a private conversation; |
| 3. | conducting separate interviews/intake with each member of a couple; |
| 4. | working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance; |
| 5. | maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and |
| 6. | keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors. |

(limit 5,000 characters)

Casa Myrna works to ensure the safety of survivors through supporting them in developing their own safety planning and in ensuring our spaces are safe for survivors. "Safety planning" is an interactive harm reduction strategy that empowers survivors to assess risk and make plans for their safety and that of their family. Casa Myrna recognizes that safety is a fluid, ongoing process that must be revisited and readjusted as necessary. When engaging with survivors, we prioritize safety in every aspect. We ascertain they have access to safe and

confidential ways to talk with us on the phone, that their email is protected, and when in person, we plan to meet in places that are safe. For some survivors, we meet in our office; we may meet others in other locations throughout Boston based on their comfort. Our office is highly secure with security access points at the door to each floor in our building, restricted access for non-staff to any space but our reception desk, and cameras outside, at the entrance, and non-private spaces throughout our building. And we have protocols for the event an abuser is present.

Because safety is so critical, we survey survivors in our shelter and housing programs to learn if they feel safer as a result of their engagement with Casa Myrna. 90% report they do. We assess improvement in safety of survivors through a Measure of Victim Empowerment Related to Safety (MOVERS) survey. Developed by researchers at Simmons and Harvard, this qualitative tool allows survivors to measure their own feelings of safety, confidence and empowerment. By administering the assessment upon program entrance and thereafter quarterly, staff monitor outcomes and adapt service delivery as required. Survivors also evaluate their own progress and growth.

| | | |
|----------|---|--|
| 4A-4c.1. | Evaluating Ability to Ensure DV Survivor Safety–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

When working with survivors to develop their personal safety plans, we ask and consider questions that include: Where do they live or want to live (apartment, house, urban, suburban, rural, ground floor, upper floor, do they own or do they have a landlord)? Who do/will they live with and what does/will their living space look like (exits, rooms, neighbors, locks, weapons in the house)? What are their and their children's daily activities (work, school, child care, medical visits)? Do they have a means of transportation? What support systems/resources do they have? What means of communication do they have and what kind of technology do they use? What are their finances and access to money? Where is there abuser and what are the abuser's daily activities? Are there things that tend to trigger a violent episode?

Survivors' safety plan then includes: steps a survivor can take while in an abusive relationship; steps to minimize harm during a violence incident; steps a survivor can take when preparing to leave an abusive relationship (as most people know this can be a particularly dangerous time, and it's important to have a careful plan in place); a checklist of items a person may need to take with them when leaving; steps that can be taken by a survivor who has left an abusive relationship to ensure her/his safety over a long period of time; plans around particular activities like picking children up from school, supervised visitation, getting to work, going to court; technological safety; and emotional safety planning and places to get support.

| | | |
|--------|---|--|
| 4A-4d. | Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

| | Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas: |
|----|--|
| 1. | prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences; |
| 2. | establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials; |
| 3. | providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma; |
| 4. | emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations; |
| 5. | centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination; |
| 6. | providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and |
| 7. | offering support for parenting, e.g., parenting classes, childcare. |

(limit 5,000 characters)

1. CMV operates from an empowerment model. Our role is to provide info/resources to survivors & support them to make the best decisions for their families. We work w/ participants to support creation of housing stabilization & safety plans. Planning incl. reviewing where they want to live, housing type, & support programs. Once a survivor determines where to live & their budget, we begin housing search, narrowing down to include the location of their supports, workplace, children's school/child care, etc. If the search isn't successful, we revisit priorities & begin the search again.

2-5 years ago, CMV made changes to programming to reduce shelter rules. Based on the Missouri project, How the Earth Didn't Fly into the Sun, we eliminated mandatory services to align w/ a philosophy of service & empowerment, eliminating the use of punitive responses. This has extended to our housing programs. Our RRH program has no program mandates & staff understand they are there to support survivors, not direct them. As a DV agency, we are attuned to power dynamics in relationships, incl. those inherent in relationships b/t participants & staff. We provide training & supervision to staff so they understand their role & power & learn how to minimize it.

3 In addition to holding groups on DV & trauma, our team provides milieu support to survivors. Counselors mingle during times when survivors utilize common space (e.g., dinner time, etc) & provide informal support to build relationships. They talk w/ guests about the effects of trauma on the entire HH. Our Children's Specialists provide info to parents on child response to trauma. We are currently engaging a clinical consultant to assess staff & guest knowledge of the effect of trauma. She's hosted focus groups w/ the different stakeholders & will provide recommendations on how to be more trauma sensitive & how we can better provide information & training on trauma for guests.

4-CMV operates under an empowerment model. This means that survivors lead their process. When guiding survivors as they create their housing stabilization & safety plans, we help survivors focus on their assets – their ability to keep their families safe, to advocate for themselves, to access support. Our tools focus on aspirations; our housing advocates help survivors identify current supports & relationships when planning for housing. When creating the economic stability plan, our specialists guide survivors through their financial short & long term goals (e.g., paying off debt, addressing arrears, saving \$, purchasing a home), help to develop the steps necessary to achieve goals,

track progress & honor achievement.

5-CMV's values include equity, justice & inclusion. We believe: DV is rooted in systemic oppression; all people, cultures, & identities have value; we must challenge & remove barriers that oppress people & impede access to power & resources. We must be culturally responsive & our staff mirrors the survivors we serve & ARE the survivors we serve. Our staff are 45% Latinx, 36% Black, & 19% White; 70+% are multilingual; over 60% identify as survivors; we hire for lived experience & hire staff who have been program participants. We weave the intersectionality of survivor experiences throughout our new hire on-boarding & provide training for all staff on different topics related to identity incl. working w/ LGBTQIA+ survivors, working w/ survivors from different faith communities, & Black & Latinx survivors. To ensure we do not discriminate in access to our supports, we provide translation & interpretation so language isn't a barrier, & train staff on working w/ survivors of different abilities.

6-A hallmark of abuse is an abuser's ability to isolate the victim from community supports; the remedy is community. CMV holds psychoeducational groups w/ survivors where participants learn from the facilitator & each other about DV & trauma. We work w/ survivors in shelter to plan meals & plan holiday celebrations & birthdays together. We encourage survivors in shelter to mentor each other & draw from each other's strengths, skills, & knowledge. Our Children's Specialists organize outings for families to bond through activities. Survivors' housing stabilization & safety plan includes an assessment of connections / outside supports, & how to utilize & nurture those relationships.

7-CMV works w/ survivor HHs holistically; we understand that supports for children as witnesses to DV are as important as those for the parent. Even if children do not witness abuse, they still feel the effects of it through Adverse Childhood Experiences. ACEs are traumatic events experienced in childhood that are linked to "chronic health problems, mental illness, and SUD in adulthood. ACEs can also negatively impact education, job opportunities, & earning potential." CMV works w/ parents to decrease risk by providing parenting classes, teaching parents to understand the effects of trauma on children, & connecting children to community supports.

| | | |
|--------|---|--|
| 4A-4e. | Meeting Service Needs of DV Survivors–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below:

| | |
|----|---|
| 1. | supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and |
| 2. | provide examples of how the project applicant provided the supportive services to domestic violence survivors. |

(limit 5,000 characters)

Casa Myrna (CM) works with every survivor who seeks housing support to create an individualized housing stabilization plan. Upon our initial engagement, we do an assessment of their needs, challenges, barriers, strengths, and assets. This forms the foundation of a long term stabilization plan. The plan includes steps to be taken to: address safety and issues related to trauma; overcome barriers to PH; inc earned and unearned income & economic stability (including remedying poor credit, arrearages, and past debt); understand financial costs for moving into housing and identification of available assistance; & maintain housing permanently beyond the RRH support. At the crux of the

plan is identifying services/other supports survivors may need. CM offers supports that address barriers, even those unrelated to domestic violence. Supports include legal representation/advocacy, housing advocacy, emergency food, financial literacy, income maximization/employment support, counseling, children's services, safety planning, transportation support, or other advocacy. CM offers financial support for housing stabilization, emergencies, and educational opportunities. For service needs we cannot meet, we refer within our network. This network includes child care/after school care/summer programming, health care, education support, skills training, mental health and psychiatric treatment for adults and children, substance abuse intervention, support for children, and legal advocacy. At regular check ins with survivors, advocates review services survivors may want and makes referrals appropriately. Survivors are always welcome to contact CM advocates to request supports at any time, even if they are no longer active program participants. Survivors can also reach support at any time through CM's 24/7 statewide domestic violence hotline, SafeLink. SafeLink provides in the moment support, safety planning, and connection to other resources throughout the state.

| | | |
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| 4A-4f. | Trauma-Informed, Victim-Centered Approaches--New Project Implementation. | |
| | NOFO Section II.B.11. | |

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|----|--|
| | Provide examples in the field below of how the new project will: |
| 1. | prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences; |
| 2. | establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials; |
| 3. | provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma; |
| 4. | place emphasis on program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations; |
| 5. | center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination; |
| 6. | provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and |
| 7. | offer support for parenting, e.g., parenting classes, childcare. |

(limit 5,000 characters)

1-CMV will operate from the empowerment model to provide survivors the opp. to gain back their power that was lost in the abuse. CMV works with participants to develop their own housing stabilization and safety plans. We will ask questions, guide through resources, and bring to light potential barriers and pitfalls. We guide survivors to consider in their housing choices the location of their supports, workplace, children's school/child care, place of worship, and transportation. If their search parameters do not yield housing, we review their priority list and begin the search again. 2- Est. and maintain an environment of mutual respect; the project does not use punitive interventions, ensures survivors staff interactions are based on equality and minimize power differentials; CMV's practice of eliminating rules and service mandates will continue with this project. Our program will have no program mandates and staff understand they will be there to support survivors and provide resources, not

direct them. As a VSP, we are hyper-sensitive to power dynamics in relationships, including those btw. participants and staff. We will provide training to all staff to ensure they understand their role and power and learn how to minimize it. We will create a participant advisory board of current and former shelter and housing ppl to aide in program design and provide feedback on housing programs.3- Provide participants access to information on trauma & training staff on providing participants with information on trauma. We are currently engaging a clinical consultant on a project to assess staff and shelter participants' knowledge of the effect of trauma. She is holding focus groups with the different stakeholder groups and will provide recommendations on how staff can be more trauma sensitive and better provide information and training on trauma for participants. Our Children's Specialists will provide information to parents on child response to trauma, and we will create voluntary psychoeducational support groups with our hospital partners for survivors engaged in this project.4-Place emphasis on participants' strengths, w/strength-based coaching, questionnaires & assessment tools include strength-based measures, case plans include assessments of participants strengths and works towards goals and aspirations. The housing stabilization and safety plans survivors create will focus on their assets and strengths – their ability to get and keep their families safe, to plan, to advocate for themselves, to access supports – and their aspirations. Advocates will help survivors plan for housing and economic stability by id their current supports, their financial short/long term goals and their steps necessary to reaching their goals. They will support survivors in tracking their progress and celebrating their achievements. We will utilize our participant advisory board of current and former shelter and housing ppl to review our plan guides and other tools. 5-Staff working will mirror the expected survivors; they will be of diverse races/ethnicities, multilingual, and a majority will id. as survivors and/or have lived experience. Staff will receive regular training on working with LGBTQIA+ survivors, youth, and Black and Latinx survivors. All supports will be available in multiple languages. In '22, CMV will embark on a 2-3 year racial equity/dismantling racism project with a consultant to: assess our current state related to diversity, equity, and inclusion; provide training to all staff and coaching to supervisors and leadership; and develop a plan towards becoming an equitable organization. This project will include lessons learned thus far from the assessment and equity and inclusion trainings.6-A hallmark of abuse is an abuser's ability to isolate their victim from community and supports; the remedy is community. CMV will hire FTE in '22 who will lead psychoeducational gps with survivors engaged, they can learn from the facilitator about DV & trauma. We will support survivors in mentoring each other and drawing from each other's strengths, skills, and knowledge. Our advocates will organize outings for families to bond over enriching, educational, and fun activities, giving them more opportunity to create their own community outside. Survivors' housing stabilization and safety plan will include an assessment of their connections and outside supports and plans to utilize and nurture those relationships. 7-To dec the risk factors and long term effects of ACES on children, CMV will support parents with parenting classes, groups on understanding the effects of trauma on children, and connect children to supports that include child care, early intervention, counseling, play therapy, and other community supports. Through partnerships in this project, participants will have access to hospital based mental health services for themselves and their children.

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

| | | |
|-------|--|--|
| 4A-4. | New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2021 Priority Listing:

| | | |
|----|--|-----------------------|
| 1. | Applicant Name | Elizabeth Stone House |
| 2. | Rate of Housing Placement of DV Survivors–Percentage | 83.00% |
| 3. | Rate of Housing Retention of DV Survivors–Percentage | 100.00% |

| | | |
|--------|---|--|
| 4A-4a. | Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below:

| | |
|----|---|
| 1. | how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and |
| 2. | the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects). |

(limit 1,000 characters)

1-Stone House has enrolled 30 HH, 26 of them (83%) have been housed. The remaining 17% are still in the search process. Of the 26 HH, 26 (100%) are still housed. 21 of them (81%) are still in their original placements. 5 of them (19%) were unable to sustain the rents of their original units so our staff worked with them to find affordable replacements. As a consequence, all are still housed.
2-The data comes from Stone House internal records including comparable database and other records.

| | | |
|--------|--|--|
| 4A-4b. | Providing Housing to DV Survivor–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below how the project applicant:

| | |
|----|---|
| 1. | ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing; |
| 2. | prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.; |
| 3. | connected survivors to supportive services; and |
| 4. | moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends. |

(limit 2,000 characters)

Stone House is a domestic violence agency that assesses the housing needs of all of our clients. In FY21, we served over 600 households and each of these had the opportunity to take advantage of our TH-RRH program. We also received referrals directly from the City of Boston, as well as from other agencies working with DV survivors and other social service agencies.

| | | |
|--------|---|--|
| 4A-4c. | Ensuring DV Survivor Safety–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below examples of how the project applicant ensured the safety of DV survivors experiencing homelessness by:

| | |
|----|--|
| 1. | training staff on safety planning; |
| 2. | adjusting intake space to better ensure a private conversation; |
| 3. | conducting separate interviews/intake with each member of a couple; |
| 4. | working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance; |
| 5. | maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and |
| 6. | keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors. |

(limit 5,000 characters)

For over 40 years Stone House has focused on providing support services including shelter and housing to DV survivors. We're funded by the MA Department of Public Health and the Mass. Office of Victim Assistance to provide such services and therefore have been thoroughly evaluated with regard to our capacity to provide the full range of services that DV survivors require.

| | | |
|----------|---|--|
| 4A-4c.1. | Evaluating Ability to Ensure DV Survivor Safety–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

Safety of our clients is of utmost importance, staff are highly trained on safety protocols, families do not have identifying elements in electronic records that are shared, we use a comparable HMIS database for reporting, and families on CE list are unidentifiable. Stone House works to ensure the safety of survivors through supporting ppl in developing their own safety planning and in ensuring our spaces are safe for survivors. "Safety planning" is an interactive harm reduction strategy that empowers survivors to assess risk and make plans for their safety and that of their family. When engaging with survivors, we prioritize safety in every aspect. We ascertain they have access to safe and confidential ways to talk with us on the phone, that their email is protected, and when in person, we plan to meet in places that are safe. For some survivors, we meet in our office; we may meet others in other locations throughout Boston based on their comfort. Our office is highly secure with security access points at the door to each floor in our building, restricted access for non-staff to any

space but our reception desk, and cameras outside, at the entrance, and non-private spaces throughout our building.

| | | |
|--------|---|--|
| 4A-4d. | Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

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

| | |
|----|--|
| 1. | prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences; |
| 2. | establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials; |
| 3. | providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma; |
| 4. | emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations; |
| 5. | centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination; |
| 6. | providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and |
| 7. | offering support for parenting, e.g., parenting classes, childcare. |

(limit 5,000 characters)

Stone House services include all of the victim centered approaches listed prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences; establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials; providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma; emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations; centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination; providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and offering support for parenting, e.g., parenting classes, childcare.

| | | |
|--------|---|--|
| 4A-4e. | Meeting Service Needs of DV Survivors–Project Applicant Experience. | |
| | NOFO Section II.B.11. | |

Describe in the field below:

| | |
|----|---|
| 1. | supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and |
|----|---|

| | |
|----|--|
| 2. | provide examples of how the project applicant provided the supportive services to domestic violence survivors. |
|----|--|

(limit 5,000 characters)

Stone House has over 40 years of experience focused on the full range of issues faced by domestic violence survivors. Our direct service staff is experienced in providing these services wherever a survivor may be living. We have ample staff funded by DPH and MOVA to provide whatever additional services a homeless survivor needs in order to find housing and become stabilized there while addressing the trauma caused by the DV experience.

| | | |
|--------|--|--|
| 4A-4f. | Trauma-Informed, Victim-Centered Approaches--New Project Implementation. | |
| | NOFO Section II.B.11. | |

| | |
|----|--|
| | Provide examples in the field below of how the new project will: |
| 1. | prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences; |
| 2. | establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials; |
| 3. | provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma; |
| 4. | place emphasis on program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations; |
| 5. | center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination; |
| 6. | provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and |
| 7. | offer support for parenting, e.g., parenting classes, childcare. |

(limit 5,000 characters)

Our services incorporate all the approaches and specific activities listed below. prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences; establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials; provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma; place emphasis on program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations; center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination; provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and offer support for parenting, e.g., parenting classes, childcare.

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.

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).

| Document Type | Required? | Document Description | Date Attached |
|---|-----------|----------------------|---------------|
| 1C-14. CE Assessment Tool | Yes | MA500 CE Assessme... | 11/04/2021 |
| 1C-7. PHA Homeless Preference | No | MA500 1C-7. PHA H... | 11/04/2021 |
| 1C-7. PHA Moving On Preference | No | MA500 1C-7. PHA M... | 11/04/2021 |
| 1E-1. Local Competition Announcement | Yes | MA500 1E-1. Local... | 11/04/2021 |
| 1E-2. Project Review and Selection Process | Yes | MA500 1E-2. Proj... | 11/04/2021 |
| 1E-5. Public Posting—Projects Rejected-Reduced | Yes | MA500 1E-5. Publi... | 11/04/2021 |
| 1E-5a. Public Posting—Projects Accepted | Yes | MA500 1E-5a. Publ... | 11/04/2021 |
| 1E-6. Web Posting—CoC-Approved Consolidated Application | Yes | | |
| 3A-1a. Housing Leveraging Commitments | No | | |
| 3A-2a. Healthcare Formal Agreements | No | MA500 3A-2a. Heal... | 11/04/2021 |
| 3C-2. Project List for Other Federal Statutes | No | | |

Attachment Details

Document Description: MA500 CE Assessment Tool

Attachment Details

Document Description: MA500 1C-7. PHA Homeless Preference

Attachment Details

Document Description: MA500 1C-7. PHA Moving On Preference

Attachment Details

Document Description: MA500 1E-1. Local Competition Announcement

Attachment Details

Document Description: MA500 1E-2. Project Review and Selection
Process

Attachment Details

Document Description: MA500 1E-5. Public Posting–Projects Rejected-Reduced

Attachment Details

Document Description: MA500 1E-5a. Public Posting–Projects Accepted

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: MA500 3A-2a. Healthcare Formal Agreements

Attachment Details

Document Description:

Submission Summary

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

| Page | Last Updated |
|---|--------------|
| 1A. CoC Identification | 09/17/2021 |
| 1B. Inclusive Structure | 11/10/2021 |
| 1C. Coordination | 11/10/2021 |
| 1C. Coordination continued | 11/10/2021 |
| 1D. Addressing COVID-19 | 11/10/2021 |
| 1E. Project Review/Ranking | 11/10/2021 |
| 2A. HMIS Implementation | 11/10/2021 |
| 2B. Point-in-Time (PIT) Count | 09/17/2021 |
| 2C. System Performance | 11/10/2021 |
| 3A. Housing/Healthcare Bonus Points | 11/09/2021 |
| 3B. Rehabilitation/New Construction Costs | 10/28/2021 |

| | | |
|------------------------|---------|------------|
| FY2021 CoC Application | Page 68 | 11/11/2021 |
|------------------------|---------|------------|

| | |
|--|-------------------|
| 3C. Serving Homeless Under Other Federal Statutes | 10/28/2021 |
| 4A. DV Bonus Application | 11/11/2021 |
| 4B. Attachments Screen | Please Complete |
| Submission Summary | No Input Required |

MA-500
ATTACHMENT 1C-14.
CE Assessment Tool

PROFILE (/CLIENT/107308/PROFILE) HISTORY (/CLIENT/107308/HISTORY) SERVICES (/CLIENT/107308/SERVICE) **PROGRAMS (/CLIENTS/107308/PROGRAM)**ASSESSMENTS (/CLIENT/107308/ASSESSMENT) NOTES (/CLIENTS/107308/NOTE) FILES (/CLIENTS/107308/FILE) **CONTACT (/CLIENT/107308/CONTACT)**

LOCATION (/CLIENT/107308/LOCATION) REFERRALS (/CLIENT/107308/REFERRAL)

DASHBOARD (/DASHBOARD)

SEARCH (/CLIENT)

CASELOAD (/CASELOAD)

PROGRAM: COORDINATED ENTRY - HOUSING NEEDS

0 DAY:
ACTI

| | | | | | | | | | |
|------------|---------|------------------|--------------------|-------|-------|-------|-------|-------|------|
| Enrollment | History | Provide Services | Assessments | Goals | Notes | Files | Chart | Forms | Exit |
|------------|---------|------------------|--------------------|-------|-------|-------|-------|-------|------|

Progr

Progr

Assig

Head

Progra

No active

BOSTON PATHWAYS ASSESSMENT 2021

INFORMATION FOR THE ASSESSOR - PATHWAYS ASSESSMENT CAN BE CONDUCTED WITH 2 GROUPS

1. THOSE WHO ARE CURRENTLY RESIDING IN A BOSTON EMERGENCY SHELTER, TRANSITIONAL HOUSING PROGRAM OR UNSHELTERED IN BOSTON AND HAVE NOT SELF-RESOLVED.

"CURRENTLY RESIDING" MEANS THE PARTICIPANT WAS UNSHELTERED IN BOSTON OR STAYED IN A BOSTON SHELTER, TRANSITIONAL HOUSING PROGRAM THE NIGHT BEFORE YOU ARE CONDUCTING THE ASSESSMENT.

2. BOSTON RESIDENTS WHO ARE FLEEING OR ATTEMPTING TO FLEE A DOMESTIC VIOLENCE (DV) SITUATION

DV MAY INCLUDE SITUATIONS WHERE PARTICIPANTS ARE FLEEING OR ATTEMPTING TO FLEE THEIR HOUSING OR THE PLACE THEY ARE STAYING BECAUSE OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, STALKING, OR OTHER DANGEROUS OR LIFE-THREATENING CONDITIONS

RELATED TO VIOLENCE THAT HAVE TAKEN PLACE IN THE HOME OR HAVE MADE THEM AFRAID TO RETURN, INCLUDING: TRADING SEX FOR HOUSING; TRAFFICKING; PHYSICAL ABUSE; VIOLENCE (OR PERCEIVED THREAT OF VIOLENCE).

THE PARTICIPANT MUST HAVE NO SAFE, ALTERNATIVE HOUSING OR SUPPORT TO MAINTAIN OR OBTAIN PERMANENT HOUSING.

PEOPLE WITH A PENDING HOUSING OFFER: BYPASS PATHWAYS

IF YOU ARE WORKING WITH A CLIENT WHO HAS A VOUCHER AND/OR OTHER AFFORDABLE HOUSING OFFER, AND THEY NEED HOUSING SEARCH, MOVE IN COSTS OR HELP SETTLING IN WITH SUPPORTIVE SERVICES,

YOU CAN SKIP THIS ASSESSMENT AND REFER DIRECTLY TO YOUR OWN INTERNAL RAPID RE-HOUSING PROGRAMS FOR ASSISTANCE OR ONE OF THESE RAPID RE-HOUSING PROGRAMS IF YOU DO NOT HAVE ONE OR YOURS IS FULL.

YOUTH RRH (18-24 YEAR OLD)

ALL YOUTH SPECIFIC RRH OPPORTUNITIES ARE BEING MATCHED THROUGH CAS VIA THE PATHWAYS ASSESSMENT.

VETERAN RRH

VETERAN SPECIFIC RRH IS AVAILABLE VIA DIRECT REFERRAL THROUGH SUPPORTIVE SERVICES FOR VETERAN FAMILIES (SSVF) WITH NO PATHWAYS ASSESSMENT REQUIRED AT THE FOLLOWING AGENCIES:

NEW ENGLAND CENTER AND HOME FOR VETERANS - MEREDITH CHRISTENSEN, EMAIL: MEREDITH.CHRISTENSEN@NECHV.ORG, PHONE 617-371-1843:

VOLUNTEERS OF AMERICA - MAX MAYDONEY, EMAIL: MMAYDONEY@VOAMASS.ORG, PHONE; 857-303-3004

INDIVIDUALS OR ADULT-ONLY HOUSEHOLDS: INDIVIDUALS IN SHELTERS WITHOUT THEIR OWN RRH PROGRAM CAN BE REFERRED TO THE RRH PROGRAM AT ST. FRANCIS HOUSE DIRECTLY, WITH NO PATHWAYS ASSESSMENT REQUIRED.



KEY INTRODUCTION POINTS TO SHARE WITH THE PARTICIPANT

PURPOSE OF THE PATHWAYS ASSESSMENT

WE'LL EXPLORE WAYS YOU COULD MOVE OUT OF HOMELESSNESS QUICKLY, USING EXISTING SUPPORTS, SINCE THERE IS NOT ENOUGH AFFORDABLE HOUSING FOR EVERYONE WHO NEEDS IT AND THE WAIT CAN BE YEARS LONG.

PATHWAYS WILL ALSO EXPLORE IF WE HAVE SMALL FUNDS TO HELP YOU LEAVE HOMELESSNESS QUICKLY OR SIGN YOU UP FOR RAPID RE-HOUSING (RRH) AND AFFORDABLE HOUSING UNITS THAT ARE SET ASIDE FOR PEOPLE EXPERIENCING HOMELESSNESS IN BOSTON.

PROGRAMS MAY NOT BE ACCEPTING REFERRALS RIGHT NOW.

OPENINGS DEPEND ON IF PROGRAMS ARE CURRENTLY FULL OR TAKING REFERRALS, WHICH CAN CHANGE ALL THE TIME - THIS IS WHY WE DON'T KNOW EXACT TIMEFRAMES. EVEN IF THEY ARE FULL AND YOU ARE INTERESTED, IT'S WORTH SIGNING UP.

RIGHT TO REFUSE RESPONSES

YOU MAY REFUSE TO RESPOND TO QUESTIONS ON THIS ASSESSMENT. YOU MAY STOP THIS ASSESSMENT AT ANY TIME AND PICK IT BACK UP AT A LATER MEETING. YOUR RESPONSES WILL NOT HARM ANY OTHER SERVICES YOU RECEIVE FROM OUR AGENCY.

THE QUESTIONS ARE ONLY DESIGNED TO HELP EXPLORE HOUSING OPTIONS YOU MAY WANT TO PURSUE

FILING A NON-DISCRIMINATION COMPLAINT

IF AT ANY TIME YOU WOULD LIKE INFORMATION ON FILING A COMPLAINT BECAUSE YOU BELIEVE YOU ARE BEING DISCRIMINATED AGAINST, LET ME KNOW AND I CAN GIVE YOU INFORMATION ON HOW TO PURSUE THIS.

(NOTE TO ASSESSOR: INFORMATION ON THE PROCEDURE CAN BE FOUND IN THE COORDINATED ENTRY POLICIES & PROCEDURES AT BOSTONCOC.MAILCHIMPSITES.COM)

KEY POINTS TO SHARE WITH THE PARTICIPANT

HOUSING OPTIONS TOOL

TALKING POINTS: REVIEW OF HOUSING OPTIONS

AS YOU MAY KNOW, THERE ARE NOT ENOUGH AFFORDABLE HOUSING OPENINGS FOR EVERYONE EXPERIENCING HOMELESSNESS IN BOSTON.

IF YOU HAVE ANYWHERE ELSE TO STAY TO KEEP YOURSELF SAFE, WE HAVE SOME QUICK FINANCIAL ASSISTANCE TO HELP YOU GET THERE.

STAYING WITH FAMILY, STAYING WITH FRIENDS, TRANSPORTATION TO RELOCATE, OTHER IDEAS YOU MAY HAVE

HERE ARE SOME WAYS TO BRAINSTORM POTENTIAL OPTIONS:

DO YOU HAVE ANY PAST LIVING SITUATIONS THAT WERE POSITIVE, THAT YOU COULD RETURN TO?

DO YOU HAVE ANY SUPPORTIVE PEOPLE IN YOUR LIFE THAT COULD HELP YOU LEAVE SHELTER?

WHAT HELP WOULD YOU NEED TO RETURN TO A POSITIVE LIVING SITUATION?



PROFILE (/CLIENT/107308/PROFILE) THE BARRIER BUSTER FUND IS SMALL, ONE-TIME AND FLEXIBLE. EXAMPLES MAY BE HELPING A HOST (FRIEND OR FAMILY) WITH RENT/FOOD/UTILITIES OR HELPING TO PAY FOR TRAVEL TO RELOCATE
ASSESSMENTS (/CLIENT/107308/ASSESSMENT) NOTES (/CLIENTS/107308/NOTE) FILES (/CLIENTS/107308/FILE) CONTACT (/CLIENT/107308/CONTACT)
LOCATION (/CLIENT/107308/LOCATION) EXPLORE SAFETY CONSIDERATIONS WITH THE PARTICIPANT, KNOWING THEY MAKE THE DECISION. A FEW KEY NOTES ABOUT ELIGIBLE USES:

1. THE DESTINATION WILL HAVE TO DOCUMENT THE PERSON CAN STAY FOR AT LEAST 90 DAYS.
2. HOTEL STAYS ARE NO LONGER AN ELIGIBLE USE AND
3. IF PARTICIPANTS WANT TO MOVE TO A SOBER HOME, CONTINUE TO OFFER RAPID RE-HOUSING TO FACILITATE THE PLACEMENT IF A LEASE WILL BE OFFERED.

IF THE SOBER HOME WILL NOT OFFER A LEASE, THE PARTICIPANT MUST SHOW HOW THEY WILL PAY THE FULL SOBER HOME FEE IN THEIR BARRIER BUSTER APPLICATION.

IS PARTICIPANT INTERESTED IN HELP TO LEAVE SHELTER TO MOVE IN WITH NATURAL SUPPORTS OR AN IMMEDIATE OPTION?

YES

IF THE CLIENT HAS AN OPTION, COMPLETE THE BARRIER BUSTER APPLICATION (CAN'T HYPERLINK) OR REFER TO ST. FRANCIS HOUSE TO COMPLETE

COMPLETE BB APPLICATION AND SEND TO HOMESTART FOR \$

OR

REFER TO ST. FRANCIS HOUSE - EMAIL: BARRIERBUSTER@STFRANCISHOUSE.ORG; PHONE: 617-654-1257

PROVIDE ST. FRANCIS HOUSE WITH PARTICIPANT'S CONTACT INFO (NAME, EMAIL, PHONE, DOB) AND SPECIFY WHAT IMMEDIATE HOUSING OPTIONS THEY HAVE IDENTIFIED.

NO

IF THE CLIENT DOES NOT HAVE AN OPTION, OFFER RAPID RE-HOUSING: IF ANYTHING CHANGES AND YOU DO FIND YOU HAVE AN OPTION TO STAY SOMEWHERE ELSE, LET SOMEONE KNOW HERE SO WE CAN HELP YOU GET SOME QUICK FINANCIAL ASSISTANCE TO GET THERE.

RAPID RE-HOUSING OPT IN

KEY POINTS

ANOTHER OPTION MAY BE TO RENT A ROOM OR UNIT ON YOUR OWN WITH A LEASE IN YOUR NAME. WE HAVE PROGRAMS THAT CAN HELP YOU FIND A PLACE, HELP YOU SETTLE IN,

AND HELP YOU WITH A FINANCIAL BOOST WHILE YOU GET SETTLED. IF YOU ARE INTERESTED I CAN REFER YOU AND THEY WILL CONTACT YOU AS THEY HAVE OPENINGS.

YOU CAN STILL APPLY FOR AFFORDABLE, SUBSIDIZED HOUSING WHILE YOU ARE IN A RAPID RE-HOUSING PROGRAM. WE WANT TO GIVE YOU INFORMATION ON RRH SINCE THE WAIT TIMES FOR THIS PROGRAM MAY BE SHORTER.

WHAT IS RAPID RE-HOUSING? WHAT BENEFITS ARE OFFERED?

THE GOAL OF RRH PROGRAMS IS TO HELP YOU END YOUR CURRENT HOMELESSNESS AS QUICKLY AS POSSIBLE AND BECOME STABLY HOUSED.



[PROFILE \(/CLIENT/107308/PROFILE\)](#)
[HISTORY \(/CLIENT/107308/HISTORY\)](#)
[SERVICES \(/CLIENT/107308/SERVICE\)](#)
[PROGRAMS \(/CLIENTS/107308/PROGRAM\)](#)
RRH STAFF ARE HERE TO SUPPORT YOU WITH SEARCHING FOR AND LOCATING A HOME AS SOON AS YOU ENROLL.
[ASSESSMENTS \(/CLIENT/107308/ASSESSMENT\)](#)
[NOTES \(/CLIENTS/107308/NOTE\)](#)
[FILES \(/CLIENTS/107308/FILE\)](#)
[CONTACT \(/CLIENT/107308/CONTACT\)](#)
[LOCATION \(/CLIENT/107308/LOCATION\)](#)
[PROPERTY \(/CLIENTS/107308/PROPERTY\)](#)
[SUPPORT \(/CLIENTS/107308/SUPPORT\)](#)
[CASELOAD \(/CASELOAD\)](#)
STAFF ALSO WORK WITH YOU TO MAKE SURE YOU HAVE ALL OF THE DOCUMENTS YOU NEED TO APPLY FOR APARTMENTS AND HELP YOU COMPLETE APPLICATIONS.

THEY ARE ON YOUR SIDE AND WILL ADVOCATE TO LANDLORDS AND REALTORS TO FIND YOU A HOME.

ALSO, RRH STAFF ACROSS THE CITY WORK TOGETHER AND SHARE LANDLORD LEADS WITH EACH OTHER TO HELP OUR CLIENTS.

CHOICE-DRIVEN: SINCE THE GREATER BOSTON HOUSING MARKET IS EXPENSIVE, IT IS SUGGESTED THAT YOU CONSIDER ALL HOUSING OPPORTUNITIES

INCLUDING SINGLE ROOM OCCUPANCIES AND OTHER LESS EXPENSIVE OPTIONS OUTSIDE OF BOSTON. HOWEVER, PROGRAMS DO NOT REQUIRE YOU TO LIVE IN A CERTAIN UNIT, AND YOU HAVE A CHOICE.

YOU MAY ALSO RELOCATE IF YOU CHOOSE TO. ALSO, RRH STAFF CAN HELP YOU CONTINUE TO APPLY FOR SUBSIDIZED HOUSING WHILE YOU ARE IN YOUR NEW HOME SO YOU DO NOT HAVE TO REMAIN HOMELESS WHILE ON WAITING LISTS.

LANDLORD MEDIATION: RRH STAFF ARE HERE TO SUPPORT YOU IN COMMUNICATION WITH YOUR NEW LANDLORD. IF THERE ARE QUESTIONS ABOUT THE LEASE, CONFLICTS WITH OTHER TENANTS, OR WITH THE LANDLORD,

STAFF ARE THERE TO HELP MEDIATE AND RESOLVE THESE THINGS SO YOU DO NOT HAVE TO RETURN TO HOMELESSNESS. IF NEEDED, RRH PROGRAMS CAN ALSO HELP YOU RELOCATE AS WELL.

CASE MANAGEMENT TO SETTLE IN YOUR HOME: THESE SERVICES ARE DESIGNED TO BUILD TIES IN YOUR COMMUNITY, ACHIEVE GOALS YOU HAVE TO STAY HOUSED, CONNECT TO RESOURCES, MAKE SURE YOU KNOW YOUR NEIGHBORHOOD,

GROCERY STORE, AND TRANSPORTATION OPTIONS, INCREASE YOUR INCOME AS MUCH AS POSSIBLE, AND ASSIST WITH BUDGETING SO YOU CAN STAY IN YOUR HOME AND NOT HAVE TO EXPERIENCE HOMELESSNESS AGAIN.

EVEN IF YOU CANNOT FULLY PAY YOUR RENT AT THE START, A CASE MANAGER WILL WORK WITH YOU TO IDENTIFY WAYS YOU COULD INCREASE YOUR INCOME.

SERVICES TO INCREASE YOUR INCOME, RESOURCES AND BENEFITS. RRH PROGRAMS CAN CONNECT YOU WITH INCOME MAXIMIZATION SERVICES TO HELP YOU TO FIND JOBS AND/OR APPLY FOR ELIGIBLE BENEFITS.

WE WILL DEVELOP, WITH YOUR INPUT, A PLAN TO SUPPORT YOUR FINANCIAL NEEDS, GOALS, AND ACTION STEPS FOR PURSUING A VARIETY OF INCOME SOURCES.

THE PLAN WILL ADDRESS POTENTIAL BARRIERS TO INCREASING INCOME, IDENTIFY TIMELINES AND PRIORITIZE ACTION STEPS. YOUR INCOME PLAN WILL BE FLEXIBLE AND UPDATED AS NEEDED.

KEEP IN MIND FINDING A JOB TAKES TIME AND DUE TO THE TIME-LIMITED NATURE OF YOUR HOUSING SUBSIDIES, YOU SHOULD CONNECT QUICKLY WITH RESOURCES THAT ARE AVAILABLE FOR YOUR INCOME MAXIMIZATION.

FINANCIAL ASSISTANCE TO HELP YOU MOVE INTO YOUR NEW HOME. RRH PROGRAMS CAN HELP PAY YOUR RENT AS YOU SETTLE IN, USE CASE MANAGEMENT AND SERVICES TO EVENTUALLY TAKE OVER THE RENT.

TO BEGIN WITH, YOUR RENT PORTION WILL BE AT LEAST 30% OF YOUR INCOME (SOMETIMES MORE DEPENDING ON WHAT FUNDING WE HAVE AVAILABLE AND YOUR PERSONAL BUDGET).

RRH CAN ALSO PROVIDE UPFRONT MOVING COSTS LIKE SECURITY DEPOSIT, ASSISTANCE WITH RENT, AND MOVING TRUCK.

PROFILE (/CLIENT/107308/PROFILE) HISTORY (/CLIENT/107308/HISTORY) SERVICES (/CLIENT/107308/SERVICE) PROGRAMS (/CLIENTS/107308/PROGRAM)
ASSESSMENTS (/CLIENTS/107308/ASSESSMENTS) NOTES (/CLIENTS/107308/NOTES) CLIENTS (/CLIENTS/107308/CLIENTS) CONTACTS (/CLIENTS/107308/CONTACTS)
LOCATION (/CLIENTS/107308/LOCATION) REFERRALS (/CLIENT/107308/REFERRAL) DASHBOARD (/DASHBOARD) SEARCH (/CLIENT) CASELOAD (/CASELOAD)

(EDUCATION, EMPLOYMENT, BEHAVIORAL HEALTH SERVICES, ETC.)

WHY DO PEOPLE TAKE RRH?

WE DO NOT ADVISE YOU TO STAY HERE TO KEEP YOUR HOMELESS STATUS FOR HOUSING RESOURCES BECAUSE:

*RRH IS ONE OF THE FASTEST WAYS TO END YOUR HOMELESSNESS RIGHT NOW. A HOUSING SEARCH TAKES 0-3 MONTHS RIGHT NOW FOR THE PROGRAMS.

*IN BOSTON, VERY FEW PEOPLE RETURNED TO SHELTER OR SLEEPING OUTSIDE AFTER RRH - JUST 5% RETURNED IN 2020.

*IT OFTEN TAKES YEARS TO GET TO THE TOP OF THE WAITLISTS. AS AN EXAMPLE-THE CITY WAS ABLE TO HOUSE 1/3 OF THE PEOPLE ON ITS CHRONIC LIST LAST YEAR.

*GETTING TO THE TOP OF A WAITLIST DOES NOT GUARANTEE AN OFFER OF HOUSING DUE TO BACKGROUND CHECKS.

*MOST AFFORDABLE HOUSING PROGRAMS IN MASSACHUSETTS ACTUALLY DO NOT REQUIRE HOMELESSNESS TO MOVE UP ON THE LIST; YOU CAN KEEP APPLYING

AND WAITING WITHOUT REMAINING HOMELESS.

*BOSTON HOUSING AUTHORITY AND SOME OTHER PERMANENT SUPPORTIVE HOUSING OPTIONS DO ALLOW RRH PARTICIPANTS TO MAINTAIN HOMELESS STATUS AS LONG AS THEY ARE ENROLLED IN THE RRH PROGRAM.

HOW DO PEOPLE MAKE RRH WORK?

*INCOME MAXIMIZATION SERVICES & BALANCING THE BUDGET

*NEGOTIATING RENT DOWN

*ROOMMATES

*SINGLE ROOMS

*LEAVING BOSTON

*CONTINUE APPLYING FOR SUBSIDIZED HOUSING

*MOVE IN WITH FAMILY OR FRIENDS

REFERRAL TO RRH

IF YOUR AGENCY HAS RRH, YOU MAY REFER DIRECTLY TO THAT PROGRAM. IF YOU DO NOT, BELOW IS THE CONTACT INFORMATION TO REFER DIRECTLY TO AVAILABLE RRH PROGRAMS.

YOUTH RRH (18-24 YEAR OLD)

ALL YOUTH SPECIFIC RRH OPPORTUNITIES ARE BEING MATCHED THROUGH CAS VIA THE PATHWAYS ASSESSMENT.

VETERAN SPECIFIC RRH IS AVAILABLE VIA DIRECT REFERRAL THROUGH SUPPORTIVE SERVICES FOR VETERAN FAMILIES (SSVF) WITH NO PATHWAYS ASSESSMENT REQUIRED AT THE FOLLOWING AGENCIES:



PROFILE (/CLIENT/107308/PROFILE) HISTORY (/CLIENT/107308/HISTORY) SERVICES (/CLIENT/107308/SERVICE) PROGRAMS (/CLIENTS/107308/PROGRAM)
VOLUNTEERS OF AMERICA - MAX MAYDONEY, EMAIL: MMAYDONEY@VOAMASS.ORG, PHONE: 857-303-3004
ASSESSMENTS (/CLIENT/107308/ASSESSMENT) NOTES (/CLIENTS/107308/NOTE) FILES (/CLIENTS/107308/FILE) CONTACT (/CLIENT/107308/CONTACT)

LOCATION (/CLIENT/107308/LOCATION) REFERRALS (/CLIENT/107308/REFERRAL) DASHBOARD (/DASHBOARD) SEARCH (/CLIENT) CASELOAD (/CASELOAD)

INDIVIDUALS OR ADULT-ONLY HOUSEHOLDS: INDIVIDUALS IN SHELTERS WITHOUT THEIR OWN RRH PROGRAM CAN BE REFERRED TO THE RRH PROGRAM AT ST. FRANCIS HOUSE DIRECTLY, WITH NO PATHWAYS ASSESSMENT REQUIRED.

ANNA RODRIGUEZ, EMAIL: ARODRIGUEZ@STFRANCISHOUSE.ORG, PHONE: 617-457-1029

KEY POINTS TO SHARE WITH THE PARTICIPANT REGARDING CONFIDENTIALITY

RIGHT TO REFUSE RESPONSES AND/OR SHARE INFORMATION

WE ASK YOU TO SHARE INFORMATION TO CONNECT YOU TO HOUSING PROGRAMS YOU MAY BE INTERESTED IN. YOU MAY REFUSE TO RESPOND TO CERTAIN QUESTIONS, OR REFUSE TO HAVE INFORMATION STORED AND SHARED IN THE DATABASE.

DECLINING TO SHARE INFORMATION WILL NOT JEOPARDIZE ANY OPPORTUNITIES FOR YOU, BUT IT MAY BE HARDER TO GET IN CONTACT WITH YOU WHEN AN OPENING DOES COME UP.

COMMITMENT TO CONFIDENTIALITY

IF YOU DECLINE TO SHARE YOUR INFORMATION, PLEASE KNOW WE WILL UPHOLD YOUR CONFIDENTIALITY TO KEEP YOUR INFORMATION SECURE, PRIVATE AND SAFE.

1A. PERMISSION TO SHARE YOUR INFORMATION W/PARTNER AGENCIES

TO SIGN YOU UP FOR HOUSING PROGRAMS YOU MAY BE INTERESTED IN, WE WOULD LIKE TO ASK FOR YOUR PERMISSION TO SHARE INFORMATION WITH PARTICIPATING AGENCIES WHO MANAGE THESE PROGRAMS SO THEY MAY CONTACT YOU WHEN THERE IS AN OPENING.

All of the participating agencies have agreed to keep all data confidential and secure. Is this okay with you?

Select

Assessment Date

11/04/2021



Assessment Location

Select

Assessment Type

Select

Assessment Level

Housing Needs Assessment

KEY POINTS TO SHARE WITH THE PARTICIPANT REGARDING CONTACT INFORMATION

WE WANT TO REACH YOU WHEN THERE IS A HOUSING PROGRAM OPENING FOR YOU.

WE ARE GOING TO ASK YOU TO BRAINSTORM DIFFERENT WAYS AND TIMES WE CAN REACH YOU SO YOU DON'T MISS OUT ON A HOUSING OPPORTUNITY THROUGH PATHWAYS.

A DIFFERENT PERSON MAY CONTACT YOU WHEN THERE IS AN OPENING.

I WILL BE NOTIFIED WHEN YOU GET A MATCH TO A HOUSING PROGRAM, BUT IT WILL MOST LIKELY BE A STAFF PERSON OF THAT HOUSING PROGRAM THAT YOU HAVE NEVER MET BEFORE THAT REACHES OUT TO YOU.

MAKE SURE YOU CONNECT WITH THAT PERSON SO YOU CAN TAKE THE OPENING AS THE OPENINGS ARE OFTEN TIME SENSITIVE (2 WEEKS OR LESS)



2a. Client phone number

XXX-XXX-XXXX

[PROFILE \(/CLIENT/107308/PROFILE\)](#) [HISTORY \(/CLIENT/107308/HISTORY\)](#) [SERVICES \(/CLIENT/107308/SERVICE\)](#) **[PROGRAMS \(/CLIENTS/107308/PROGRAM\)](#)**[ASSESSMENTS \(/CLIENT/107308/ASSESSMENT\)](#) [NOTES \(/CLIENTS/107308/NOTE\)](#) [FILES \(/CLIENTS/107308/FILE\)](#) **[CONTACT \(/CLIENT/107308/CONTACT\)](#)**[LOCATION \(/CLIENT/107308/LOCATION\)](#) [REFERRALS \(/CLIENT/107308/REFERRAL\)](#) [DASHBOARD \(/DASHBOARD\)](#) [SEARCH \(/CLIENT\)](#) [CASELOAD \(/CASELOAD\)](#)

2b. List any working email addresses
you use.

2c. Do you have any case managers
or agencies we could contact to get a
hold of you?

2D. CLIENT'S MAILING ADDRESS

Street Address

City

State

Select

Zip Code

2e. Are there agencies, shelters or
places you hang out in during the day
where we could connect with you?

2f. Are there agencies, shelters or
places you hang out in during nights
or weekends where we could connect
with you?

2g. Are there other ways we could
contact you that we have not asked
you or thought of yet?

KEY POINTS TO SHARE WITH THE PARTICIPANT REGARDING HOUSEHOLD COMPOSITION

SOME HOUSING PROGRAM OPENINGS ARE BASED OFF OF HOW MANY MEMBERS ARE IN THE HOUSEHOLD, OR AGE: WE CAN ALSO TALK ABOUT DIFFERENT HOUSING OPTIONS ONCE WE KNOW WHO WILL BE LIVING WITH YOU.

PENDING HOUSING OFFER: WE ALSO WANT TO KNOW IF YOU ARE ABOUT TO MOVE INTO AN APARTMENT WHERE RENT IS CALCULATED AT ABOUT 30-40% OF YOUR INCOME SO WE CAN GET YOU CONNECTED TO MOVE-IN ASSISTANCE RIGHT AWAY.

THIS INCLUDES IF YOU HAVE A VOUCHER TO FIND A UNIT BUT NEED HELP SEARCHING FOR AN APARTMENT.

3a. Will you have anyone else living
with you?

Select

3b. Veteran Status

Yes

Veteran Status (Marker)

Yes

KEY POINTS TO SHARE WITH THE PARTICIPANT REGARDING HOUSING PREFERENCES

THERE ARE VOUCHERS AND ACTUAL APARTMENTS SET ASIDE FOR PEOPLE EXPERIENCING HOMELESSNESS IN BOSTON.

THE RENT FOR THESE UNITS IS USUALLY CALCULATED AT BETWEEN 30-40% OF YOUR MONTHLY INCOME. SOME OF THEM ALSO COME WITH SUPPORTIVE SERVICES. THESE QUESTIONS ARE TO COLLECT YOUR PREFERENCES IN CASE THERE ARE EVER OPENINGS, ALTHOUGH OPENINGS CAN BE RARE.

NEIGHBORHOOD CHOICE

4a. What is your total household's estimated gross annual income? We ask because some of these units have income requirements.

WE HAVE INCOME MAXIMIZATION SERVICES WE CAN OFFER TO PEOPLE WHO SIGN UP FOR THESE HOUSING OPPORTUNITIES AND ARE WAITING FOR AN OFFER. THESE SERVICES INCLUDE STAFF WHO ARE TRAINED IN RESOURCES AND WAYS TO INCREASE YOUR INCOME BY BUDGETING,

APPLYING FOR BENEFITS YOU MAY NEED AND/OR LINKING TO EMPLOYMENT OPPORTUNITIES.

4b. Interested in Income Maximization Services?

4c. What is the maximum you could or would pay for rent each month?

4d. Would you be interested in sharing housing with roommates?

Select

5. Youth Choice (for heads of household who are 24 yrs. or younger): Would you like to be considered for housing programs that are:

Select

5d. Survivor Choice (for those fleeing domestic violence): you indicated you are currently experiencing a form of violence. Would you like to be considered for housing programs that are:

Select

UNIT SIZE AND PREFERENCES

6a. If you are a single adult, would you consider living in a single room occupancy (SRO)?

Select

6b. If you need a bedroom size larger than an SRO, studio or 1 bedroom, select the size below.

Select

6c. Are you seeking any of the following due to a disability? If yes, you may have to provide documentation of disability - related need.)

Select

6d. Are you interested in applying for housing units targeted for persons with disabilities?

Select

6e. Are you interested in applying for housing units targeted for persons with an HIV+ diagnosis (You may have to provide documentation of HIV status to qualify for these housing units.)

Select

6F. WHILE OPENINGS ARE NOT COMMON, WE DO HAVE DIFFERENT TYPES OF AFFORDABLE HOUSING. CHECK THE TYPES YOU WOULD BE WILLING TO TAKE IF THERE WAS AN OPENING:

Voucher Choice

Project Based Unit

Test Competition

NEIGHBORHOOD SELECTION

1

Allison Singer,
Coordinated Entry



[PROFILE \(/CLIENT/107308/PROFILE\)](#) [HISTORY \(/CLIENT/107308/HISTORY\)](#) [SERVICES \(/CLIENT/107308/SERVICE\)](#) [PROGRAMS \(/CLIENTS/107308/PROGRAM\)](#)

[ASSESSMENTS \(/CLIENT/107308/ASSESSMENT\)](#) [NOTES \(/CLIENTS/107308/NOTE\)](#) [FILES \(/CLIENTS/107308/FILE\)](#) [CONTACT \(/CLIENT/107308/CONTACT\)](#)

[LOCATION \(/CLIENT/107308/LOCATION\)](#) [REFERRALS \(/CLIENT/107308/REFERRAL\)](#) [DASHBOARD \(/DASHBOARD\)](#) [SEARCH \(/CLIENT\)](#) [CASELOAD \(/CASELOAD\)](#)

7A. CHECK OFF ALL THE AREAS YOU ARE WILLING TO LIVE IN. ANOTHER WAY TO DECIDE IS TO FIGURE OUT WHICH PLACES YOU WILL NOT LIVE IN, AND CHECK OFF THE REST. YOU ARE NOT PENALIZED IF YOU CHANGE YOUR MIND ABOUT WHERE YOU WOULD LIKE TO LIVE.

Select All Neighborhoods

Allston/Brighton

Back Bay/Fenway/South End

Charlestown

Dorchester 02121 (Grove Hall,
Franklin Park)

Dorchester 02122 (Meetinghouse
Hill, Neponset, Clam Point)

Dorchester 02124 (Dorchester
Center, Codman Square, Ashmont,
Adams Village)

Dorchester 02125

Downtown/Beacon Hill/North End/
Chinatown/Gov. Center/West End

East Boston

Hyde Park

Jamaica Plain

Mattapan

Mission Hill

Roslindale

Roxbury

South Boston/Seaport

West Roxbury

HOUSEHOLD HISTORY - FOR HOMELESS SET-ASIDES

KEY POINTS TO SHARE WITH THE PARTICIPANT REGARDING HOUSEHOLD HISTORY QUESTIONS

[Help](#)

Test Competition

THE NEXT SECTION WILL ASK YOU QUESTIONS ABOUT YOUR CURRENT SITUATION AND HOUSING HISTORY. PLEASE
KNOW THAT THE RESPONSES TO THESE QUESTIONS IN NO WAY JEOPARDIZE THE SERVICES YOU CURRENTLY USE, OR
ANY FUTURE HOUSING OPPORTUNITIES YOU CHOOSE TO PURSUE.

PROFILE (/CLIENT/107308/PROFILE) KNOWLEDGE (/CLIENT/107308/KNOWLEDGE) PROGRAMS (/CLIENT/107308/PROGRAMS)
 ANY FUTURE HOUSING OPPORTUNITIES YOU CHOOSE TO PURSUE.
 ASSESSMENTS (/CLIENT/107308/ASSESSMENTS) NOTES (/CLIENT/107308/NOTES) FILES (/CLIENT/107308/FILES) CONTACT (/CLIENT/107308/CONTACT)

THESE QUESTIONS ARE ONLY ASKED FOR THE PURPOSES OF MATCHING PEOPLE TO THE HOUSING RESOURCES AVAILABLE.

8a. Have you ever been diagnosed by a licensed professional as having a disabling condition? You do not need to disclose the condition.

Select

8B. THERE ARE TWO CIRCUMSTANCES WHERE HOUSING AUTHORITIES ADMINISTERING THESE VOUCHERS ARE REQUIRED TO DENY AN APPLICANT. IN AN EFFORT TO BE CONSIDERATE OF YOUR TIME, IT IS BEST FOR US TO FIGURE OUT WHETHER THESE BARRIERS MIGHT COME UP FOR YOU NOW.

HAVE YOU EXPERIENCED ANY OF THE FOLLOWING? (CHECK ALL THAT APPLY)

Any household member has been convicted of the manufacture or production of methamphetamine in federally assisted housing.

Any member of your household is subject to a lifetime registration requirement under a state sex offender registration program.

None of the above

8C. WE ARE ASKING PEOPLE WHAT FACTORS MAY BE IN THEIR BACKGROUNDS SO WE CAN HELP PEOPLE PREPARE SUPPORTING DOCUMENTATION, REFERENCES AND OTHER POSITIVE INFORMATION TO THE HOUSING AUTHORITY. (CHECK ALL THAT APPLY)

THIS IS NOT TO SCREEN YOU OUT FOR A VOUCHER, BUT RATHER TO HELP OVERCOME POTENTIAL ADMISSION BARRIERS.

A housing authority or housing program terminated your subsidy (i.e. a housing voucher, a public housing unit, etc.)

You have been evicted from a legal tenancy where you were the lease holder.

Prior to entering shelter or sleeping outside during this episode of homelessness, you came directly from jail, prison or a pre-release program.

You have been convicted (found guilty of) a violent crime

You have been convicted (found guilty of) a drug crime

None of the above

KEY POINTS TO SHARE WITH THE PARTICIPANT REGARDING LENGTH OF TIME HOMELESS

SOME HOUSING PROGRAMS USE A TIEBREAKER OF HOW LONG SOMEONE HAS EXPERIENCED BOSTON HOMELESSNESS IF MORE PEOPLE ARE INTERESTED IN AN OPPORTUNITY THAN THERE ARE AVAILABLE OPENINGS.

THE TIE BREAKER IS DEFINED BY WHO HAS THE MOST CUMULATIVE BOSTON HOMELESS NIGHTS IN UNSHELTERED SITUATIONS, EMERGENCY SHELTER AND TRANSITIONAL HOUSING/ VA GPD IN THE LAST THREE YEARS.



PROFILE (/CLIENT/107308/PROFILE) HISTORY (/CLIENT/107308/HISTORY) SERVICES (/CLIENT/107308/SERVICES) PROGRAMS (/CLIENT/107308/PROGRAMS)
ASSESSMENTS (/CLIENT/107308/ASSESSMENT) NOTES (/CLIENTS/107308/NOTE) FILES (/CLIENTS/107308/FILE) CONTACT (/CLIENT/107308/CONTACT)
LOCATION (/CLIENT/107308/LOCATION) REFERRALS (/CLIENT/107308/REFERRAL) DASHBOARD (/DASHBOARD) SEARCH (/CLIENT) CASELOAD (/CASELOAD)

WE WILL NEED TO DOCUMENT ANY NIGHTS THAT ARE NOT IN OUR DATABASE IF THERE ARE HOUSING OPENINGS THAT YOU ARE MATCHED TO.

WAREHOUSE RECORD-LENGTH OF TIME HOMELESS

9a. How many cumulative (total) Boston homeless nights does the participant's Window into the Warehouse record show?

IF YOU BELIEVE THE PARTICIPANT HAS MORE BOSTON HOMELESS NIGHTS TO ADD TO THEIR RECORD (UNSHELTERED STAYS IN BOSTON; AND/OR SHELTERS WHO DO NOT INPUT INTO THE WAREHOUSE), COMPLETE THE 3 YEAR HISTORY USING THE

"DOCUMENTING CURRENT BOSTON HOMELESSNESS GUIDANCE AND TEMPLATE" FORM AT [HTTPS://BOSTONCOC.MAILCHIMPSTES.COM/](https://bostoncoc.mailchimpstes.com/)

AND SPECIFY THE NUMBER OF BOSTON HOMELESS NIGHTS YOU ARE ADDING TO THEIR LENGTH OF TIME HOMELESS IN THE WAREHOUSE. YOU MAY SKIP THIS STEP IF YOU DO NOT HAVE ANY ADDITIONAL BOSTON HOMELESS NIGHTS TO ADD.

9b. Boston homeless nights you are adding to their length of time homeless in the warehouse.

9c. Total # of Boston Homeless Nights: (9a+9b)

0

KEY POINTS TO SHARE WITH THE PARTICIPANT REGARDING NEXT STEPS

I ACKNOWLEDGE I SHARED THIS INFORMATION WITH THE PARTICIPANT (CHECK ALL ITEMS BELOW)

Wait Times

WAIT TIMES CAN CHANGE FROM TIME TO TIME BASED ON HOW MANY PEOPLE ARE INTERESTED, AND THE OPENINGS WE HAVE AVAILABLE.

WE ALSO HAVE A FEW PRIORITY POPULATIONS WE HAVE TO SERVE FIRST IF THERE ARE LIMITED OPENINGS - THESE ARE YOUNG PEOPLE, THOSE WHO HAVE BEEN HOMELESS THE LONGEST AND PEOPLE IN AN UNSAFE SITUATION.

What should I do to try to find housing if I am not matched with a housing opening?

WE ENCOURAGE YOU TO THINK ABOUT WAYS WE CAN HELP YOU MOVE IN WITH FRIENDS, FAMILY, RETURN TO SAFE LIVING SITUATIONS, OR OTHER OPTIONS SINCE THESE PROGRAMS MAY NOT ALWAYS HAVE OPENINGS.

WE ENCOURAGE YOU TO KEEP THINKING ABOUT OTHER WAYS YOU MAY BE ABLE TO MOVE OUT OF HOMELESSNESS, LIKE WITH ROOMMATES OR PEOPLE YOU KNOW AT THE SAME TIME YOU ARE APPLYING FOR AFFORDABLE HOUSING.

IF YOU THINK OF AN OPTION, YOU CAN ALWAYS BE REASSESSED TO SEE IF WE CAN HELP WITH THE MOVE IN.

Who will I hear from if I am matched to a housing opening?

YOU MAY HEAR FROM ME OR ANY OTHER CASE MANAGERS/CONTACTS YOU LISTED HERE TODAY; YOU MAY ALSO HEAR DIRECTLY FROM THE HOUSING PROGRAM, SO BE SURE TO RETURN CALLS OR EMAILS EVEN IF YOU DON NOT KNOW THE AGENCY.

[PROFILE \(/CLIENT/107308/PROFILE\)](#) [HISTORY \(/CLIENT/107308/HISTORY\)](#) [SERVICES \(/CLIENT/107308/SERVICE\)](#) [PROGRAMS \(/CLIENTS/107308/PROGRAM\)](#)[ASSESSMENTS \(/CLIENT/107308/ASSESSMENT\)](#) [NOTES \(/CLIENTS/107308/NOTE\)](#) [FILES \(/CLIENTS/107308/FILE\)](#) [CONTACT \(/CLIENT/107308/CONTACT\)](#)[LOCATION \(/CLIENT/107308/LOCATION\)](#) [REFERRALS \(/CLIENT/107308/REFERRAL\)](#)[DASHBOARD \(/DASHBOARD\)](#)[SEARCH \(/CLIENT\)](#)[CASELOAD \(/CASELOAD\)](#)

IN GENERAL, THE HOUSING PROGRAMS WILL OUTREACH TO PEOPLE WHO ARE MATCHED WITH OPENINGS FOR ABOUT TWO WEEKS.

THEY WILL MOVE ON TO NEW PEOPLE WHO MAY BE INTERESTED AFTER TWO WEEKS BECAUSE THEY HAVE TO FILL THE OPENINGS.

HOWEVER, IF YOU ARE INTERESTED AFTER THE TWO WEEKS, YOU SHOULD STILL RETURN CALL/EMAIL/MESSAGE AS YOU MAY BE ABLE TO BE MATCHED TO ANOTHER OPENING AT A LATER DATE.

Am I automatically approved for the housing openings when I'm matched

NO. TODAY WE GATHERED INFORMATION TO HELP FIGURE OUT IF YOU'RE ELIGIBLE AND MATCH YOU TO YOUR PREFERENCES, BUT THE HOUSING PROGRAMS WILL ACTUALLY VERIFY AND DOCUMENT ELIGIBILITY AT THE TIME YOU ARE REFERRED.

ALL OF THE PROGRAMS HAVE DIFFERENT ELIGIBILITY CRITERIA - OUR SYSTEM WILL DO ITS BEST TO MATCH YOU WITH THOSE THAT YOU SHOULD BE ELIGIBLE FOR, BUT THERE MAY BE TIMES WHERE YOU MATCHED, AND ARE NOT ELIGIBLE, AND WILL BE OFFERED A NEW ONE WHEN ONE COMES UP

Optional Background Notes from Assessor Staff:

[SAVE](#)[CANCEL \(/CLIENTS/107308/PROGRAM/158078/ASSESSMENT\)](#)

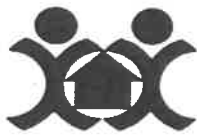
MA -500 Boston CoC PHA Homeless Preference (1C-7)

Attachment Cover Sheet

A copy of an excerpt from the PHA(s) administrative planning document(s), other PHA-developed document with the written policies, or a letter from the PHA(s) that addresses:

- ✓ Homeless preference—name the attachment PHA Homeless Preference
- ✓ Moving On preference—this may include the Administration Plan, Admissions and Continued Occupancy Policy (ACOP), annual 5-year plan—name the attachment PHA Moving On Preference.

You cannot substitute website links or hyperlinks to meet the attachment requirements—we will only consider documentation submitted in e-snaps.



Boston Housing Authority
52 Chauncy Street
Boston, MA 02111

(617) 988-4000
TDD (800) 545-1833 t.420

BOSTON HOUSING AUTHORITY

Leased Housing Division Administrative Plan for Section 8 Programs

Kathryn Bennett
Acting Administrator

As Amended, April 1, 2020



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HOUSING CHOICE VOUCHER PROGRAM ADMINISTRATIVE PLAN

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requested will overcome or alleviate those limitations;

- (iii) Police reports;
- (iv) Civil Rights incident reports;
- (v) Copies of restraining orders;
- (vi) Any other documentation that provides the BHA with evidence of Super Priority criteria.

c) Mitigation Vouchers – The BHA will provide three hundred (300) Mitigation Vouchers to be issued over the next five years to priority one, non-elderly disabled applicants in accordance with the Boston Housing Authority Designated Housing Plan who would have otherwise been called in for screening for a public housing unit. These applicants will be given the opportunity to apply for a Section 8 Housing Choice Mitigation Voucher at the time that they would have otherwise been called into screening for a public housing unit. If a Housing Choice Mitigation Voucher is not immediately available these individuals will be placed on waiting list and will be drawn in accordance with the Administrative Plan based on their Mitigation Voucher application.

(d) City of Boston Interagency Council on Housing and Homelessness (ICHH) Programs Priority:

- (1) The Boston Cooperative Agreement to Benefit Homeless Individuals (CABHI)** is a supported housing program serving chronically homeless individuals in the City of Boston with co-occurring mental illness and substance abuse. The Boston Public Health Commission (BPHC) and the BHA have partnered to create this program which seeks to serve no less than ninety (90) chronically homeless individuals over a three (3) year period. The BPHC will provide services through funding received from a three (3) year grant from the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA). The BPHC will identify and refer qualified applicants to the BHA wherein the BHA shall screen for HCVP eligibility.

The goal of the program is to provide substance abuse, mental health, and stabilization services to homeless men and women in supportive housing units in Boston. Homeless individuals will be assisted in housing search and placement, access to substance abuse and mental health services, life skills and housing retention.

BPHC will provide direct client services; screening and assessment of clients, placement in housing, and provision of Trauma-Informed and Recovery Support Services in the community. Case managers will link clients to community based services and treatment.

(2) Leading the Way Home

The Leading the Way Home Program is a form of supported housing designed to permanently solve homelessness amongst a subset of Boston homeless families residing in family emergency shelters funded by the State of Massachusetts. Households fitting this profile will be offered the following supports:

- a. 12 months of support services focused on stabilization and self-sufficiency, and
- b. Section 8 rental assistance for those participating households that are willing to participate in stabilization and economic self-sufficiency activities.

The BHA will provide not less than twenty-five (25) tenant based housing vouchers to qualified participants in this program. The State of Massachusetts will provide funding for the stabilization and supportive services for participants. The Massachusetts Department of Housing and Community Development (DHCD) or its subcontractor will identify and refer qualified Leading the Way Home applicants to the BHA.

(3) Moving On for the City of Boston

The Moving on Program is a program that will assist tenants (formerly chronically homeless) who currently occupy transitional housing that has supportive services, and are no longer need of those services, transition to independent housing. The BHA in partnership with the City of Boston COC will provide no less than 50 housing subsidies to individuals identified by the City of Boston COC to have graduated from program services. The moving on program will aid in making units available for those individuals who are currently chronically homeless and in need of supportive housing services attached to those subsidies. Such an individual shall be eligible if:

- a. The person has been a tenant in such a program for at least twelve (12) months; and,
- b. The person no longer requires the program's services or has completed the program's services (as determined by the program service provided); and,
- c. As a result must relocate from such housing.

(4) Housing Chronically Homeless Elders (age 62 or older)

In Partnership with the City of Boston, this program will house Chronically Homeless Elders identified by the Boston COC and paired with supportive services in project based units where there is an Elderly preference identified.

(5) Rapid Rehousing Program

In partnership with MHSA and Homestart, the Rapid Rehousing Program is a form of supported housing designed to rehouse families who have recently become homeless. The BHA will provide a minimum of 20 tenant based housing choice vouchers to qualified participants in this program. MHSA/HOMESTART will provide funding for the stabilization and will identify and refer qualified applicants to the BHA. Households fitting this profile will be offered the following supports:

- a. Housing search assistance and relocation costs;
- b. At least three (3) months of support services focused on stabilization and self-sufficiency provided by Homestart, and
- c. Section 8 rental assistance for those participating households that are willing to participate in stabilization and economic self-sufficiency activities.

(6) City of Boston Coordinated Access System Referral

The Coordinated Access System ("CAS") Referral Program is a program specifically designed to reduce homelessness amongst Boston individuals/families in shelter. Applicants will be notified and referred through CAS. The BHA will provide a minimum of fifty five (55) HCVP subsidies to qualified CAS applicants.

In order to be referred to the BHA, CAS applicants must be BHA document ready, which includes, but is not limited to, being enrolled in Housing search and stabilization services of no less than 6 months.

(e) Priority 1

The BHA grants Priority 1 status to an Applicant whose verified circumstances, during the final eligibility interview (see section 5.3) and prior to execution of the Lease, fall within one of the following categories:

- (1) **Displacement due to a disaster**, such as flood or fire, that results in the un-inhabitability of an Applicant's Apartment or dwelling Unit not due to the fault of the Applicant and/or Household Member or beyond the Applicant's control;

Verification must include:

- (i) A copy of the incident report from the local Fire Department or other appropriate agency who deals with disasters; **and**
- (ii) A copy of his/her Lease, or a statement from the property Owner, verifying that s/he is/was the tenant of record at the affected address; **and**
- (iii) Verification from the Fire department, the Inspectional Services Department, the Health Department or other appropriate agency that the dwelling Unit is now uninhabitable; **and**
- (iv) The cause of the disaster if known (**Note:** If the Applicant or a Household Member or guest was the cause of the disaster, approval for Priority status will be denied unless Mitigating Circumstances are established to the satisfaction of the BHA).

- (2) **Displacement Due to Domestic Violence/Dating Violence / Stalking/ Sexual Assault** which is defined as displacement from an address where the Applicant is/was the tenant of record due to continuing actual or threatened physical violence (including sexual abuse) directed against one or more of the Household Members.

Verification must include (and will be requested by the BHA in writing):

- (i) Submission of a fully completed "Certificate of Involuntary Displacement Due to Domestic Violence/Dating Violence/ Stalking/ Sexual Assault" HUD Form 50066 **OR**
- (ii) A record of a Federal, State, tribal, territorial, or local law enforcement agency (e.g. police), court or administrative agency; or documentation signed by the victim and signed by an employee, agent or volunteer of a victim service provider, an attorney, a medical professional, or a mental health professional from whom the Victim has sought assistance relating to domestic violence, dating

violence, sexual assault, or stalking, or the effects of abuse, in which the professional attests under penalty of perjury that he or she believes that the incident of domestic violence, dating violence, sexual assault, or stalking is grounds for protection under 24 C.F.R. 5.2005 or 5.2009..

(iii) Verification *will not* be considered valid unless it:

- Supplies the name of the threatening or abusive Household Member or other legal occupant of the dwelling Unit,
- Describes how the situation came to verifier's attention, **and**
- Indicates that the threats and/or violence are of a recent (within the past six [6] months) or continuing nature if the Applicant is still residing in the dwelling where the violence has occurred or is occurring, **or**
- Indicates that the Applicant was displaced because of the threats and/or violence and that the Applicant is in imminent danger where he/she now resides.

(iv) The Applicant must supply the name and address of the abuser **AND** provide documentation that the Applicant is/was a tenant of record

(3) **Victim of hate crime.** The Applicant or a member of the Household has been a victim of one or more hate crimes **AND** the Applicant Family has vacated a dwelling Unit because of this crime **OR** the fear associated with the crime has destroyed the peaceful enjoyment of the dwelling Unit.

"Hate crime", is defined as any criminal act coupled with overt actions motivated by bigotry and bias including, but not limited to, a threatened, attempted or completed overt act motivated at least in part by racial, religious, ethnic, handicap, gender or sexual orientation, prejudice, or which otherwise deprives another person of his/her constitutional rights by threats, intimidation or coercion, or which seeks to interfere with or disrupt a person's exercise of constitutional rights through harassment or intimidation.

Verification must include:

MA -500 Boston CoC 1C-7. PHA Moving On Preference

Attachment Cover Sheet



Boston Housing Authority
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Boston, MA 02111

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BOSTON HOUSING AUTHORITY

Leased Housing Division Administrative Plan for Section 8 Programs

Kathryn Bennett
Acting Administrator

As Amended, April 1, 2020



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requested will overcome or alleviate those limitations;

- (iii) Police reports;
- (iv) Civil Rights incident reports;
- (v) Copies of restraining orders;
- (vi) Any other documentation that provides the BHA with evidence of Super Priority criteria.

c) Mitigation Vouchers – The BHA will provide three hundred (300) Mitigation Vouchers to be issued over the next five years to priority one, non-elderly disabled applicants in accordance with the Boston Housing Authority Designated Housing Plan who would have otherwise been called in for screening for a public housing unit. These applicants will be given the opportunity to apply for a Section 8 Housing Choice Mitigation Voucher at the time that they would have otherwise been called into screening for a public housing unit. If a Housing Choice Mitigation Voucher is not immediately available these individuals will be placed on waiting list and will be drawn in accordance with the Administrative Plan based on their Mitigation Voucher application.

(d) City of Boston Interagency Council on Housing and Homelessness (ICHH) Programs Priority:

- (1) The Boston Cooperative Agreement to Benefit Homeless Individuals (CABHI)** is a supported housing program serving chronically homeless individuals in the City of Boston with co-occurring mental illness and substance abuse. The Boston Public Health Commission (BPHC) and the BHA have partnered to create this program which seeks to serve no less than ninety (90) chronically homeless individuals over a three (3) year period. The BPHC will provide services through funding received from a three (3) year grant from the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA). The BPHC will identify and refer qualified applicants to the BHA wherein the BHA shall screen for HCVP eligibility.

The goal of the program is to provide substance abuse, mental health, and stabilization services to homeless men and women in supportive housing units in Boston. Homeless individuals will be assisted in housing search and placement, access to substance abuse and mental health services, life skills and housing retention.

BPHC will provide direct client services; screening and assessment of clients, placement in housing, and provision of Trauma-Informed and Recovery Support Services in the community. Case managers will link clients to community based services and treatment.

(2) Leading the Way Home

The Leading the Way Home Program is a form of supported housing designed to permanently solve homelessness amongst a subset of Boston homeless families residing in family emergency shelters funded by the State of Massachusetts. Households fitting this profile will be offered the following supports:

- a. 12 months of support services focused on stabilization and self-sufficiency, and
- b. Section 8 rental assistance for those participating households that are willing to participate in stabilization and economic self-sufficiency activities.

The BHA will provide not less than twenty-five (25) tenant based housing vouchers to qualified participants in this program. The State of Massachusetts will provide funding for the stabilization and supportive services for participants. The Massachusetts Department of Housing and Community Development (DHCD) or its subcontractor will identify and refer qualified Leading the Way Home applicants to the BHA.

(3) Moving On for the City of Boston

The Moving on Program is a program that will assist tenants (formerly chronically homeless) who currently occupy transitional housing that has supportive services, and are no longer need of those services, transition to independent housing. The BHA in partnership with the City of Boston COC will provide no less than 50 housing subsidies to individuals identified by the City of Boston COC to have graduated from program services. The moving on program will aid in making units available for those individuals who are currently chronically homeless and in need of supportive housing services attached to those subsidies. Such an individual shall be eligible if:

- a. The person has been a tenant in such a program for at least twelve (12) months; and,
- b. The person no longer requires the program's services or has completed the program's services (as determined by the program service provided); and,
- c. As a result must relocate from such housing.

(4) Housing Chronically Homeless Elders (age 62 or older)

In Partnership with the City of Boston, this program will house Chronically Homeless Elders identified by the Boston COC and paired with supportive services in project based units where there is an Elderly preference identified.

(5) Rapid Rehousing Program

In partnership with MHSA and Homestart, the Rapid Rehousing Program is a form of supported housing designed to rehouse families who have recently become homeless. The BHA will provide a minimum of 20 tenant based housing choice vouchers to qualified participants in this program. MHSA/HOMESTART will provide funding for the stabilization and will identify and refer qualified applicants to the BHA. Households fitting this profile will be offered the following supports:

- a. Housing search assistance and relocation costs;
- b. At least three (3) months of support services focused on stabilization and self-sufficiency provided by Homestart, and
- c. Section 8 rental assistance for those participating households that are willing to participate in stabilization and economic self-sufficiency activities.

(6) City of Boston Coordinated Access System Referral

The Coordinated Access System (“CAS”) Referral Program is a program specifically designed to reduce homelessness amongst Boston individuals/families in shelter. Applicants will be notified and referred through CAS. The BHA will provide a minimum of fifty five (55) HCVP subsidies to qualified CAS applicants.

In order to be referred to the BHA, CAS applicants must be BHA document ready, which includes, but is not limited to, being enrolled in Housing search and stabilization services of no less than 6 months.

(e) Priority 1

The BHA grants Priority 1 status to an Applicant whose verified circumstances, during the final eligibility interview (see section 5.3) and prior to execution of the Lease, fall within one of the following categories:

- (1) **Displacement due to a disaster**, such as flood or fire, that results in the un-inhabitability of an Applicant's Apartment or dwelling Unit not due to the fault of the Applicant and/or Household Member or beyond the Applicant's control;

Verification must include:

- (i) A copy of the incident report from the local Fire Department or other appropriate agency who deals with disasters; **and**
- (ii) A copy of his/her Lease, or a statement from the property Owner, verifying that s/he is/was the tenant of record at the affected address; **and**
- (iii) Verification from the Fire department, the Inspectional Services Department, the Health Department or other appropriate agency that the dwelling Unit is now uninhabitable; **and**
- (iv) The cause of the disaster if known (**Note:** If the Applicant or a Household Member or guest was the cause of the disaster, approval for Priority status will be denied unless Mitigating Circumstances are established to the satisfaction of the BHA).

- (2) **Displacement Due to Domestic Violence/Dating Violence / Stalking/ Sexual Assault** which is defined as displacement from an address where the Applicant is/was the tenant of record due to continuing actual or threatened physical violence (including sexual abuse) directed against one or more of the Household Members.

Verification must include (and will be requested by the BHA in writing):

- (i) Submission of a fully completed "Certificate of Involuntary Displacement Due to Domestic Violence/Dating Violence/ Stalking/ Sexual Assault" HUD Form 50066 **OR**
- (ii) A record of a Federal, State, tribal, territorial, or local law enforcement agency (e.g. police), court or administrative agency; or documentation signed by the victim and signed by an employee, agent or volunteer of a victim service provider, an attorney, a medical professional, or a mental health professional from whom the Victim has sought assistance relating to domestic violence, dating

violence, sexual assault, or stalking, or the effects of abuse, in which the professional attests under penalty of perjury that he or she believes that the incident of domestic violence, dating violence, sexual assault, or stalking is grounds for protection under 24 C.F.R. 5.2005 or 5.2009..

(iii) Verification *will not* be considered valid unless it:

- Supplies the name of the threatening or abusive Household Member or other legal occupant of the dwelling Unit,
- Describes how the situation came to verifier's attention, **and**
- Indicates that the threats and/or violence are of a recent (within the past six [6] months) or continuing nature if the Applicant is still residing in the dwelling where the violence has occurred or is occurring, **or**
- Indicates that the Applicant was displaced because of the threats and/or violence and that the Applicant is in imminent danger where he/she now resides.

(iv) The Applicant must supply the name and address of the abuser **AND** provide documentation that the Applicant is/was a tenant of record

(3) **Victim of hate crime.** The Applicant or a member of the Household has been a victim of one or more hate crimes **AND** the Applicant Family has vacated a dwelling Unit because of this crime **OR** the fear associated with the crime has destroyed the peaceful enjoyment of the dwelling Unit.

"Hate crime", is defined as any criminal act coupled with overt actions motivated by bigotry and bias including, but not limited to, a threatened, attempted or completed overt act motivated at least in part by racial, religious, ethnic, handicap, gender or sexual orientation, prejudice, or which otherwise deprives another person of his/her constitutional rights by threats, intimidation or coercion, or which seeks to interfere with or disrupt a person's exercise of constitutional rights through harassment or intimidation.

Verification must include:

MA-500 Local Competition Announcement (1E-1)

Attachment Cover Sheet

- (1) a screenshot of a website posting that legibly displays a system generated date and time or advertisement from a local newspaper(s), social media (Twitter, Facebook, etc.) that demonstrates your CoC announced it was accepting project applications;
and
- (2) a copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.

Continuum of Care program | 8 x +

boston.gov/housing/continuum-care-program

Apps Online Conversion... CCMs Coc Monitoring Mo... JAG - HUD Coc Program Tools... Boston Coordinate... Login | Salesforce At a Glance Criteria... Boston's Way Home Coc Program Inter... FY 2016 Income L... CPD Monitoring...

CITY of BOSTON Mayor Kim Janney

LATEST UPDATES MEETINGS INFORMATION BOSTON COC PROVIDERS ARCHIVES

PAY AND APPLY PUBLIC NOTICES FEEDBACK TRANSLATE

LATEST UPDATES

DND has posted a Request for Proposals for providers that wish to submit new project applications and/or wish to reallocate existing Coc program funds to create new projects as part of the Boston Coc's overall application to HUD.

The RFP package for new projects will be available beginning on September 27, 2021 from the [City's purchasing website](#).

Agencies that wish to renew existing Coc-funded projects with no changes will receive separate instructions this week from their DND Development Officer. The due date for those applications is Friday, October 15, 2021.

An optional Applicants' Conference will be held via Zoom on Thursday, Sept. 30 from 12pm to 1pm. Please email katie.cahill.holloway@boston.gov for the Zoom link by Sept. 30 at 10am.

To access details for this specific event, or to respond through electronic format, please visit the City of Boston Supplier Portal and access **Event # EV00009782**.

Completed proposals must be submitted via the Supplier Portal before 4pm on Friday, Oct. 15. **LATE PROPOSALS WILL NOT BE ACCEPTED.**

Type here to search

8:54 AM 9/28/2021



Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

CoC 2021 competition update: new project RFP available

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Mon, Sep 27, 2021 at 2:39 PM

To: Alexia Layne-Lomon <alexia.laynelomon@bostonabcd.org>, Carla Richards <carla.richards@bostonabcd.org>, Patricia Sullivan <patricia.sullivan@bostonabcd.org>, John Drew <john.drew@bostonabcd.org>, acassid@advocates.org, Valerie Frias <frias@allstonbrightoncdc.org>, max@atask.org, cristina@atask.org, Dawn <dawn@atask.org>, Ayala Livny <ayala.livny.consulting@gmail.com>, mccjen@comcast.net, cacoey@protonmail.com, Brenda Cassidy <bcassidy@baycove.org>, Bill Sprague <bsprague@baycove.org>, Jamie Rihbany <jrihbany@baycove.org>, Nancy Mahan <nmahan@baycove.org>, Ruth Harel Garvey <rgarvey@baycove.org>, jespino@baycove.org, ajarvis@baycove.org, Steven Ponte <sponte@baycove.org>, Edna Rivera-Carrasco <eriveracarrasco@baycove.org>, jsalvador@baycove.org, Ann Maas <annmaas@yahoo.com>, mp.connelly1@comcast.net, Jim O'Connell <jconnell@bhchp.org>, "Bogdanski, Julie" <jbogdanski@bhchp.org>, Linda Smith <lsmith@bhchp.org>, "Bhalla, Pooja" <pobhalla@bhchp.org>, Suzanne Armstrong <sarmstrong@bhchp.org>, mmayer@bhchp.org, diwilliams@bhchp.org, Barbara Sheerin <Barbara.Sheerin@bostonhousing.org>, "Gleich, David" <david.gleich@bostonhousing.org>, Gail Livingston <gail.livingston@bostonhousing.org>, Eileen O'Brien <eileen.obrien@bmc.org>, Kate Walsh <kate.walsh@bmc.org>, Kip Langelo <kip.langelo@bmc.org>, christian.vasquez@bmc.org, Corey Grier <CGrier@bphc.org>, Debra Paul <dpaul@bphc.org>, "Thomas, David" <DThomas@bphc.org>, Gerry Thomas <gthomas@bphc.org>, "Way, Mike" <mway@brm.org>, "Pitts, Niurka" <npitts@bphc.org>, tjamison@bphc.org, Bob Rubinstein <brubinstein@brm.org>, John Samaan <jsamaan@brm.org>, laura@breaktime.org, Connor Schoen <connor@breaktime.org>, michael@breaktime.org, Arlene Snyder <ASnyder@bridgeotw.org>, Elisabeth Jackson <EJackson@bridgeotw.org>, Deborah Hughes <dhughes@brookviewhouse.org>, Jessica Santana <jsantana@casamyma.org>, Stephanie Brown <sbrown@casamyma.org>, Venessa Rosemond <vrosemond@casamyma.org>, manuel.duran@casanuevavida.org, Zaida estremera <zaida.estremera@casanuevavida.org>, mirta_rodriguez@ccab.org, richard_freitas@ccab.org, stephen_fulton@ccab.org, kevin_mackenzie@ccab.org, beth_chambers@ccab.org, Joan Sinner <jsinner@csrox.org>, smccroom@csrox.org, Elizabeth Price <eprice@csrox.org>, cakers@csrox.org, Gideon Davis <gdavis@csrox.org>, stgold@csrox.org, christine@circleofhopeonline.org, Sheila Dillon <sheila.dillon@boston.gov>, Quincey Roberts <quincey.roberts@boston.gov>, Nancy Conklin <nancy.conklin@boston.gov>, Catherine Miranda <catherine.miranda@boston.gov>, Katherine Forde <katie.forde@boston.gov>, Dana Mendes <dana.mendes@boston.gov>, Vielkis Gonzalez <vielkis.gonzalez@boston.gov>, Adelina Correia <adelina.correia@boston.gov>, Courtney Trudell <courtney.curran@boston.gov>, James Greene <james.j.greene@boston.gov>, Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>, Laila Bernstein <laila.bernstein@boston.gov>, Laura Rivera-Davis <laura.rivera-davis@boston.gov>, SH Staff <shstaff@boston.gov>, Ian Gendreau <ian.gendreau@boston.gov>, Jennifer Flynn <jennifer.flynn@boston.gov>, Beatriz Moreira <beatriz.moreira@boston.gov>, Rhonda Taylor <rhonda.taylor@boston.gov>, Robert Santiago <robert.santiago@boston.gov>, Robert Turner <Robert.turner@boston.gov>, Iva Comey <icomey@commonwealthlandtrust.org>, Jessyka Marquez <jmarquez@commonwealthlandtrust.org>, Steve Wilkins <swilkins@commonwealthlandtrust.org>, eranger@commonwealthlandtrust.org, Kevin <kkelly@commonwealthlandtrust.org>, psanborn@cogincorp.com, Feranda Faria <ffaria@comteam.org>, pgeronde@dimock.org, bjwalker@dimock.org, Pamela Andrade-Talbert <ptalbert@dimock.org>, Sarah McBride <smcbride@dimock.org>, "Morris, Tom (Dimock)" <tmorris@dimock.org>, deborah.s.jones@state.ma.us, "Chasse, Jeffrey (DMH)" <jeffrey.chasse@state.ma.us>, <jeffrey.chasse@state.ma.us>, Amanda@commoncathedral.org, Keith Wales <kwales@eliotchs.org>, Matthew Dowd <mdowd@eliotchs.org>, hwiedenhofer@eliotchs.org, CJameslewis10@gmail.com, Jim May <jmay@elizabethstone.org>, Josefina Pires <jpires@elizabethstone.org>, Nancy Owens-Hess <n Hess@elizabethstone.org>, Kathryn Fagan <kfagan@elizabethstone.org>, susan@emmausinc.org, rgair@empathways.org, ccouey@empathways.org, Peg Drisko <pdrisko@esacboston.org>, Lakia Cherry <lcherry@esacboston.org>, Matthew Caughey <mcaughey@esacboston.org>, Annie Marckling Gordon <annieg@familyaidboston.org>, Larry Seamans <larrys@familyaidboston.org>, Mikayla Francois <mikaylaf@familyaidboston.org>, Liz Rogers <Lrogers@helpfbms.org>, Yahaira Bautista <ybautista@fenwayhealth.org>, Kristen Lascoe <klascoe@fenwayhealth.org>, Chris Womendez <chriswomendez@hotmail.com>, FINEX <finexhouse@yahoo.com>, Rox Lindbert <r_lindbert@hotmail.com>, Heather Ross <hross@gbls.org>, "Jacquelynne J. 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Cc: SH Staff <shstaff@boston.gov>
Bcc: Gina Schaak <gschaak@tacinc.org>

Good day Boston CoC,

DND has posted a Request for Proposals for providers that wish to submit new project applications and /or wish to reallocate existing CoC program funds to create new projects as part of the Boston CoC's overall application to HUD. Agencies that wish to renew existing CoC-funded projects with no changes will receive separate instructions for that application process this week from your DND Development Officer.

The RFP package for new projects will be available beginning on September 27, 2021 from the City's purchasing website, Supplier Portal (www.cityofboston.gov/Procurement), the City's online process for purchasing, bidding, contracting, vendor registration and payment.

An optional Applicants' Conference will be held this Thursday via Zoom from 12 - 1 PM EST. Please email katie.cahill.holloway@boston.gov for the Zoom link by Thursday at 10 AM EST.

To access details for this specific Event, or to respond through electronic format, please visit the City of Boston Supplier Portal and access **Event # EV00009782**.

Completed proposals must be submitted via the Supplier Portal before 4:00 PM on Friday, October 15, 2021. LATE PROPOSALS WILL NOT BE ACCEPTED.

PLEASE NOTE: In order to participate in these online procurement activities Bidders must register with the Supplier Portal at www.cityofboston.gov/Procurement. First-Time Applicants, i.e., those who have never contracted with the City or, if so, not for many years, will be required to obtain login credentials, a process which is subject to administrative delays. **DND recommends that First-Time Applicants submit a register with the Supplier Portal prior well in advance of the Application deadline of October 1, 2021.**

The City of Boston and Mayor Kim Janey thank you for your interest in this opportunity to create housing opportunities for Boston's most vulnerable residents.

Katie Cahill-Holloway
Senior Development Officer for Supportive Housing
City of Boston | Massachusetts
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Supportive Housing Division
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Alexander Sturke (pronouns he/him/his)
Director of Communications
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617.870.3692 (c)

MA-500

request to post scoring tools to
CoC web page

****Are you or someone you know worried about being evicted? The [Office of Housing Stability](#) wants you to know that [only a Judge can evict you from your home](#). To learn more about your rights and resources, visit [Boston.gov/eviction-questions](#).****

The City of Boston is subject to [MGL: Chpt.66, Sec.10 Public Records Law](#). Email sent or received by City employees are subject to these laws. Unless otherwise exempted from the public records law, senders and receivers of City email should presume that the email are subject to release upon request, and to state record retention requirements.

----- Forwarded message -----

From: **Alexander Sturke** <alexander.sturke@boston.gov>
Date: Tue, Oct 19, 2021 at 3:01 PM
Subject: A little web help
To: James Duffy <james.duffy@boston.gov>

Hey James -

Kelsey and Carol are both out and I'm wondering if you could help me with a couple of edits to the website.

I'm hoping to make updates to the following page: boston.gov/housing/continuum-care-program

under the meetings information, can you add the following blurb?

October 19, 2021

A meeting of the Boston CoC Competition Oversight Committee was held on Monday, October 19, 2021 . Agenda items included an update on new projects submitted in response to the recent Request for Proposals and a review of the CoC's proposed Reallocation, Rating and Ranking Policies for the 2021 competition. [Here](#) is a link to the materials. <please link to the agenda and reallocation documents attached>

Under the latest updates section, can you post the following blurb?

The Boston CoC has posted the project scoring tools for new and renewing projects. Click [here](#) to see the tool for renewing projects and [here](#) to see the tool for new project evaluation. <please link to the attached "renewal" and "new" documents attached>

I appreciate your help!

Best,
Alexander

Alexander Sturke (pronouns he/him/his)
Director of Communications
Department of Neighborhood Development
617.635.4802 (w)
617.870.3692 (c)



Renewal

MA -500 Boston Continuum of Care FY21 **Renewal Project Scoring Tool**

Project Sponsor: _____

Project Name: _____

Project Type: _____

First Reviewer Name: _____ First Reviewer Score: _____

Second Reviewer Name: _____ Second Reviewer Score: _____

| Criteria Topic | Scored Criteria | Criteria Source | Pass / Fail | Notes |
|---|--|-----------------|-------------|-------|
| Project Quality Threshold Criteria; HUD will review information in eLOCCS, APRs, CAS warehouse data, Core Demographics / racial equity dashboard data and information provided from the local HUD CPD field office; including monitoring reports and audit reports, and performance standards on prior grants, and will assess projects using the following criteria on a pass/fail basis: | Applicant's performance met the plans and goals established in the initial application, | | | |
| | Applicant demonstrated all timeliness standards for grants being renewed, including those standards for the expenditure of grant funds that have been met | | | |
| | Applicant's performance in assisting program participants to achieve and maintain independent living and records of success, | | | |
| | Applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site | | | |
| | Prioritizes households with the longest time homeless and highest barriers to housing, through the CoCs CE system | | | |

If project does not have a "pass" in ALL of the above criteria, the project application does not meet minimum CoC and HUD threshold for funding and is not eligible for inclusion in the Boston CoC 2021 application to HUD.

Consensus (Yes/No): _____

| Criteria Topic | Scored Criteria | Criteria Source | Point Scale | Weight | Score |
|----------------|--|-------------------------------------|--|--------------------------------------|-------|
| | 1. Exits from RRH and retention in PSH | HMIS, SPM warehouse score card, APR | | | |
| | 1.a. RRH : Exits RRH to PH (benchmark 80%) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | System Performance Weight 41% | |
| | 1.b. PSH : Stayed in PH for over 12 months (benchmark 80%) (leavers and stayers) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | | |
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| | 7. Universal data elements error rate | HMIS | 5 pts: 20%-0 0 pts: 21% and above | | |
| | 8. Income and housing data quality | HMIS | 5 pts: above 80% 0 pts: below 79% | | |
| Project financial performance based on CoC/DND monitoring and invoicing | 9. Type of housing project proposal; RRH, PSH, Joint TH-RRH | Project application | 6: PSH 3: RRH/Joint TH-PH | | |
| | 10. Invoicing- submit invoices- on time, with all back up materials, and for eligible activities | CoC monitoring report/ Agency external audit | 6 pts: invoices regularly submitted on time 3 pts: usually on time, complete with few errors 1 pt: submit quarterly/not monthly | | |
| | 11. Is project efficient with funds- do calculation of cost per person served in each project (include HUD funds and match total and compare standard practice: CH 1 FTE for 15-20 households, families \$4,000 per year, RRH 1 FTE to 20-30 clients per yr. | APR, Project Application Budget | 6 pts: if standard is met and funding is equal to or less than per person/family ratio 0 pts: if not met and more funds per person/family | | |
| | 12. Required match based on project budget \$ _____ Was the match reported at end of operating year greater than the minimum required? | Project Application | 6 pts: yes 0 pts: no | | |
| | 13. Project returns unobligated funds in FY18 and/or FY19 | eLoccs/ DND budget tracking | 6 pts: 0 - 10% return 0 pts: 11 - 20% | | |
| | 14. Project utilization rate from current project operating year | APR (quarterly average for | 6 pts: 85 -over 100% 3 pt: 84 - 75% 0 pts: under 74% | | |

| | | | | | |
|--|--|--------------------|--|--|--|
| | | operating year) | | | |
|--|--|--------------------|--|--|--|

| Criteria Topic | Scored Criteria | Criteria Source | Point Scale | Weight | Score |
|---|--|--|--|--------|-------|
| Alignment with HUD and Boston CoC system-wide policy priorities | 15. Serving sub-populations in line with HUD and Boston CoC priorities: *Serving chronically homeless households, *Serving homeless youth; *Serving veterans; *Serving people fleeing domestic violence *Serving families with children | Project Application | Up to 6 pts: 1.2 pts for each sub-population served | | |
| | 16. Project practices a Housing First model/low barrier program | Project Application and cross reference with desk review | 6 pts: yes 0 pts: no | | |
| | 17. Does project serve participants who have the following vulnerabilities and severity of needs that may prevent them to enter housing due to the following barriers: *Vulnerability to victimization (history of DV); * Criminal histories *Current or past substance abuse *Very little or no income at entry * Chronic homelessness *Only project of its kind in the CoC, serving a special homeless population/sub-population | APR | Up to 6 pts: 1 pts for each sub-population served | | |

| | | | | | |
|--|--|------------------|--------|--------------|--|
| <p>Racial Equity</p> <p>To answer “yes” under this element, projects must submit evidence or an attestation that satisfies the scoring element criteria.</p> <p>To qualify, the actions must have been taken within the last three years.</p> | 19. The project applicant assessed whether black, indigenous, and other people of color (BIPOC) face barriers to equitably accessing or receiving services from their organization. | City Application | Yes/No | | |
| | 20. The applicant addressed the above assessment or made a written commitment to addressing BIPOC barriers identified, OR no barriers were identified in the assessment above. | City Application | Yes/No | | |
| | 21. The applicant assess whether lesbian, gay, bisexual, transgender, queer, and other people whose genders or sexualities are heteronormative (LGBTQ+) people face barriers to equitably accessing or receiving services from their organization. | City Application | Yes/No | | |
| | 22. Does the project applicant address or made a written commitment to addressing LGBTQ+ barriers identified above, OR no barriers were identified in the assessment above. | City Application | Yes/No | | |
| Total Available 117 | | | | TOTAL | |

*= system performance measurements

New

FY21 CoC Program NOFO

MA-500 Boston CoC New Project Scoring Tool

Sponsor:

Program:

Amount Requested:

Source: CoC Bonus, DV Bonus, Reallocation, Combined Reallocation/CoC Bonus

| New Project Quality Threshold Review (Part 1) | | | | |
|---|--|--|-----------|-------|
| Criteria Topic | Scored Criteria | Criteria Source | Pass/Fail | Notes |
| Project Quality Threshold Criteria | Does the applicant meet the eligibility requirements of the CoC Program and can they provide evidence of eligibility required in the application (e.g., nonprofit documentation). | Project application The agency must identify as a non-profit agency and be able to provide status documentation | | |
| | Does applicant demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and the capacity to administer federal funds. Demonstrating capacity may include a description of the applicant and experience with similar projects and with successful administration of SHP, S+C, or CoC Program funds or other federal funds | Project application; as described in 2B in new project application | | |
| | Applicants must submit the required certifications specified in this NOFO. | Project application. Agency must be able to provide a 5013c certification per the | | |

| | | | | |
|--|--|---|--|--|
| | | NOFO (DND as recipient will sign HUD forms) | | |
| | Does the population to be served must meet program eligibility requirements as described in the Act, the Rule, and Section II.B.11.f of this NOFO | Project application | | |
| | Does the applicant agree to participate in the Boston CoC Coordinated Entry System? | Project Application | | |
| | Does the applicant agree to participate in a local HMIS system, if not a DV provider agency? If applicant is a domestic victim service provider, do they use a comparable database that meets the needs of the local HMIS. | Project Application | | |

If project does not score "pass" in ALL of the above criteria- the project application does not meet minimum CoC and HUD threshold for funding and is not eligible for inclusion in the Boston CoC 2021 application to HUD.

New Project Quality Threshold Review (Part 2)

| Rating Factor for New Project Type | Points Available | Criteria | Number of Points | Notes |
|--|------------------|---|------------------|-------|
| Permanent Housing: Permanent Supportive Housing or Rapid Rehousing | | | | |
| <p>New PSH and RRH projects MUST receive at least 3 out of 4 point for this project type.</p> <p>New PSH or RRH Projects that do not receive at least 3 points will be rejected.</p> | 1 | The type of housing proposed including the number of units, will fit to needs of the program participants | | |
| | 1 | The type of supportive services that will be offered will ensure successful retention in or help to obtain PH | | |
| | 1 | Project has a specific plan to ensuring participants will be individually assessed to obtain the benefits of MS health, social and employment programs, | | |

| | | | | |
|--|---|---|--|--|
| | | which they are eligible for | | |
| | 1 | Participants are assisted to obtain and remain in PH in a manner that fits their needs | | |
| Joint Transitional Housing and Rapid Re-housing | | | | |
| New Joint TH and PH-RRH component project applications must receive at least 4 out of 6 points available for this project type. New Joint TH and PH-RRH component projects that do not receive at least 4 points will be rejected. | 1 | The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants (e.g., two or more bedrooms for families.) | | |
| | 1 | The proposed project will provide enough rapid rehousing assistance to ensure that at any given time a program participant may move from transitional housing to permanent housing. This may be demonstrated by identifying a budget that has twice as many resources for the rapid rehousing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served by the project | | |
| | 1 | The type of supportive services that will be offered to program participants will ensure successful retention or help to obtain | | |

| | | | | |
|--|---|---|--|--|
| | | permanent housing, including all supportive services regardless of funding source | | |
| | 1 | The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply and which meets the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education). | | |
| | 1 | Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of permanent housing). | | |
| | 1 | The project adheres to a housing first model as defined in Section III.B.2.o of this NOFO. | | |
| SSO-Coordinated Entry | | | | |
| New SSO-Coordinated Entry project applications must receive at least 2 out | 1 | The CE system is easily available/reachable for all persons within who are seeking information | | |

| <p>of the 4 points available for this project type.</p> <p>Projects that do not receive at least 2 points will be rejected.</p> | | regarding homelessness assistance. The system must also be accessible for persons with disabilities within the CoC's | | |
|---|---|---|---|--------------------|
| | 1 | There is a strategy for advertising that is designed specifically to reach homeless persons with the highest barriers within the CoC's geographic area. | | |
| | 1 | There is a standardized assessment process. | | |
| | 1 | Ensures program participants are directed to appropriate housing and services that fit their needs. | | |
| Criteria Topic | Scored Criteria | Criteria Source | Points | ¹ Score |
| Agency Past Performance | 1. The proposal demonstrates successful experience working with the eligible target population(s) | project application | 5 pts: yes 0 pts: no | |
| | 2. The proposal demonstrates successful experience working with HUD funded projects including: leasing units, administering rental assistance, providing supportive services, and utilizing HMIS, as applicable to the proposed project | project application | 10 pts: yes 0 pts: no | |
| | 3. The agency has past experience operating similar types of programs and services, working with the subpopulation, and achieving 80% participants maintain PH housing for at least 12 | project application, agency CoC program portfolio | 10 pts: yes 0 pts: no If agency does not have CoC/ESG or comparable | |

¹ Start tally score here (do not include above threshold values in final score tally)

| | | | | |
|-----------------------|---|------------------------------|--|--|
| | months or from exiting RRH or TH, program provides evidence participants achieve increased income | | awards/ projects | |
| | 4. Linkages and collaborations with other resources and providers are leveraged and discussed (evidenced by signed MOUs, contracts) | project application | 2 pts: yes 0 pts: no | |
| | 5. Agency has given back a project/funds/subsidies to serve homeless households to DND without a budget management plan, in the last 5 years | DND monitoring and portfolio | 5 pts: no 0 pts: yes | |
| | | | | |
| Program Design | 6. The project will practice a Housing First/Low Barrier model | project application | 10 pts: yes 0 pts: no | |
| | 7. The proposal describes a management plan and reasonable plan for effective and timely start up of the proposed activities | project application | 5 pts: yes 0 pts: no | |
| | 7a. If RRH, PSH or Joint TH-RRH the proposal describes how the sponsor will manage housing search challenges and quick identification and lease up of physical units for clients. Proposal references existing relationships with property owners, managers, existing units leased by sponsor, PBVs, etc. | project application | 5 pts: yes 0 pt: no | |
| | 7b. Does the PH (PSH, RRH or Joint) project have specific housing units or properties | project application | 10 pts: yes 5 pts: no, but proposal describes | |

| | | | | |
|---|--|---------------------|---|--|
| | identified for participants (i.e. proposing project/sponsor based model using with units already identified)? | | detailed viable unit acquisition strategy 0 pts: no strategy | |
| | 8. The proposed staffing level is adequate to support the project (i.e. for RRH, 1 FTE to max. 30 households; for CH 1 FTE for 15 - 20 households) | project application | 2 pts: yes 0 pts: no | |
| | 9. The proposal includes performance measurements related to housing stability: a) The proposal describes how participants will be assisted to obtain and remain in permanent housing for at least 12 months (if PSH program) b) The proposal describes how participants will be assisted to obtain permanent housing upon exiting a RRH program (RRH program or Joint TH-RRH) | project application | 5 pts: yes 0 pts: no | |
| | 10. The proposal includes performance measurements related to how participants will be assisted to increase both their employment, access to mainstream resources and/or non-employment income and maximize their ability to live independently | project application | 5 pts: yes 0 pts: no | |
| | | | | |
| Subpopulations proposed to serve | 11. PH projects to serve families ONLY (individual projects add 5 pts): does | | 5 pts.- yes | |

| | | | | |
|---|---|---------------------|--|--|
| | proposal describe a detailed relationship and collaboration (past or future) with McKinney-Vento education providers/education liaisons | | | |
| | 12. PH projects to serve families ONLY (individual projects add 5 pts): does proposal describe how the program will partner with local education agencies and how they find / inform / connect homeless families to benefits they qualify for | | 5 pts.-yes | |
| | 13. Other sub-populations priorities: *Veterans * Chronically homeless *Families * Youth *DV | project application | 1 pt for each sub-population (5 max. pts) | |
| | | | | |
| Fiscal Planning and Agency Performance | 14. The project shows a diverse mix of funding or primary reliance on CoC Program (supportive services, leasing, rental assistance etc.) | project application | 10 pts: mix of funding 5 pts: reliance of CoC funds | |
| | 15. The project demonstrates cost effectiveness; use industry standards for matrix= families \$4,000 per year, CH program 1 csmgr per 17 clients, RRH 1 csmgr per 40 - 50 clients per year | project application | 10 pts: Within range 0 pts: Not in range | |
| | 16. Funds requested are reasonable in relationship to stated goals and objectives (review if costs and direct | project application | 5 pts: yes 0 pts: no | |

| | | | | |
|--------------------------------|--|---|-------------------------|--|
| | assistance seem too high or too low to achieve proposed outcomes) | | | |
| | 17. Sponsor/applicant provides match commitments totaling 25% of the HUD funding requested (minus leasing dollars) and demonstrates effective use of the match resources | project application | 2 pts: yes 0 pts: no | |
| | 18. Prioritizes households with the longest time homeless and highest barriers to housing, through the CoCs Coordinated Entry System ² (including CAS ³ when applicable) | project application | 2 pts: yes 0 pts: no | |
| | 19. Agency audit A-133 or supplement external audit has no major findings/"low risk" | project application, agency CoC program portfolio | 2 pts: yes 0 pts: no | |
| CoC Needs/Gaps Analysis | 20. The proposed project fills a need or gap in the existing homeless assistance system and is not duplicative of other mainstream resources | project application | 5 pts: yes 0 pts: no | |

² The Boston CoC has implemented a Coordinated Entry System to ensure homelessness is rare, brief and non-recurring. The CES framework drives the CoC to systematically prevent or divert people from becoming homeless whenever possible; and if people do become homeless, swiftly connect them to permanent housing with the appropriate level of supports to ensure they remain housed. The CES system within our CoC also complies with HUD's *Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System (CPD-17-01)*.

³ CAS is the Boston CoCs electronic database that "matches" available referrals from the CES system to eligible and prioritized households.

| | | | | |
|--|---|--|--------------------------|--|
| | <p>services from their organization.</p> <p>25. Does the project applicant address or made a written commitment to addressing LGBTQ+ barriers identified above, OR no barriers were identified in the assessment above.</p> | | Yes/No | |
| Leveraging Substance Abuse Treatment and Healthcare Resources (for PSH and RRH Project) | 26. Does project have a commitment in the form of a formal written agreement that includes, at minimum, (1) the value of the commitment and; (2) the dates the healthcare resources will be provided. | | 10 pts: yes 0 pts: no | |
| Leveraging Housing Resources | 27. Does the new project (PSH or RRH) propose to utilize housing subsidies or subsidized housing units not funded through the CoC or ESG programs. | | 10 pts: yes 0 pts: no | |
| <p>The reviewer may assign partial points to each question if proposal semi/partially addressed question/scoring criteria. The maximum points total available points for a PH (PSH, RRH or Joint TH-RRH) Projects = 150; Non-Housing projects (SSO-CE) total available points = 120</p> | | | | |



Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Fwd: A little web help

1 message

Caroline McCabe <caroline.mccabe@boston.gov>
To: Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Mon, Nov 1, 2021 at 1:33 PM

Does this work?

----- Forwarded message -----

From: Alexander Sturke <alexander.sturke@boston.gov>
Date: Mon, Nov 1, 2021 at 1:32 PM
Subject: Fwd: A little web help
To: Caroline McCabe <caroline.mccabe@boston.gov>

How's this?

Alexander Sturke (pronouns he/him/his)
Director of Communications
Department of Neighborhood Development
617.635.4802 (w)
617.870.3692 (c)

****Are you or someone you know worried about being evicted? The Office of Housing Stability wants you to know that only a Judge can evict you from your home. To learn more about your rights and resources, visit [Boston.gov/eviction-questions](https://boston.gov/eviction-questions).**

The City of Boston is subject to MGL: Chpt.66, Sec.10 Public Records Law. Email sent or received by City employees are subject to these laws. Unless otherwise exempted from the public records law, senders and receivers of City email should presume that the email are subject to release upon request, and to state record retention requirements.

----- Forwarded message -----

From: Alexander Sturke <alexander.sturke@boston.gov>
Date: Tue, Oct 19, 2021 at 3:01 PM
Subject: A little web help
To: James Duffy <james.duffy@boston.gov>

Hey James -

Kelsey and Carol are both out and I'm wondering if you could help me with a couple of edits to the website.

I'm hoping to make updates to the following page: boston.gov/housing/continuum-care-programunder the meetings information, can you add the following blurb?

October 19, 2021

A meeting of the Boston CoC Competition Oversight Committee was held on Monday, October 19, 2021 . Agenda items included an update on new projects submitted in response to the recent Request for Proposals and a review of the CoC's proposed Reallocation, Rating and Ranking Policies for the 2021 competition. [Here](#) is a link to the materials. <please link to the agenda and reallocation documents attached>

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I appreciate your help!

Best,

Alexander

Alexander Sturke (*pronouns he/him/his*)

Director of Communications

Department of Neighborhood Development

617.635.4802 (w)

617.870.3692 (c)

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Caroline McCabe

Housing Development Officer, Supportive Housing Division

City of Boston Department of Neighborhood Development

pronouns: she/her

[617-635-0245](tel:617-635-0245)

www.boston.gov/housing/supportive-housing

4 attachments



Oversight Committee Agenda 10_19.pdf

31K



Boston CoC 2021 reallocation policy docx.pdf

82K



FY21 Boston CoC RENEWAL Project Scoring Tool.docx-2.pdf

91K



FY21 Boston CoC NEW Project Scoring Tool.docx.pdf

98K

MA - 500 Boston CoC Project Review and Selection Process (1E-2)

Attachment Cover Sheet

- (1) the scoring tool your CoC used in your local competition to score new and renewal ranked projects and all project application types—include the entire tool;
- (2) a copy of one scored project application form used by most renewal project applicants that includes the objective criteria and system performance criteria and their respective maximum point values and the actual points your CoC awarded to the project applicant;

and

- (3) final project scores for ranked new and renewal projects (e.g., spreadsheet with all projects and all scores).



Renewal

MA -500 Boston Continuum of Care FY21 **Renewal Project Scoring Tool**

Project Sponsor: _____

Project Name: _____

Project Type: _____

First Reviewer Name: _____ First Reviewer Score: _____

Second Reviewer Name: _____ Second Reviewer Score: _____

| Criteria Topic | Scored Criteria | Criteria Source | Pass / Fail | Notes |
|---|--|-----------------|-------------|-------|
| Project Quality Threshold Criteria; HUD will review information in eLOCCS, APRs, CAS warehouse data, Core Demographics / racial equity dashboard data and information provided from the local HUD CPD field office; including monitoring reports and audit reports, and performance standards on prior grants, and will assess projects using the following criteria on a pass/fail basis: | Applicant's performance met the plans and goals established in the initial application, | | | |
| | Applicant demonstrated all timeliness standards for grants being renewed, including those standards for the expenditure of grant funds that have been met | | | |
| | Applicant's performance in assisting program participants to achieve and maintain independent living and records of success, | | | |
| | Applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site | | | |
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Consensus (Yes/No): _____

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| | 1.b. PSH: Stayed in PH for over 12 months (benchmark 80%) (leavers and stayers) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | | |
| | 2. Increased jobs and income growth through employment by 20% (either through annual assessment or leavers) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | | |
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| | 12. Required match based on project budget \$_____ | Project Application | 6 pts: yes 0 pts: no | | |
| | Was the match reported at end of operating year greater than the minimum required? | | | | |
| | 13. Project returns unobligated funds in FY18 and/or FY19 | eLoccs/ DND budget tracking | 6 pts: 0 - 10% return 0 pts: 11 - 20% | | |
| | 14. Project utilization rate from current project operating year | APR (quarterly average for | 6 pts: 85 -over 100% 3 pt: 84 - 75% 0 pts: under 74% | | |

| | | | | | |
|--|--|--------------------|--|--|--|
| | | operating year) | | | |
|--|--|--------------------|--|--|--|

| Criteria Topic | Scored Criteria | Criteria Source | Point Scale | Weight | Score |
|---|--|--|--|--------|-------|
| Alignment with HUD and Boston CoC system-wide policy priorities | 15. Serving sub-populations in line with HUD and Boston CoC priorities: *Serving chronically homeless households, *Serving homeless youth; *Serving veterans; *Serving people fleeing domestic violence *Serving families with children | Project Application | Up to 6 pts: 1.2 pts for each sub-population served | | |
| | 16. Project practices a Housing First model/low barrier program | Project Application and cross reference with desk review | 6 pts: yes 0 pts: no | | |
| | 17. Does project serve participants who have the following vulnerabilities and severity of needs that may prevent them to enter housing due to the following barriers: *Vulnerability to victimization (history of DV); * Criminal histories *Current or past substance abuse *Very little or no income at entry * Chronic homelessness *Only project of its kind in the CoC, serving a special homeless population/sub-population | APR | Up to 6 pts: 1 pts for each sub-population served | | |

| | | | | | |
|--|--|------------------|--------|--------------|--|
| <p>Racial Equity</p> <p>To answer “yes” under this element, projects must submit evidence or an attestation that satisfies the scoring element criteria.</p> <p>To qualify, the actions must have been taken within the last three years.</p> | 19. The project applicant assessed whether black, indigenous, and other people of color (BIPOC) face barriers to equitably accessing or receiving services from their organization. | City Application | Yes/No | | |
| | 20. The applicant addressed the above assessment or made a written commitment to addressing BIPOC barriers identified, OR no barriers were identified in the assessment above. | City Application | Yes/No | | |
| | 21. The applicant assess whether lesbian, gay, bisexual, transgender, queer, and other people whose genders or sexualities are heteronormative (LGBTQ+) people face barriers to equitably accessing or receiving services from their organization. | City Application | Yes/No | | |
| | 22. Does the project applicant address or made a written commitment to addressing LGBTQ+ barriers identified above, OR no barriers were identified in the assessment above. | City Application | Yes/No | | |
| Total Available 117 | | | | TOTAL | |

*= system performance measurements

New

FY21 CoC Program NOFO

MA-500 Boston CoC New Project Scoring Tool

Sponsor:

Program:

Amount Requested:

Source: CoC Bonus, DV Bonus, Reallocation, Combined Reallocation/CoC Bonus

| New Project Quality Threshold Review (Part 1) | | | | |
|---|--|--|-----------|-------|
| Criteria Topic | Scored Criteria | Criteria Source | Pass/Fail | Notes |
| Project Quality Threshold Criteria | Does the applicant meet the eligibility requirements of the CoC Program and can they provide evidence of eligibility required in the application (e.g., nonprofit documentation). | Project application The agency must identify as a non-profit agency and be able to provide status documentation | | |
| | Does applicant demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and the capacity to administer federal funds. Demonstrating capacity may include a description of the applicant and experience with similar projects and with successful administration of SHP, S+C, or CoC Program funds or other federal funds | Project application; as described in 2B in new project application | | |
| | Applicants must submit the required certifications specified in this NOFO. | Project application. Agency must be able to provide a 5013c certification per the | | |

| | | | | |
|--|--|---|--|--|
| | | NOFO (DND as recipient will sign HUD forms) | | |
| | Does the population to be served must meet program eligibility requirements as described in the Act, the Rule, and Section II.B.11.f of this NOFO | Project application | | |
| | Does the applicant agree to participate in the Boston CoC Coordinated Entry System? | Project Application | | |
| | Does the applicant agree to participate in a local HMIS system, if not a DV provider agency? If applicant is a domestic victim service provider, do they use a comparable database that meets the needs of the local HMIS. | Project Application | | |

If project does not score "pass" in ALL of the above criteria- the project application does not meet minimum CoC and HUD threshold for funding and is not eligible for inclusion in the Boston CoC 2021 application to HUD.

New Project Quality Threshold Review (Part 2)

| Rating Factor for New Project Type | Points Available | Criteria | Number of Points | Notes |
|--|------------------|---|------------------|-------|
| Permanent Housing: Permanent Supportive Housing or Rapid Rehousing | | | | |
| New PSH and RRH projects MUST receive at least 3 out of 4 point for this project type. | 1 | The type of housing proposed including the number of units, will fit to needs of the program participants | | |
| New PSH or RRH Projects that do not receive at least 3 points will be rejected. | 1 | The type of supportive services that will be offered will ensure successful retention in or help to obtain PH | | |
| | 1 | Project has a specific plan to ensuring participants will be individually assessed to obtain the benefits of MS health, social and employment programs, | | |

| | | | | |
|--|---|---|--|--|
| | | which they are eligible for | | |
| | 1 | Participants are assisted to obtain and remain in PH in a manner that fits their needs | | |
| Joint Transitional Housing and Rapid Re-housing | | | | |
| New Joint TH and PH-RRH component project applications must receive at least 4 out of 6 points available for this project type. New Joint TH and PH-RRH component projects that do not receive at least 4 points will be rejected. | 1 | The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants (e.g., two or more bedrooms for families.) | | |
| | 1 | The proposed project will provide enough rapid rehousing assistance to ensure that at any given time a program participant may move from transitional housing to permanent housing. This may be demonstrated by identifying a budget that has twice as many resources for the rapid rehousing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served by the project | | |
| | 1 | The type of supportive services that will be offered to program participants will ensure successful retention or help to obtain | | |

| | | | | |
|--|---|---|--|--|
| | | permanent housing, including all supportive services regardless of funding source | | |
| | 1 | The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply and which meets the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education). | | |
| | 1 | Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of permanent housing). | | |
| | 1 | The project adheres to a housing first model as defined in Section III.B.2.o of this NOFO. | | |
| SSO-Coordinated Entry | | | | |
| New SSO-Coordinated Entry project applications must receive at least 2 out | 1 | The CE system is easily available/reachable for all persons within who are seeking information | | |

| of the 4 points available for this project type. Projects that do not receive at least 2 points will be rejected. | | regarding homelessness assistance. The system must also be accessible for persons with disabilities within the CoC's | | |
|--|---|---|---|--------------------|
| | 1 | There is a strategy for advertising that is designed specifically to reach homeless persons with the highest barriers within the CoC's geographic area. | | |
| | 1 | There is a standardized assessment process. | | |
| | 1 | Ensures program participants are directed to appropriate housing and services that fit their needs. | | |
| Criteria Topic | Scored Criteria | Criteria Source | Points | ¹ Score |
| Agency Past Performance | 1. The proposal demonstrates successful experience working with the eligible target population(s) | project application | 5 pts: yes 0 pts: no | |
| | 2. The proposal demonstrates successful experience working with HUD funded projects including: leasing units, administering rental assistance, providing supportive services, and utilizing HMIS, as applicable to the proposed project | project application | 10 pts: yes 0 pts: no | |
| | 3. The agency has past experience operating similar types of programs and services, working with the subpopulation, and achieving 80% participants maintain PH housing for at least 12 | project application, agency CoC program portfolio | 10 pts: yes 0 pts: no If agency does not have CoC/ESG or comparable | |

¹ Start tally score here (do not include above threshold values in final score tally)

| | | | | |
|-----------------------|---|------------------------------|--|--|
| | months or from exiting RRH or TH, program provides evidence participants achieve increased income | | awards/ projects | |
| | 4. Linkages and collaborations with other resources and providers are leveraged and discussed (evidenced by signed MOUs, contracts) | project application | 2 pts: yes 0 pts: no | |
| | 5. Agency has given back a project/funds/subsidies to serve homeless households to DND without a budget management plan, in the last 5 years | DND monitoring and portfolio | 5 pts: no 0 pts: yes | |
| | | | | |
| Program Design | 6. The project will practice a Housing First/Low Barrier model | project application | 10 pts: yes 0 pts: no | |
| | 7. The proposal describes a management plan and reasonable plan for effective and timely start up of the proposed activities | project application | 5 pts: yes 0 pts: no | |
| | 7a. If RRH, PSH or Joint TH-RRH the proposal describes how the sponsor will manage housing search challenges and quick identification and lease up of physical units for clients. Proposal references existing relationships with property owners, managers, existing units leased by sponsor, PBVs, etc. | project application | 5 pts: yes 0 pt: no | |
| | 7b. Does the PH (PSH, RRH or Joint) project have specific housing units or properties | project application | 10 pts: yes 5 pts: no, but proposal describes | |

| | | | | |
|---|--|---------------------|---|--|
| | identified for participants (i.e. proposing project/sponsor based model using with units already identified)? | | detailed viable unit acquisition strategy 0 pts: no strategy | |
| | 8. The proposed staffing level is adequate to support the project (i.e. for RRH, 1 FTE to max. 30 households; for CH 1 FTE for 15 - 20 households) | project application | 2 pts: yes 0 pts: no | |
| | 9. The proposal includes performance measurements related to housing stability: a) The proposal describes how participants will be assisted to obtain and remain in permanent housing for at least 12 months (if PSH program) b) The proposal describes how participants will be assisted to obtain permanent housing upon exiting a RRH program (RRH program or Joint TH-RRH) | project application | 5 pts: yes 0 pts: no | |
| | 10. The proposal includes performance measurements related to how participants will be assisted to increase both their employment, access to mainstream resources and/or non-employment income and maximize their ability to live independently | project application | 5 pts: yes 0 pts: no | |
| | | | | |
| Subpopulations proposed to serve | 11. PH projects to serve families ONLY (individual projects add 5 pts): does | | 5 pts.- yes | |

| | | | | |
|---|---|---------------------|--|--|
| | proposal describe a detailed relationship and collaboration (past or future) with McKinney-Vento education providers/education liaisons | | | |
| | 12. PH projects to serve families ONLY (individual projects add 5 pts): does proposal describe how the program will partner with local education agencies and how they find / inform / connect homeless families to benefits they qualify for | | 5 pts.-yes | |
| | 13. Other sub-populations priorities: *Veterans * Chronically homeless *Families * Youth *DV | project application | 1 pt for each sub-population (5 max. pts) | |
| | | | | |
| Fiscal Planning and Agency Performance | 14. The project shows a diverse mix of funding or primary reliance on CoC Program (supportive services, leasing, rental assistance etc.) | project application | 10 pts: mix of funding 5 pts: reliance of CoC funds | |
| | 15. The project demonstrates cost effectiveness; use industry standards for matrix= families \$4,000 per year, CH program 1 csmgr per 17 clients, RRH 1 csmgr per 40 - 50 clients per year | project application | 10 pts: Within range 0 pts: Not in range | |
| | 16. Funds requested are reasonable in relationship to stated goals and objectives (review if costs and direct | project application | 5 pts: yes 0 pts: no | |

| | | | | |
|--------------------------------|--|---|-------------------------|--|
| | assistance seem too high or too low to achieve proposed outcomes) | | | |
| | 17. Sponsor/applicant provides match commitments totaling 25% of the HUD funding requested (minus leasing dollars) and demonstrates effective use of the match resources | project application | 2 pts: yes 0 pts: no | |
| | 18. Prioritizes households with the longest time homeless and highest barriers to housing, through the CoCs Coordinated Entry System ² (including CAS ³ when applicable) | project application | 2 pts: yes 0 pts: no | |
| | 19. Agency audit A-133 or supplement external audit has no major findings/"low risk" | project application, agency CoC program portfolio | 2 pts: yes 0 pts: no | |
| | | | | |
| CoC Needs/Gaps Analysis | 20. The proposed project fills a need or gap in the existing homeless assistance system and is not duplicative of other mainstream resources | project application | 5 pts: yes 0 pts: no | |

² The Boston CoC has implemented a Coordinated Entry System to ensure homelessness is rare, brief and non-recurring. The CES framework drives the CoC to systematically prevent or divert people from becoming homeless whenever possible; and if people do become homeless, swiftly connect them to permanent housing with the appropriate level of supports to ensure they remain housed. The CES system within our CoC also complies with HUD's *Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System (CPD-17-01)*.

³ CAS is the Boston CoCs electronic database that "matches" available referrals from the CES system to eligible and prioritized households.

| | | | | |
|--|---|--|--------------------------|--|
| | <p>services from their organization.</p> <p>25. Does the project applicant address or made a written commitment to addressing LGBTQ+ barriers identified above, OR no barriers were identified in the assessment above.</p> | | Yes/No | |
| Leveraging Substance Abuse Treatment and Healthcare Resources (for PSH and RRH Project) | 26. Does project have a commitment in the form of a formal written agreement that includes, at minimum, (1) the value of the commitment and; (2) the dates the healthcare resources will be provided. | | 10 pts: yes 0 pts: no | |
| Leveraging Housing Resources | 27. Does the new project (PSH or RRH) propose to utilize housing subsidies or subsidized housing units not funded through the CoC or ESG programs. | | 10 pts: yes 0 pts: no | |
| <p>The reviewer may assign partial points to each question if proposal semi/partially addressed question/scoring criteria. The maximum points total available points for a PH (PSH, RRH or Joint TH-RRH) Projects = 150; Non-Housing projects (SSO-CE) total available points = 120</p> | | | | |



MA -500 Boston Continuum of Care FY21 Renewal Project Scoring Tool

Project Sponsor: Pine Street Inn

Project Name: REACH Consolidated

Project Type: PH

First Reviewer Name: Caroline McCabe

First Reviewer Score: 91.8

Second Reviewer Name: Adelina Correia

Second Reviewer Score: 91.8

Ex: 91.8 Scored Renewal

| Criteria Topic | Scored Criteria | Criteria Source | Pass / Fail | Notes |
|---|--|-----------------|-------------|-------|
| Project Quality Threshold Criteria; HUD will review information in eLOCCS, APRs, CAS warehouse data, Core Demographics / racial equity dashboard data and information provided from the local HUD CPD field office; including monitoring reports and audit reports, and performance standards on prior grants, and will assess projects using the following criteria on a pass/fail basis: | Applicant's performance met the plans and goals established in the initial application, | | pass | |
| | Applicant demonstrated all timeliness standards for grants being renewed, including those standards for the expenditure of grant funds that have been met | | pass | |
| | Applicant's performance in assisting program participants to achieve and maintain independent living and records of success, | | pass | |
| | Applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site | | pass | |
| | Prioritizes households with the longest time homeless and highest barriers to housing, through the CoCs CE system | | pass | |
| If project does not have a "pass" in ALL of the above criteria, the project application does not meet minimum CoC and HUD threshold for funding and is not eligible for inclusion in the Boston CoC 2021 application to HUD. | | | | |

Consensus (Yes/No): yes

| Criteria Topic | Scored Criteria | Criteria Source | Point Scale | Weight | Score |
|----------------|--|-------------------------------------|--|-----------------------|-------|
| | 1. Exits from RRH and retention in PSH | HMIS, SPM warehouse score card, APR | | | |
| | 1.a. RRH : Exits RRH to PH (benchmark 80%) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | Weight 41% | n/a |
| | 1.b. PSH : % of persons who remained in PSH or exited to PH (benchmark 80%) (stayers & leavers) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | | 12 |
| | 2. Increased jobs and income growth through employment by 20% (either through annual assessment or leavers) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | | 0 |
| | 3. Income growth through other (non-employment) income by 20% (either through annual assessment or leavers) | HMIS, SPM warehouse score card, APR | 12 pts: 100-75% 6 pts: 74-55% 4 pts: 54-25% 0 pts: 24% - 0% | | 4 |
| | 4. Time to Lease Up; avg days from project admit date to date housed-project question 22c - average length of time to housing | HMIS, SPM warehouse score card, APR | 12 pts: 30 day or less 6 pts: 31-60 day 4 pts: 61-180 days 0 pts: over 180 days | | 12 |

| Criteria Topic | Scored Criteria | Criteria Source | Point Scale | Weight | Score |
|---|--|---|--|--------------------|-------|
| HMIS data quality | 6. Personal identifying information error rate | HMIS | 5 pts: 20%-0 0 pts: 21% and above | 0 Weight 46% | 5 |
| | 7. Universal data elements error rate | HMIS | 5 pts: 20%-0 0 pts: 21% and above | | 5 |
| | 8. Income and housing data quality | HMIS | 5 pts: above 80% 0 pts: below 79% | | 5 |
| Project financial performance based on CoC/DND monitoring and invoicing | 9. Type of housing project proposal; RRH, PSH, Joint TH-RRH | Project application | 6: PSH 3: RRH/Joint TH-PH | | 6 |
| | 10. Invoicing- submit invoices- on time, with all back up materials, and for eligible activities | CoC monitoring report/ Agency external audit | 6 pts: invoices regularly submitted on time 3 pts: usually on time, complete with few errors 1 pt: submit quarterly/not monthly | | 6 |
| | 11. Is project efficient with funds- do calculation of cost per person served in each project (include HUD funds and match total and compare standard practice: CH 1 FTE for 15-20 households, families \$4,000 per year, RRH 1 FTE to 20-30 clients per yr. | APR, Project Application Budget | 6 pts: if standard is met and funding is equal to or less than per person/family ratio 0 pts: if not met and more funds per person/family | | 3 |
| | 12. Required match based on project budget <u>\$87,516.75</u> Was the match reported at end of operating year greater than the minimum required? | Project Application | 6 pts: yes 0 pts: no | | 6 |
| | 13. Project returns unobligated funds in FY18 and/or FY19 | eLoccs/ DND budget tracking | 6 pts: 0 - 10% return 0 pts: 11 - 20% | | 6 |

| | | | | | |
|--|--|--|--|--|---|
| | 14. Project utilization rate from current project operating year | Score card APR (quarterly average for operating year) | 6 pts: 85 -over 100% 3 pt: 84 - 75% 0 pts: under 74% | | 6 |
|--|--|--|--|--|---|

| Criteria Topic | Scored Criteria | Criteria Source | Point Scale | Weight | Score |
|---|--|--|--|--------|-------|
| Alignment with HUD and Boston CoC system-wide policy priorities | 15. Serving sub-populations in line with HUD and Boston CoC priorities: *Serving chronically homeless households, *Serving homeless youth; *Serving veterans; *Serving people fleeing domestic violence *Serving families with children | Project Application | Up to 6 pts: 1.2 pts for each sub-population served | | 4.8 |
| | 16. Project practices a Housing First model/low barrier program | Project Application and cross reference with desk review | 6 pts: yes 0 pts: no | | 6 |
| | 17. Does project serve participants who have the following vulnerabilities and severity of needs that may prevent them to enter housing due to the following barriers: *Vulnerability to victimization (history of DV); * Criminal histories *Current or past substance abuse *Very little or no income at entry * Chronic homelessness *Only project of its kind in the CoC, serving a special homeless | APR | Up to 6 pts: 1 pts for each sub-population served | | 5 |

| | | | | | |
|--|--|------------------|--------|--------------|-------------|
| | population/sub-population | | | | |
| <p>Racial Equity</p> <p>To answer “yes” under this element, projects must submit evidence or an attestation that satisfies the scoring element criteria.</p> <p>To qualify, the actions must have been taken within the last three years.</p> | 19. The project applicant assessed whether black, indigenous, and other people of color (BIPOC) face barriers to equitably accessing or receiving services from their organization. | City Application | Yes/No | No | |
| | 20. The applicant addressed the above assessment or made a written commitment to addressing BIPOC barriers identified, OR no barriers were identified in the assessment above. | City Application | Yes/No | No | |
| | 21. The applicant assess whether lesbian, gay, bisexual, transgender, queer, and other people whose genders or sexualities are heteronormative (LGBTQ+) people face barriers to equitably accessing or receiving services from their organization. | City Application | Yes/No | No | |
| | 22. Does the project applicant address or made a written commitment to addressing LGBTQ+ barriers identified above, OR no barriers were identified in the assessment above. | City Application | Yes/No | No | |
| Total Available 117 | | | | TOTAL | 91.8 |

*= system performance measurements

MA- 500 Boston CoC 20121Project Listing

| Type | Grantee Name | Project Name | Award | Rank | Score | Tiering Tally |
|---|---|--|-----------------|------|-------|------------------|
| Tier 1 | | | | | | |
| Tier 1 - Priority I. Renewals- CoC Operational Grants | | | | | | |
| HMIS | Boston CoC | HMIS Consolidated | \$ 524,480.00 | 1 | 100 | \$ 524,480.00 |
| HMIS | Boston CoC | HMIS III | \$ 500,000.00 | 2 | 100 | \$ 1,024,480.00 |
| SSO-CES | Boston CoC | Coordinated Access Project Expansion (CAPE) | \$ 271,814.00 | 3 | 100 | \$ 1,296,294.00 |
| HMIS | Boston CoC | HMIS Bonus 2021 | \$ 197,398.00 | 4 | 100 | \$ 1,593,692.00 |
| SSO-CES | HomeStart | Pathways Navigation SSO-CE | \$ 373,558.00 | 5 | 100 | \$ 1,967,250.00 |
| SSO-CES | HomeStart | Pathways Navigation Expansion SSO-CE | \$ 410,524.00 | 6 | 100 | \$ 2,377,774.00 |
| SSO-CES | St. Francis House | Pathways + Income SSO-CE | \$ 389,879.00 | 7 | 100 | \$ 2,767,653.00 |
| Tier 1- Priority II. Renewals- PSH | | | | | | |
| PH | HomeStart | Consolidated Chronic Leasing | \$ 2,178,019.00 | 8 | 98.6 | \$ 4,945,672.00 |
| PH | Heading Home | Homeless to Housing | \$ 249,169.00 | 9 | 93.6 | \$ 5,194,841.00 |
| RA | MBHP | 2000 PRA | \$ 77,698.00 | 10 | 92.8 | \$ 5,272,539.00 |
| RA | MBHP | Consolidated SRA | \$ 3,545,252.00 | 11 | 92.6 | \$ 8,817,791.00 |
| PH | Pine Street Inn | REACH Consolidated | \$ 1,898,198.00 | 12 | 91.8 | \$ 10,715,989.00 |
| PH | Kit Clark Senior Services | Walnut Community Housing | \$ 81,390.00 | 13 | 90.6 | \$ 10,797,379.00 |
| PH | Pine Street Inn | Long Term Stayers Consolidated | \$ 1,734,786.00 | 14 | 89.8 | \$ 12,532,165.00 |
| RA | MBHP | 1999 Tier 1 PRA | \$ 114,089.00 | 15 | 89.6 | \$ 12,646,254.00 |
| RA | MBHP | Consolidated TRA | \$ 8,731,803.00 | 16 | 89 | \$ 21,378,057.00 |
| RA | MBHP | 2005 PRA | \$ 65,343.00 | 17 | 87.6 | \$ 21,443,400.00 |
| RA | MBHP | 2006 SRA | \$ 87,094.00 | 18 | 86.6 | \$ 21,530,494.00 |
| PH | HomeStart | The Welcome Home Project | \$ 791,142.00 | 19 | 85.8 | \$ 22,321,636.00 |
| PH | Pine Street Inn | First Home Consolidated Expansion | \$ 848,542.00 | 20 | 84.8 | \$ 23,170,178.00 |
| PH | HomeStart | The Apartment Connection | \$ 2,173,944.00 | 21 | 83.6 | \$ 25,344,122.00 |
| PH | Bay Cove Human Services | Home At Last | \$ 737,744.00 | 22 | 83.6 | \$ 26,081,866.00 |
| RA | MBHP | SRO Program | \$ 423,330.00 | 23 | 83.6 | \$ 26,505,196.00 |
| PH | HomeStart | Chronic Stabilization Program | \$ 221,371.00 | 24 | 83.6 | \$ 26,726,567.00 |
| RA | MBHP | 1999 Tier 2 PRA | \$ 392,060.00 | 25 | 81.6 | \$ 27,118,627.00 |
| PH | Mass. Housing & Shelter Alliance | Home and Healthy for Good | \$ 574,933.00 | 26 | 81.4 | \$ 27,693,560.00 |
| PH | Pine Street Inn | Chronically Homeless Housing | \$ 490,288.00 | 27 | 81 | \$ 28,183,848.00 |
| PH | Pine Street Inn | Place Me Home Chronic Housing | \$ 664,609.00 | 28 | 78.8 | \$ 28,848,457.00 |
| PH | New England Center and Homes for Veterans | Veterans Welcome Home | \$ 339,949.00 | 29 | 74.4 | \$ 29,188,406.00 |
| PH | Mass. Housing & Shelter Alliance | Home Front | \$ 299,256.00 | 30 | 70.6 | \$ 29,487,662.00 |
| Tier 1- Priority III. New DV Bonus Projects for 2021 | | | | | | |
| DV-RRH | Casa Myrna Vazquez | STEP Expansion | \$ 317,075.00 | 31 | 128 | \$ 29,804,737.00 |
| DV-Joint TH-RRH | Casa Myrna Vazquez | Joint TH-PH-RRH | \$1,265,787.00 | 32 | 126 | \$ 31,070,524.00 |
| DV-Joint TH-RRH | Elizabeth Stone House | Joint TH-PH-RRH Expansion | \$ 671,800.00 | 33 | 116 | \$ 31,742,324.00 |
| Tier 1- Priority IV. Renewals- RRH & Joint TH-RRH | | | | | | |
| DV-RRH | Casa Myrna Vazquez | Survivors Transitioning to Empowerment Program (STEP) | \$ 340,480.00 | 34 | 84.6 | \$ 32,082,804.00 |
| RRH | FamilyAid Boston | Home Advantage Collaborative | \$ 860,549.00 | 35 | 78 | \$ 32,943,353.00 |
| RRH | Pine Street Inn | Housing Works Partnership Consolidated | \$ 2,018,182.00 | 36 | 73.8 | \$ 34,961,535.00 |
| Tier 2 | | | | | | |
| Tier II- Priority I. Renewals - RRH & Joint TH-RRH | | | | | | |
| RRH | Pine Street Inn | Housing Works Partnership Consolidated | \$ 102,194.00 | 36 | 73.8 | \$ 35,063,729.00 |
| DV-RRH | Casa Myrna Vazquez | Survivors Transitioning to Empowerment Program (STEP II) | \$ 863,272.00 | 37 | 70.6 | \$ 35,927,001.00 |
| RRH | Bridge Over Troubled Waters, Inc. | Youth Housing Pathways Program | \$ 703,738.00 | 38 | 70 | \$ 37,375,197.00 |
| DV-Joint TH-RRH | Elizabeth Stone House | Joint TH-PH-RRH | \$ 744,458.00 | 39 | 67.6 | \$ 36,671,459.00 |
| Tier 2 - Priority II - New CoC Bonus- PSH or RRH | | | | | | |
| PSH | St. Francis House | Constitution Inn PSH | \$1,456,577.00 | 40 | 135 | \$ 38,831,774.00 |
| PSH | CLT | Master Leasing PSH | \$ 268,455.00 | 41 | 113 | \$ 39,100,229.00 |
| Untiered Projects | | | | | | |
| RRH | Bridge Over Troubled Waters | Bridge RRH+ Replacement | \$1,226,034.00 | - | | |
| TH-RRH | Bridge Over Troubled Waters | Bridge TH-RRH+ Replacement | \$443,502.00 | - | | |
| RRH | Justice Resource Institute | JRI RRH+ Replacement | \$248,580.00 | - | | |
| PSH | Metro Housing Boston | FAST Replacement | \$ 659,470.00 | - | | |
| PSH | The Home for Little Wanderers | Roxbury Village Replacement | \$ 141,518.00 | - | | |
| Planning | Boston CoC | Planning 2021 | \$1,130,419 | - | | \$ 42,949,752.00 |
| Rejected Projects | | | | | | |
| SSO-CES | Project Home | RRH for Families | \$0.00 | n/a | n/a | |

| | | |
|-------------------|----|--------------|
| Tier 1 | \$ | 34,961,535 |
| Tier 2 | | |
| YHDP | \$ | 2,719,104 |
| ARD | \$ | 34,961,535 |
| Bonus | \$ | 1,884,032 |
| DV Bonus | \$ | 2,254,662.00 |
| Planning | | \$1,130,419 |
| total tiered | \$ | 39,100,229 |
| total application | \$ | 42,949,752 |

MA- 500 Boston CoC Public Posting – Projects Rejected-Reduced (1E-5)

Attachment Cover Sheet

Examples of acceptable evidence include:

- ✓ individual written notifications (e.g., email);
- a single email notification listing applicant projects that your CoC reduced or rejected;
- the final New and Renewal Project Listings posted publicly with email notification evidence that project applicants were notified of availability on the website (this must clearly indicate public posting 15 days before HUD's CoC Program Competition submission deadline).



Rejected

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

CoC 2021 new project application: status update

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Wed, Oct 27, 2021 at 11:06 AM

To: Christine Dixon <cdixon@prohope.org>, Natasha Wright <nwright@prohope.org>

Cc: Laila Bernstein <laila.bernstein@boston.gov>

Bcc: Adelina Correia <adelina.correia@boston.gov>

Good morning Christine and Natasha,

I'm writing to follow up on Laila's earlier voice mail message to Christine. I want to thank you for your recent application under DND's Request for Proposals for New Projects under the CoC 2021 competition.

Regrettably, we had far more applications for CoC Bonus than funds available and we will not be including Project Hope's RRH proposal in the 2021 CoC application to HUD.

Please note that your application was incomplete and we did not receive all of the required parts, including the Project Summary Form (Appendix D). Additionally, it was unclear if the project as described was eligible for this CoC funding. The target population described seemed eligible for a homelessness prevention intervention, rather than a Rapid Rehousing resource. I'm glad to set up a call to explore other funding options that might be a better fit for this population; please let me know if that's of interest.

We truly appreciate your creativity and collaboration in helping to support Boston's most vulnerable families and we look forward to continued partnership.

All the best,
Katie

Katie Cahill-Holloway

Senior Development Officer for Supportive Housing

City of Boston | Massachusetts

Department of Neighborhood Development

Supportive Housing Division

26 Court Street, 8th Floor

Boston, MA 02108

Tel: 617-635-0253

Fax: 617-635-0383

katie.cahill-holloway@boston.gov

<https://www.boston.gov/housing/continuum-care-program>





Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

CoC 2021: new project applications for DV bonus: status update

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Fri, Oct 29, 2021 at 11:24 AM

To: Stephanie Brown <sbrown@casamyrna.org>, Cesia Sanchez <csanchez@casamyrna.org>

Cc: Caroline McCabe <caroline.mccabe@boston.gov>, Laila Bernstein <laila.bernstein@boston.gov>

hi stephanie and cesia,

Thank you for your recent applications under DND's Request for Proposals for New Projects under the CoC 2021 competition. We are pleased to confirm that we will include the following new project applications in our overall CoC application to HUD:

- STEP Rapid Rehousing Consolidation and Expansion
- Casa Myrna Joint TH-RRH project

Both projects will request DV Bonus as the funding source.

Please note that we received more DV Bonus requests than funding available, so we are requesting that you revise your requests downward to a total amount of \$1,582,862. Casa Myrna is free to determine how to adjust the project budget(s) to fall within the allotted budget. For the purposes of public posting, the RRH expansion budget was kept at the amount requested, but there is still time to adjust that if you decide to do so.

It is critical that you make your needed adjustments by Wednesday, November 3 to allow time for Caroline to create the application in esnaps.

Please do not hesitate to contact me or Caroline if you have any questions and we are so pleased to work with you to submit this application on behalf of survivors in the Boston CoC.

best,
katie

Katie Cahill-Holloway**Senior Development Officer for Supportive Housing**

City of Boston | Massachusetts

Department of Neighborhood Development

Supportive Housing Division

26 Court Street, 8th Floor

Boston, MA 02108

Tel: 617-635-0253

Fax: 617-635-0383

katie.cahill-holloway@boston.gov<https://www.boston.gov/housing/continuum-care-program>



Reduced

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

CoC 2021: new project application for DV bonus- status update

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Fri, Oct 29, 2021 at 11:27 AM

To: Nancy Owens-Hess <nghess@stonehouseinc.org>, Jim May <jmay@stonehouseinc.org>

Cc: Adelina Correia <adelina.correia@boston.gov>, Laila Bernstein <laila.bernstein@boston.gov>

Good morning Nancy and Jim,

Thank you for your recent application under DND's Request for Proposals for New Projects under the CoC 2021 competition. We are pleased to confirm that we will include the following new project application in our overall CoC application to HUD:

-Elizabeth Stone House Joint TH-RRH Expansion project

DV Bonus will be requested as the funding source.

Please note that we received more DV Bonus requests than funding available, so we are requesting that you revise your request downward to a total amount of \$671,800. Stone House is free to determine how to adjust the project budget to fall within the allotted budget.

It is critical that you make your needed adjustments by Wednesday, November 3rd to allow time for Adelina to create the application in esnaps.

Please do not hesitate to contact me or Adelina if you have any questions and we are so pleased to work with you to submit this application on behalf of survivors in the Boston CoC.

best,
katie

Katie Cahill-Holloway
Senior Development Officer for Supportive Housing
City of Boston | Massachusetts
Department of Neighborhood Development
Supportive Housing Division
26 Court Street, 8th Floor
Boston, MA 02108
Tel: 617-635-0253
Fax: 617-635-0383
katie.cahill-holloway@boston.gov
<https://www.boston.gov/housing/continuum-care-program>



B *Reduced*

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

CoC 2021 new project application: status and follow up

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Fri, Oct 29, 2021 at 12:52 PM

To: Iva Comey <icomey@commonwealthandtrust.org>, Noah Frigault <nfrigault@commonwealthandtrust.org>

Cc: Laila Bernstein <laila.bernstein@boston.gov>, Laura Rivera-Davis <laura.rivera-davis@boston.gov>

Good afternoon Iva and Noah,

Thank you for your recent application under DND's Request for Proposals for New Projects under the CoC 2021 competition and for your time today to discuss the proposed project. As discussed, we are pleased to confirm that we are interested in including the following new project application in our overall CoC application to HUD:

-Commonwealth Land Trust - Master Lease PSH

CoC Bonus will be requested as the funding source.

However, as discussed on the call, we received far more CoC Bonus requests than funding available, so we are asking that you revise your request downward to a total amount of \$268,455. We understand that you want to evaluate whether the project makes sense at this reduced funding level with your internal team and that you will circle back to us on Monday with a decision. Should you decide to move forward, it is critical that you make your needed adjustments by Wednesday, November 3 to allow time for staff to create the application in esnaps.

Please do not hesitate to contact me if you have any questions and we are so pleased that you are considering partnering with us on this important application on behalf of Boston's most vulnerable populations.

Best,
Katie

Katie Cahill-Holloway
Senior Development Officer for Supportive Housing
City of Boston | Massachusetts
Department of Neighborhood Development
Supportive Housing Division
26 Court Street, 8th Floor
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Fax: 617-635-0383
katie.cahill-holloway@boston.gov
<https://www.boston.gov/housing/continuum-care-program>





Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

CoC 2021: new project application status update and follow up

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Fri, Oct 29, 2021 at 3:39 PM

To: Karen LaFrazia <klafrazia@stfranchishouse.org>, Andrea Ryan-Farina <Afarina@stfranchishouse.org>

Cc: Laila Bernstein <laila.bernstein@boston.gov>

Bcc: Gina Schaak <gschaak@tacinc.org>

Good afternoon Karen and Andrea,

Thank you for your recent response to DND's Request for Proposals for New Projects under the CoC 2021 competition and for your time on today's call to discuss needed revisions. We are pleased to confirm that we will include the following new project application in our overall CoC application to HUD:

-St. Francis House - Constitution Inn Permanent Supportive Housing

CoC Bonus will be requested as the funding source.

As discussed, we received far more CoC Bonus requests than funding available, so we are requesting that you revise your request downward to a total amount of \$1,456,577. St. Francis House is free to determine how to adjust the project budget to fall within the allotted budget. Please note that some ineligible costs are presented, specifically security costs for the site. Please note that HUD does not allow rental assistance projects to carry an operating line and security is classified as such, so that expense should be removed as you rework your budget.

It is critical that you make your needed adjustments by Wednesday, November 3 to allow time for staff to create the application in esnaps.

Please do not hesitate to contact me if you have any questions and we are so pleased to work with you to submit this exciting application on behalf of persons experiencing homelessness in the Boston CoC.

All the best,
Katie

Katie Cahill-Holloway**Senior Development Officer for Supportive Housing**

City of Boston | Massachusetts

Department of Neighborhood Development

Supportive Housing Division

26 Court Street, 8th Floor

Boston, MA 02108

Tel: 617-635-0253

Fax: 617-635-0383

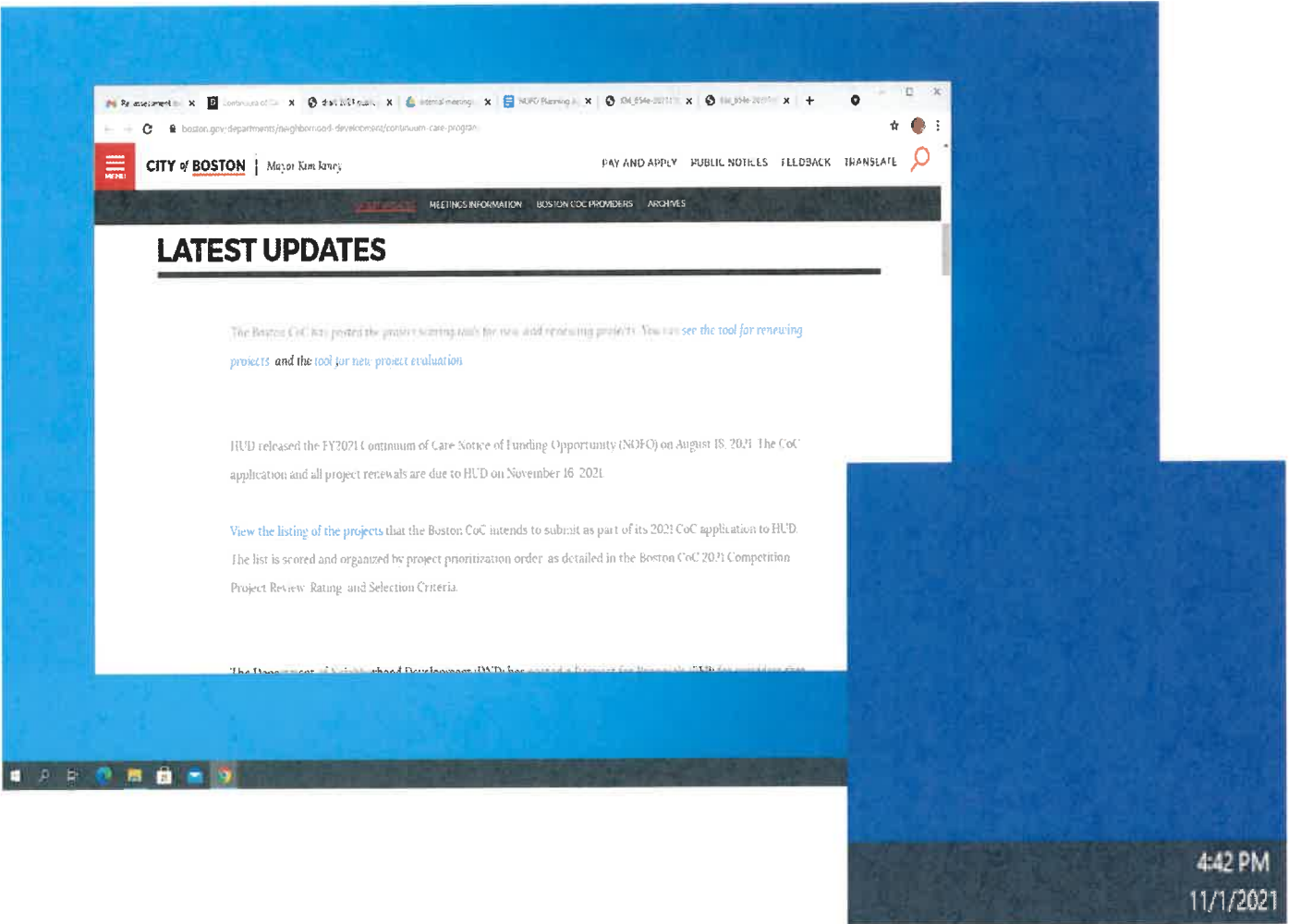
katie.cahill-holloway@boston.gov<https://www.boston.gov/housing/continuum-care-program>

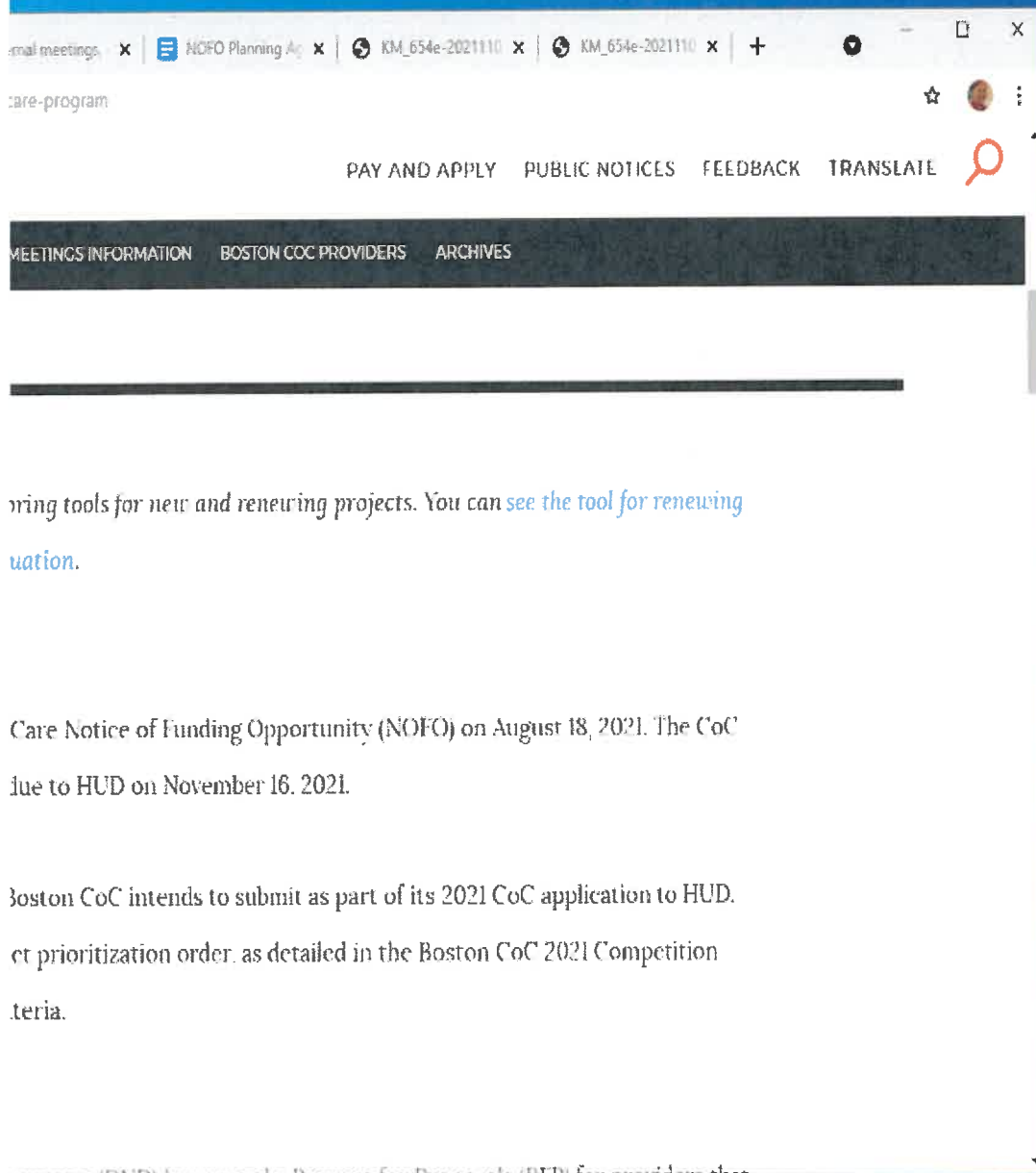
MA -500 Boston CoC -Public Posting – Projects Accepted (1E-5a)

Attachment Cover Sheet

Examples of acceptable evidence include:

- individual written notifications (e.g., email);
- a single email notification listing applicant projects that your CoC reduced or rejected;
- the final New and Renewal Project Listings posted publicly with email notification evidence that project applicants were notified of availability on the website (this must clearly indicate public posting 15 days before HUD's CoC Program Competition submission deadline).





ring tools for new and renewing projects. You can see [the tool for renewing](#)
[uation.](#)

Care Notice of Funding Opportunity (NOFO) on August 18, 2021. The CoC
due to HUD on November 16, 2021.

Boston CoC intends to submit as part of its 2021 CoC application to HUD.
et prioritization order, as detailed in the Boston CoC 2021 Competition
teria.

opment (DND) has posted a Request for Proposals (RFP) for providers that



Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

MA-500 Boston CoC: projects to be included in the 2021 CoC application

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Fri, Oct 29, 2021 at 4:17 PM

To: Alexia Layne-Lomon <alexia.laynelomon@bostonabcd.org>, Carla Richards <carla.richards@bostonabcd.org>, Patricia Sullivan <patricia.sullivan@bostonabcd.org>, John Drew <john.drew@bostonabcd.org>, acassid@advocates.org, Valerie Frias <frias@allstonbrightoncdc.org>, max@atask.org, cristina@atask.org, dawn@atask.org, ayala.livny.consulting@gmail.com, mccjen@comcast.net, cacoey@protonmail.com, bcassidy@baycove.org, bsprague@baycove.org, jrihbany@baycove.org, nmahan@baycove.org, rgarvey@baycove.org, jespinala@baycove.org, ajarvis@baycove.org, sponte@baycove.org, eriveracarrasco@baycove.org, jsalvador@baycove.org, annmaas@yahoo.com, mp.connelly1@comcast.net, joconnell@bhchp.org, jbogdanski@bhchp.org, lsmith@bhchp.org, pobhalla@bhchp.org, sarmstrong@bhchp.org, mmayer@bhchp.org, diwilliams@bhchp.org, Barbara.Sheerin@bostonhousing.org, david.gleich@bostonhousing.org, gail.livingston@bostonhousing.org, eileen.obrien@bmc.org, kate.walsh@bmc.org, kip.langelo@bmc.org, christian.vasquez@bmc.org, CGrier@bphc.org, dpaul@bphc.org, DThomas@bphc.org, gthomas@bphc.org, mway@brm.org, npitts@bphc.org, tjamison@bphc.org, brubinstein@brm.org, jsamaan@brm.org, laura@breaktime.org, connor@breaktime.org, michael@breaktime.org, ASnyder@bridgeotw.org, EJackson@bridgeotw.org, dhughes@brookviewhouse.org, jsantana@casamyrna.org, sbrown@casamyrna.org, vrosemond@casamyrna.org, manuel.duran@casanuevavida.org, zaida.estremera@casanuevavida.org, mirta_rodriguez@ccab.org, richard_freitas@ccab.org, stephen_fulton@ccab.org, kevin_mackenzie@ccab.org, beth_chambers@ccab.org, jsinner@csrox.org, smccroom@csrox.org, eprice@csrox.org, cakkers@csrox.org, gdavis@csrox.org, stgold@csrox.org, christine@circleofhopeonline.org, sheila.dillon@boston.gov, quincey.roberts@boston.gov, catherine.miranda@boston.gov, katie.forde@boston.gov, dana.mendes@boston.gov, vielkis.gonzalez@boston.gov, adelina.correia@boston.gov, courtney.curran@boston.gov, James Greene <james.j.greene@boston.gov>, katie.cahill-holloway@boston.gov, laila.bernstein@boston.gov, laura.rivera-davis@boston.gov, shstaff@boston.gov, ian.gendreau@boston.gov, jennifer.flynn@boston.gov, beatriz.moreira@boston.gov, rhonda.taylor@boston.gov, robert.santiago@boston.gov, Robert.turner@boston.gov, icodey@commonwealthlandtrust.org, jmarquez@commonwealthlandtrust.org, swilkins@commonwealthlandtrust.org, eranger@commonwealthlandtrust.org, kkelly@commonwealthlandtrust.org, psanborn@cogincorp.com, ffaria@comteam.org, pgeronde@dimock.org, bjwalker@dimock.org, ptalbert@dimock.org, smcbride@dimock.org, tmorris@dimock.org, deborah.s.jones@state.ma.us, jeffrey.chasse@state.ma.us, Amanda@commoncathedral.org, kwales@eliotchs.org, mdowd@eliotchs.org, hwiedenhofer@eliotchs.org, CJameslewis10@gmail.com, jmay@elizabethstone.org, jpires@elizabethstone.org, nhess@elizabethstone.org, kfagan@elizabethstone.org, susan@emmausinc.org, rgair@empathways.org, ccouey@empathways.org, pdrisko@esacboston.org, lcherry@esacboston.org, mcaughey@esacboston.org, annieg@familyaidboston.org, larrys@familyaidboston.org, mikaylaf@familyaidboston.org, L Rogers@helpfbms.org, ybautista@fenwayhealth.org, klascoe@fenwayhealth.org, chriswomendez@hotmail.com, finexhouse@yahoo.com, r_lindbert@hotmail.com, hross@gbls.org, jbowman@gbls.org, llank@gbls.org, llown-klein@gbls.org, mmalherbe@gbls.org, zcronin@gbls.org, dferrier@headinghomeinc.org, lkapan@headinghomeinc.org, mamshoff@headinghomeinc.org, kdougert@headinghomeinc.org, rfoster@headinghomeinc.org, vtonneson@headinghomeinc.org, lwright@hearth-home.org, mhinderlie@hearth-home.org, mshields@hearth-home.org, nbernard@hearth-home.org, wporcello@hearth-home.org, emarra@hearth-home.org, beltonhead@healthcarewithoutwalls.org, symoore@hild-selfhelp.org, gellenberg@hild-selfhelp.org, kcarney@hild-selfhelp.org, sholman@thhome.org, maddie@homebaseccc.org, lhayes@homesforfamilies.org, chandler@homestart.org, mulligan@homestart.org, pritchard@homestart.org, vacheresse@homestart.org, apond@jri.org, mdagnall@jri.org, mdemarco@jri.org, mskehan@jri.org, sbuoncuore@jri.org, elizabethwinston@justastart.org, SUSAN.HORNER@mainstayliving.org, marisa@mahomeless.org, robyn@mahomeless.org, candice@mahomeless.org, Brian.Neeley@metrohousingboston.org, chris.norris@metrohousingboston.org, John.Hillis@mbhp.org, Olivia.Peeps@metrohousingboston.org, susan.nohl@mbhp.org, jfinn@mhsa.net, jtavon@mhsa.net, kwild@mhsa.net, mregueiro@mhsa.net, nmcgeoghegan@mhsainc.org, fpenney@mhsainc.org, bmills@mhsainc.org, mwhite@mhsainc.org, nparker@mtwyouth.org, gbrueck-cassoli@mtwyouth.org, alexandra.pastore@nechv.org, andrew.mccawley@nechv.org, kevin.ward@nechv.org, Marta.budu-arthur@nechv.org, Meredith.Christensen@nechv.org, lena.asmar@nechv.org, stacey.borden@newbeginningsreentryservices.org, Leon.rock@gmail.com, gcasey@newleasehousing.org, tpihcik@newleasehousing.org, NicholasandMattieCFH@outlook.com, Brian.Kindorf@npcm.com, mtorres@northsuffolk.org, pschindler@northsuffolk.org, angela.giordano@pinestreetinn.org, April.Stevens@pinestreetinn.org, Leo.Adorno@pinestreetinn.org, Lyndia.downie@pinestreetinn.org, maria.davis@pinestreetinn.org, Meghan.Goughan@pinestreetinn.org, michael.andrick@pinestreetinn.org, Timothy.Barrett@pinestreetinn.org, deb.putnam@pinestreetinn.org, ed.cameron@pinestreetinn.org, cfrangolini@pinestreetinn.org, Ahaile@prohope.org, cdixon@prohope.org, cmcauliffe@prohope.org, dbeechman@prohope.org, emaglio@prohope.org, khorsley@prohope.org, leonard@prohope.org, lreilly@prohope.org, nwright@prohope.org, phanson@projectplace.org, amanning@projectplace.org, skenney@projectplace.org, thehub@mycityrestored.org, scollins@roxburyyouthworks.org, bmcelduff@roxburyprep.org, fsmith@sojournerhouseboston.org, Afarina@stfranchishouse.org, CSinger@stfranchishouse.org, klafrazia@stfranchishouse.org,

abeloin@stfranchouse.org, mphilips@stfranchouse.org, jbeckler@stmaryscenterma.org, asteel@stmaryscenterma.org, CStLouis@stmaryscenterma.org, ngalva@stmaryscenterma.org, hgarcia@stmaryscenterma.org, Cynthia.St.Pierre@massmail.state.ma.us, linn.torto@state.ma.us, claire.makrinikolas@state.ma.us, amannmclellan@tacinc.org, gschaak@tacinc.org, Allison Singer <allison.singer@boston.gov>

Good afternoon Boston CoC stakeholders,

Attached please find the listing of projects that the Boston CoC intends to submit as part of its 2021 Continuum of Care application to HUD, which is due on November 16, 2021. Project sponsors that submitted renewal applications for existing CoC programs were selected for inclusion in the overall application to HUD. Please note that in addition to the renewals, this year's application includes new projects funded through CoC Bonus, DV Bonus and reallocated funds. If selected for funding by HUD, these new projects will support investments in permanent supportive housing, rapid rehousing and transitional housing opportunities for survivors of domestic violence, dating violence, human trafficking, stalking and sexual assault, and HMIS and Coordinated Entry. The CoC also intends to submit a new project application for CoC planning for which it is eligible.

The list is scored and organized by project prioritization order as detailed in the Boston CoC 2021 Competition Project Review, Rating and Selection Criteria. All new and renewal projects have been assessed for threshold requirements. Project budgets are still being finalized for new and reallocation projects and those may change before submission of the final application but those changes will not shift the project placements. Please continue to follow our webpage for updates at <https://www.boston.gov/housing/continuum-care-program>

Please do not hesitate to reach out to your DND Development Officer if you have any questions regarding your project application and thank you for your continued partnership in this critical work.

Best,
Katie

Katie Cahill-Holloway

Senior Development Officer for Supportive Housing

City of Boston | Massachusetts

Department of Neighborhood Development

Supportive Housing Division

26 Court Street, 8th Floor

Boston, MA 02108

Tel: 617-635-0253

Fax: 617-635-0383

katie.cahill-holloway@boston.gov

<https://www.boston.gov/housing/continuum-care-program>



draft 2021 public posting 10292021 MA- 500 Accepted Tiered Scored and Rejected Scored Projects.xlsx - tiering-4.pdf

73K

MA- 500 Boston CoC 20121Project Listing

| Type | Grantee Name | Project Name | Award | Rank | Score | Tiering Tally |
|---|---|--|-----------------|------|-------|------------------|
| Tier 1 | | | | | | |
| Tier 1 - Priority I. Renewals- CoC Operational Grants | | | | | | |
| HMIS | Boston CoC | HMIS Consolidated | \$ 524,480.00 | 1 | 100 | \$ 524,480.00 |
| HMIS | Boston CoC | HMIS III | \$ 500,000.00 | 2 | 100 | \$ 1,024,480.00 |
| SSO-CES | Boston CoC | Coordinated Access Project Expansion (CAPE) | \$ 271,814.00 | 3 | 100 | \$ 1,296,294.00 |
| HMIS | Boston CoC | HMIS Bonus 2021 | \$ 297,298.00 | 4 | 100 | \$ 1,593,692.00 |
| SSO-CES | HomeStart | Pathways Navigation SSO-CE | \$ 373,558.00 | 5 | 100 | \$ 1,967,250.00 |
| SSO-CES | HomeStart | Pathways Navigation Expansion SSO-CE | \$ 377,774.00 | 6 | 100 | \$ 2,377,774.00 |
| SSO-CES | St. Francis House | Pathways + Income SSO-CE | \$ 389,879.00 | 7 | 100 | \$ 2,767,653.00 |
| Tier 1- Priority II. Renewals- PSH | | | | | | |
| PH | HomeStart | Consolidated Chronic Leasing | \$ 2,178,019.00 | 8 | 98.6 | \$ 4,945,672.00 |
| PH | Heading Home | Homeless to Housing | \$ 249,169.00 | 9 | 93.6 | \$ 5,194,841.00 |
| RA | MBHP | 2000 PRA | \$ 77,698.00 | 10 | 92.8 | \$ 5,272,539.00 |
| RA | MBHP | Consolidated SRA | \$ 3,545,252.00 | 11 | 92.6 | \$ 8,817,791.00 |
| PH | Pine Street Inn | REACH Consolidated | \$ 1,898,198.00 | 12 | 91.8 | \$ 10,715,989.00 |
| PH | Kit Clark Senior Services | Walnut Community Housing | \$ 81,390.00 | 13 | 90.6 | \$ 10,797,379.00 |
| PH | Pine Street Inn | Long Term Stayers Consolidated | \$ 1,734,786.00 | 14 | 89.8 | \$ 12,532,165.00 |
| RA | MBHP | 1999 Tier 1 PRA | \$ 114,089.00 | 15 | 89.6 | \$ 12,646,254.00 |
| RA | MBHP | Consolidated TRA | \$ 8,731,803.00 | 16 | 89 | \$ 21,378,057.00 |
| RA | MBHP | 2005 PRA | \$ 65,343.00 | 17 | 87.6 | \$ 21,443,400.00 |
| RA | MBHP | 2006 SRA | \$ 87,094.00 | 18 | 86.6 | \$ 21,530,494.00 |
| PH | HomeStart | The Welcome Home Project | \$ 791,142.00 | 19 | 85.8 | \$ 22,321,636.00 |
| PH | Pine Street Inn | First Home Consolidated Expansion | \$ 848,542.00 | 20 | 84.8 | \$ 23,170,178.00 |
| PH | HomeStart | The Apartment Connection | \$ 2,173,944.00 | 21 | 83.6 | \$ 25,344,122.00 |
| PH | Bay Cove Human Services | Home At Last | \$ 737,744.00 | 22 | 83.6 | \$ 26,081,866.00 |
| RA | MBHP | SRO Program | \$ 423,330.00 | 23 | 83.6 | \$ 26,505,196.00 |
| PH | HomeStart | Chronic Stabilization Program | \$ 221,371.00 | 24 | 83.6 | \$ 26,726,567.00 |
| RA | MBHP | 1999 Tier 2 PRA | \$ 392,060.00 | 25 | 81.6 | \$ 27,118,627.00 |
| PH | Mass. Housing & Shelter Alliance | Home and Healthy for Good | \$ 574,933.00 | 26 | 81.4 | \$ 27,693,560.00 |
| PH | Pine Street Inn | Chronically Homeless Housing | \$ 490,288.00 | 27 | 81 | \$ 28,183,848.00 |
| PH | Pine Street Inn | Place Me Home Chronic Housing | \$ 664,609.00 | 28 | 78.8 | \$ 28,848,457.00 |
| PH | New England Center and Homes for Veterans | Veterans Welcome Home | \$ 339,949.00 | 29 | 74.4 | \$ 29,188,406.00 |
| PH | Mass. Housing & Shelter Alliance | Home Front | \$ 299,256.00 | 30 | 70.6 | \$ 29,487,662.00 |
| Tier 1- Priority III. New DV Bonus Projects for 2021 | | | | | | |
| DV-RRH | Casa Myrna Vazquez | STEP Expansion | \$ 317,075.00 | 31 | 128 | \$ 29,804,737.00 |
| DV-Joint TH-RRH | Casa Myrna Vazquez | Joint TH-PH-RRH | \$ 1,265,787.00 | 32 | 126 | \$ 31,070,524.00 |
| DV-Joint TH-RRH | Elizabeth Stone House | Joint TH-PH-RRH Expansion | \$ 671,800.00 | 33 | 116 | \$ 31,742,324.00 |
| Tier 1- Priority IV. Renewals- RRH & Joint TH-RRH | | | | | | |
| DV-RRH | Casa Myrna Vazquez | Survivors Transitioning to Empowerment Program (STEP) | \$ 340,480.00 | 34 | 84.6 | \$ 32,082,804.00 |
| RRH | FamilyAid Boston | Home Advantage Collaborative | \$ 860,549.00 | 35 | 78 | \$ 32,943,353.00 |
| RRH | Pine Street Inn | Housing Works Partnership Consolidated | \$ 2,018,182.00 | 36 | 73.8 | \$ 34,961,535.00 |
| Tier 2 | | | | | | |
| Tier II- Priority I. Renewals - RRH & Joint TH-RRH | | | | | | |
| RRH | Pine Street Inn | Housing Works Partnership Consolidated | \$ 102,194.00 | 36 | 73.8 | \$ 35,063,729.00 |
| DV-RRH | Casa Myrna Vazquez | Survivors Transitioning to Empowerment Program (STEP II) | \$ 863,272.00 | 37 | 70.6 | \$ 35,927,001.00 |
| RRH | Bridge Over Troubled Waters, Inc. | Youth Housing Pathways Program | \$ 703,738.00 | 38 | 70 | \$ 37,375,197.00 |
| DV-Joint TH-RRH | Elizabeth Stone House | Joint TH-PH-RRH | \$ 744,458.00 | 39 | 67.6 | \$ 36,671,459.00 |
| Tier 2 - Priority II - New CoC Bonus- PSH or RRH | | | | | | |
| PSH | St. Francis House | Constitution Inn PSH | \$ 1,456,577.00 | 40 | 135 | \$ 38,831,774.00 |
| PSH | CLT | Master Leasing PSH | \$ 268,455.00 | 41 | 113 | \$ 39,100,229.00 |
| Total Tiered | | | | | | |
| Untiered Projects | | | | | | |
| RRH | Bridge Over Troubled Waters | Bridge RRH+ Replacement | \$ 1,226,034.00 | - | - | |
| TH-RRH | Bridge Over Troubled Waters | Bridge TH-RRH+ Replacement | \$ 443,502.00 | - | - | |
| RRH | Justice Resource Institute | JRI RRH+ Replacement | \$ 248,580.00 | - | - | |
| PSH | Metro Housing Boston | FAST Replacement | \$ 659,470.00 | - | - | |
| PSH | The Home for Little Wanderers | Roxbury Village Replacement | \$ 141,518.00 | - | - | |
| Planning | Boston CoC | Planning 2021 | \$ 1,130,419 | - | - | \$ 42,949,752.00 |
| Total CoC 2021 application | | | | | | |
| Rejected Projects | | | | | | |
| SSO-CES | Project Hope | RRH for Families | \$ 0.00 | n/a | n/a | |

| | | |
|-------------------|----|--------------|
| Tier 1 | \$ | 34,961,535 |
| Tier 2 | | |
| YHDP | \$ | 2,719,104 |
| ARD | \$ | 34,961,535 |
| Bonus | \$ | 1,884,032 |
| DV Bonus | \$ | 2,254,662.00 |
| Planning | | \$ 1,130,419 |
| total tiered | \$ | 39,100,229 |
| total application | \$ | 42,949,752 |

Healthcare Formal Agreements (3A-2a)

Attachment Coversheet

A. Combine and upload a copy of formal written agreements at the 4B Attachment Screen and label the attachment Healthcare Formal Agreements.

B. We will use the information in the attachment and the information submitted in question 3A-3. when determining potential bonus points.

C. In-kind resources must be valued at the local rates consistent with the amount paid for services not supported by grant funds.



Letter of Commitment to Provide Healthcare Services

November 1, 2021

To Whom It May Concern:

The Massachusetts Behavioral Health Partnership (MBHP) supports the MA-511 Continuum of Care request for the BCIJ Consolidated Project Expansion using bonus funds. Should the proposal for BCIJ Consolidated Project Expansion be funded, MBHP will support enrollment into the Community Support Program for Chronically Homeless Individuals (CSP-CHI) for all eligible project participants.

Behavioral healthcare services will be provided through the CSP-CHI program available through MBHP's Medicaid insurance coverage, and have been shown to effectively assist in sustaining tenancies for this population. The project subrecipient, St. Francis House, currently provides CSP-CHI services through a contract with Eliot Community Human Services, a CSP-CHI approved provider.

CSP-CHI healthcare services will be made available to eligible project participants at the start of the grant and will be available for twelve (12) months. The annual value of this service is estimated to be \$63,145 based on the current allowable daily rate of \$17.30 per person served and the expectation that 10 chronically homeless project participants will be enrolled.

If I may be of further assistance in the application process, please do not hesitate to contact me.

Sincerely,

Sharon Hanson
Chief Executive Officer
617-686-6975
sharon.hanson@beaconhealthoptions.com