

Before Starting the CoC Application

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

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

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

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.

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

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: WI-503 - Madison/Dane County CoC

1A-2. Collaborative Applicant Name: City of Madison

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Institute for Community Alliances

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

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

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

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

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

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

(limit 2,500 characters)

1. CoC membership is open anytime to anyone with interest in preventing & ending homelessness for Dane County residents. Potential members can attend a meeting & then become a member. The CoC website has a “Become a Member” page that details how one can become a member. Formally, an invitation for new members is sent annually, in the 3rd quarter. The invitation process is communicated through the CoC listserv, website, social media, word of mouth by CoC members & through presentations to other sectors including employment & training, children, youth & families, developmental disability, criminal justice, older adults & behavioral health. The Lived Experience Council & Youth Action Board share membership info via social media. Provider agencies are encouraged to share information on membership with current & former program participants. The CoC invites agencies to present on new projects & presenters often become members. The CoC conducts outreach to specific sectors as needed.

2. Most communication from the CoC is through email & most attachments and documents on the CoC website are PDFs. Documents & the CoC website include info on requesting documents in alternate formats. Invitations to join the CoC are provided online & at meetings & events, both in person & remote. The County created a new position within Dane County Department of Human Services for a Language Access Coordinator (Bilingual) to develop, implement, & coordinate a Language Access Plan ensuring equal access to all DCDHS programs. The Dane County Homeless Resource guide was updated and is now in Spanish & Hmong.

3. The CoC continues to strengthen partnerships with Urban Triage (specializing in serving the Black community) & LGBTQ+ Outreach Community Center through YHDP. The CoC has seen a slight increase in Latinx people accessing homeless services, so is working to develop partnerships w/ agencies serving that population. Agencies are committed to hiring & retaining bilingual (Spanish) employees for staff & leadership positions. The CoC Coordinator presented on homeless services to the Latino Support Network of Dane County (LaSup). Attendees were invited to attend CoC meetings, join the listserv, & become members. CoC members committed to attending monthly LaSup meetings to develop & strengthen relationships. LaSup members shared reasons why Latinx community members may not access homeless services which resulted in the CoC website now being available in Spanish (also Hmong & Arabic).

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	
	Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;	
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;	
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

(limit 2,500 characters)

1. The CoC has public meetings led by a Chair & Vice Chair elected from & by the membership. Each month 60+ members, including reps from nonprofits, faith groups, gov, funders, grassroots, & those w/ lived experience meet. Agendas & minutes are distributed thru a listserv (600+ members) & posted on the CoC’s website. The CoC has 12 public committees where members give opinions. Committee agendas, minutes & meeting info is on the CoC website. Uninvolved members are encouraged to join committees. If a meeting topic impacts a program type, the CoC invites those providers that don’t regularly attend. The CoC Board, elected by the membership, encourages attendance at publicly noticed meetings to give feedback. The CoC Coord presents to &/or attends meetings of other sectors & receives input. The Lived Experience Council (represented on all committees/workgroups), YAB & Board members w/ lived experience are compensated. The CoC is engaged in a planning process involving focus groups & surveys of a broad range of stakeholders. The CoC provides training on aspects of homeless services & attendees share how the system is working for people. 2.All CoC meetings are open to the public. Times & locations of meetings are on the CoC website. The public can connect to the CoC thru the website’s ‘Contact Us’ option. Info is communicated in meetings verbally, often accompanied by written materials (emailed in advance) or powerpoint presentations & time is made for questions & discussion. Membership & Committee meeting minutes are on the CoC website. Meetings are virtual allowing for increased participation & feedback. The CoC uses online surveys to solicit feedback from a broad range of perspectives. Survey tools are used in meetings to solicit opinions. 3. The CoC website & all meeting agendas have info on accessing materials in alternative formats. Most documents shared are PDF. Meetings are virtual so attendees can access closed captioning. If other services are requested, the CoC Coord will work w/ City of Madison Depts to accommodate needs. 4.The CoC Coord reviews minutes for info & feedback to inform her work. Meetings do not work for all, so draft policies are sent to the listserv for input. Final policies are approved by the CoC Board. A membership survey solicits opinions on meeting structure & topics. Optional questions are asked during the unsheltered PIT to guide planning. The CoC is engaged in a process to recommend a new CE prioritization based on feedback.

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

(limit 2,500 characters)

1. The CoC notified the public that we would consider project applications from organizations that have not previously received CoC Program funding through an announcement and materials on the CoC’s website and Facebook page. Information was also sent out via the CoC’s listserv. Interested parties were encouraged to attend a virtual information session. Information on attending the session was posted on the CoC website along with a link to join. New applicants were required to attend the session or set up another time with the CoC Coordinator. Throughout the application process, the CoC Coordinator checked in with all agencies that had interest in applying and provided technical assistance and support. The CoC Coordinator held virtual office hours for anyone who had questions about the application process or needed assistance with e-snaps. New applicants were allowed to submit the initial application outside of e-snaps in an attempt to ease the process.
2. The process for application submission was included on the CoC’s website, through the link on the Facebook post, in an email to the CoC listserv and interested agencies, and during the information and on-on-one sessions with applicants. The info session included review of application materials and the screening process. The CoC Coordinator made herself available for questions during the application process and held 3 one-hour virtual office hour sessions where applicants could pop in to ask questions.
3. The CoC notified the public about how it would determine which applications would be submitted to HUD for funding through the CoC website, link on Facebook post, and emails to listserv and interested agencies. Applicants were encouraged to review the policies for review & ranking, and the scoring tools that were posted on the CoC website. This information was presented in open meetings of the CoC’s Board. Throughout the review process, information was sent out to applicants, including the Review Committee’s proposed funding slate before it went to the CoC Board for approval.
4. Communication about the competition is mostly done through email and the CoC website. Most documents are provided in PDF format. Emails and the website indicate that people can request information in alternate formats, including via meetings (virtual or in-person) or phone calls. The CoC Coordinator works to create an open, inclusive process and each year seeks suggestions on how to improve.

1C. Coordination and Engagement

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

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

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	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)	

18.		
-----	--	--

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

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

(limit 2,500 characters)

1. There are two ESG recipients in the CoC's geographic area: State of Wisconsin and City of Madison. The CoC plays an integral role in planning and allocating ESG funds. To assist with planning, the CoC Coordinator attends monthly meetings with the State of Wisconsin. If there is an opportunity to provide feedback on planning and allocation, she does so. The City is a member of the CoC and participates in the CoC planning process and incorporates CoC input in the City's planning and funding processes. The City serves as lead applicant for the State ESG funds and submits the consolidated application on behalf of the CoC. The CoC Board works closely with the City to establish and approve the State ESG subrecipient application and review and ranking criteria. Several board members participate in the ESG application review, scoring, and ranking. The CoC Board makes the final State ESG funding allocation recommendation.

2. The CoC Board sets the performance evaluation criteria for the State ESG subrecipients for the local funding competition and the City adopts the criteria for the City ESG. ESG subrecipients must follow the Written Standards and the CoC has created an evaluation tool to be completed annually to ensure standards are being followed. The HMIS lead agency sends performance reports to the State for monitoring and evaluation.

3. The CoC provides PIT and HIC data to the Consolidated Plan jurisdictions by sending PIT result memos via email, providing reports as requested, presenting at CoC membership meetings and posting information on the CoC website.

4. Information is communicated to the Consolidated Plan jurisdictions through the CoC listserv, of which both jurisdictions are members. Information is posted on the CoC's website and presented in CoC meetings. The CoC Coordinator directly participates in writing the City's Consolidated Plan and provides feedback to the State's Plan.

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

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

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

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

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

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

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

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

(limit 2,500 characters)

The CoC has a formal partnership with the Homeless Education Network (HEN) that is outlined via a Memorandum of Understanding. The HEN is the group formed by Local Education Agencies within the CoC. This group meets twice a year and CoC members attend these meetings. HEN members regularly attend CoC membership and committee meetings. The MOU requires the following from the CoC: provide data to HEN annually or as requested; provide names of households who will be discussed at case conferencing meetings in advance of the meeting, seek and consider feedback on the homeless services system, CoC representation at 100% of HEN meetings; inform individuals and families experiencing homelessness about eligibility for educational services; have representation and participate on the Advisory Committee of Student Homelessness. Through the MOU, HEN is required to do the following: provide data annually or as requested, HEN representation at family case conferencing meetings; seek and consider feedback on educational services from CoC members, HEN representation at 70% of CoC Membership meetings; encourage district participation in the annual Point-in-Time Count and Youth Count. This partnership was first formalized in 2019.

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

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

(limit 2,500 characters)

The CoC’s Written Standards (p.6) require that housing and housing case management programs be aware of and inform households of the educational rights of children and unaccompanied youth in their programs. Materials explaining rights should be provided to applicable households and posted within facilities. Program staff will collaborate with the Transition Education Program (LEA) or other school officials to coordinate educational services. In addition, program staff are required to encourage school attendance and work to eliminate barriers to regular attendance. If attendance and truancy concerns are noted, program staff will communicate and coordinate with school staff. Agencies are required to connect with any school district a family is affiliated with, in order to coordinate services.

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

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

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

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

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

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

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

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

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

(limit 2,500 characters)

1. The CoC collaborates with Domestic Abuse Intervention Services (DAIS), a victim services provider, and YWCA Madison, a provider of transitional housing for survivors. The CoC does not have any victim services providers that receive ESG or CoC funding. YWCA Madison receives some ESG funds, but not for the transitional housing program. YWCA Madison provides a variety of homeless services and housing programs and is regularly involved in CoC conversations. DAIS experienced some staff turnover and hasn't been as involved recently with broader CoC conversations. They do regularly attend the Shelter Providers Committee to provide input. Additionally, the CoC reaches out to DAIS for guidance/input on items that impact survivors. When the CoC makes changes to the Written Standards, an email is sent to the entire CoC membership to get feedback on suggested changes. Several staff at DAIS and YWCA Madison are on the listserv and can provide feedback. Recently, UNIDOS, a victim services provider that "supports the Latine and other marginalized communities in Wisconsin" reached out to the CoC to explore ways we can work together. The CoC will work to foster this relationship.

2. The CoC is committed to ensuring all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors. There are two new projects ranked in this year's CoC competition that will prioritize survivors: one RRH and one Joint TH-RRH. These projects will be operated by non-victim service providers, but they will work with victim services providers to ensure needs are met. The CoC partners with DAIS to train CoC members on the needs of and support for survivors and trauma informed care. These trainings are scheduled annually.

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

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

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

(limit 2,500 characters)

Training on best practices for serving survivors is provided on an annual basis for both project and Coordinated Entry staff. Domestic Abuse Intervention Services (DAIS) provides a variety of training. This year, the CoC worked with DAIS to provide two training sessions. The first training was geared to Coordinated Entry staff and front line workers to increase understanding of Intimate Partner Violence, its root causes and common safety concerns. Attendees learn about Power and Control dynamics and leave with a knowledge of resources and ways to support survivors. The second training focuses on how the survivor experiences the legal system. Both trainings are victim-centered and include Trauma Informed Care.

Annually, CoC members attend the Dane County Trauma Informed Care Community Summit. The CoC website has a link to Trauma Informed Care education resources. End Abuse Wisconsin provides statewide training on issues related to domestic violence. Agencies invite domestic violence providers to staff meetings to train on safety planning and how to best serve survivors.

In the CoC, when staff encounter someone with domestic violence needs (safety planning, restraining order, etc.) they assist as they are able and work with victim services providers to fully meet the needs of the households. Collaboration with victim service providers is critical to providing the best services. Because homelessness and domestic violence intersect, providers in the CoC are well-versed in services available and making necessary referrals.

The CoC has an active Lived Experience Council with representation on the CoC Board and all Committees. One member has disclosed experiencing domestic violence. It is possible that others have this experience too. Because the LEC is involved at all levels of the CoC, they are able to provide perspective and input on policies, procedures and practices.

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

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

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

(limit 2,500 characters)

1. Coordinated Entry staff are trained in Trauma Informed Care and the needs of survivors. When someone contacts Coordinated Entry (CE) and identifies as a survivor, staff will make a referral to a victim services provider and offer use of a phone and safe confidential space. When a survivor connects to CE through a shelter operated by a non-victim services provider, staff will connect with a victim services provider to work on safety planning and ongoing services. The survivor is offered these services, but not required to participate in them. Staff at the shelter will participate in safety planning including ensuring confidentiality and flexibility with regular procedures to ensure safety. Shelter Diversion staff assesses safety of households who call to access shelter and prioritizes households with safety concerns and makes appropriate referrals for additional safety planning. Staff at the CoC’s primary victim services provider are trained on the CE assessment and a process is developed to ensure survivors are connected. Upon request for an emergency transfer through CE, the housing provider must establish an individualized plan with the tenant and provide a copy of the plan to the tenant in writing. The housing provider will offer to assist participants in contacting local organizations offering assistance to domestic violence, dating violence, sexual assault and stalking survivors. If a participant must move outside of the current project to locate a safe unit, the program staff must communicate with the CE Manager to complete an external emergency transfer. Program participants requesting an emergency transfer are prioritized above any other households for open units. Agencies participating in CE must accept emergency transfers as they have available units that are deemed safe.

2. Survivors of domestic violence, dating violence, sexual assault, and stalking receive safe and confidential access to CE based on their unique needs. When completing a CE assessment in person, it is done in a space where the participant feels safe and provides confidentiality. A release of information is signed before any information is released to providers or entered into HMIS. The Written Standards require programs to maintain confidentiality for all program participants. The CoC’s Emergency Transfer Plan provides detailed information about what cannot be disclosed regarding experiences of domestic violence, dating violence, sexual assault or stalking.

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

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

(limit 2,500 characters)

1. In order to review data on survivors of domestic violence, dating violence, sexual assault, and stalking, the CoC uses a variety of sources. The CoC accesses data about survivors from HMIS and from victim services providers. The local DV providers are not required to enter data into HMIS or a comparable database, but send de-identified aggregate data to the CoC on a regular basis. The CoC receives direct information from people during the unsheltered PIT and Coordinated Entry assessment. Domestic Abuse Intervention Services (DAIS) completes a community needs assessment and provides data to the CoC.

2. On a monthly basis, DAIS provides HIC data. This helps the CoC understand the utilization rate of emergency shelter and motel vouchers and the number of households served. There is a transitional housing project for survivors that also provides data to the CoC. These providers also participate in the PIT count which helps us understand how many survivors are accessing services and their needs. The data gathered during the unsheltered PIT helps the CoC understand how many people are sleeping outside due to DV. The data collected during the CE assessment assists the CoC in knowing how many people experiencing homelessness may also benefit from DV services. The community needs assessment typically finds that housing and shelter are the largest needs for survivors in our community. This information lets the CoC know that it is crucial to partner with victim services providers to provide the best services to program participants.

** **

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

(limit 2,500 characters)

1-3. The CoC's Written Standards detail the emergency transfer plan policies and procedures and the process to request a transfer. The Standards also include when providers are required to inform program participants about the emergency transfer plan: when they are accepted or denied transitional or permanent housing, served an eviction notice or terminated from assistance. The Written Standards are accessible on the CoC's website. CoC- and ESG-funded projects document that HUD Form 5380 VAWA Notice of Occupancy of Rights and HUD 5382 VAWA Certification were provided and explained to participants either through signed acknowledgement from the participant or signatures on the forms themselves. At project entry, program staff go over the VAWA process/procedure and explain what the VAWA rights are and how the emergency transfer process works if someone needs the protections. If a household needs an emergency transfer, the program staff works with the household from beginning to end. They work to ensure people feel safe filing, understand the process and know each subsequent step and how the household can move forward with a new housing option. Staff work with the household to complete the program transfer form if they want to remain in the area, but feel safer in a different program. Program staff share emergency transfer information with the Coordinated Entry team. Emergency transfers are prioritized in the CE process. Program staff assist with conversations with landlords and getting any needed documentation to terminate a lease if necessary.

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

(limit 2,500 characters)

1. The CoC is committed to ensuring that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC’s geographic area. Survivors can access the Coordinated Entry system through a variety of CE Hubs: emergency shelter for men, women or households with children, day resource center, street outreach, phone call to Coordinated Entry or through a form on the CoC’s website. Additionally, the CoC has worked with the largest victim service provider, Domestic Abuse Intervention Services (DAIS), to train staff & have their facility serve as a Coordinated Entry hub. DAIS staff are able to complete assessments with survivors & then ensure the information and households are connected to Coordinated Entry. All households, regardless of DV status are on the same Coordinated Entry list. All projects that receive CoC, ESG or State EHH funds must use Coordinated Entry and do not discriminate based on DV status. Thus, all housing & services are available to survivors. The CoC has an Emergency Transfer Plan in place for victims of domestic violence, dating violence, sexual assault, or stalking where a household can request a transfer from their current unit to a safe unit. The ability to request a transfer is available regardless of sex, gender identity or sexual orientation.

2. The CoC works with Victim Services Providers to identify issues & determine solutions. When the CoC created CE Hubs, it recognized that survivors may not want to access CE at the established hubs. The CoC worked with the provider of shelter for survivors to develop safe access for survivors. When the CoC developed the emergency transfer process, they worked w/ staff at the largest victim services provider to ensure the process made sense & was as easy as possible on survivors. The CoC prioritizes those seeking emergency transfers in the CE process. The CoC works with providers to train CoC members on domestic violence, which assists members in identifying barriers. The largest victim services provider regularly does a community needs assessment. The CoC reviews the information gathered to identify barriers in the homeless services system. This year, the CoC ranked two new DV projects. The Salvation Army applied for a DV RRH project based on feedback received from shelter guests who had left DV situations. Urban Triage applied for a DV Joint TH-RRH project due to their experience serving young adults in the CoC.

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

The CoC has worked to develop a Lived Experience Council and Youth Action Board with members who are involved in the CoC. The CoC does not ask the members of these groups personal details about their experiences with homelessness, domestic violence, dating violence, sexual assault and stalking. The CoC, keeping confidentiality and trauma in mind, chooses not to ask about specific experiences. Members should not feel obligated to share their stories with the CoC. Domestic Abuse Intervention Services has a Survivors United for Nonviolence group of people who have used services and helps inform their work. The Coordinated Community Response (CCR) to Domestic Violence and Sexual Assault Task Force is establishing a group of those with lived experience to direct the work of the CCR. The CoC will work with these groups and other local victim service providers to learn how they incorporate the voice of survivors in their work and determine an action plan for meaningful incorporation of the voice of survivors in development of CoC-wide policies and programs.

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

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

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

Describe in the field below:

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

(limit 2,500 characters)

1. Outreach LGBTQ+ is a member of the CoC. When the Written Standards are updated, suggested changes are sent to the membership for review & comment. Staff at Outreach LGBTQ+ receive these messages & can provide feedback. Through our work w/ YHDP, the CoC's relationship w/ Outreach has strengthened. The CoC will work w/ Outreach to determine a meaningful method of collaboration. Outreach staff came to the CoC this year to encourage us to ask all participants about their sexual orientation at program entry. This will help the CoC better understand who we are serving & respond to their unique needs.
2. The CoC ensures that providers are aware of the anti-discrimination policy. Annually, the CoC provides training on the Equal Access & Gender Identity Final Rules to help ensure LGBTQ+ individuals & families receive support services, shelter & housing free from discrimination. The CoC provides technical assistance (TA) to agencies who would like help in developing their project-level policies. This is done through direct assistance from the CoC Coordinator, funder or mentorship w/ another provider. The CoC Coordinator & County funder provided TA to a shelter as their staff navigated serving people whose gender identity fluctuates. An LGBTQ+ organization provided CoC wide training & direct TA & we assisted in developing new policies.
3. During regular monitoring visits, the CoC reviews project-level policies to ensure there is an anti-discrimination policy. If it is believed an agency is out of compliance, the Written Standards details the process to report. Violations are reported to the CoC Coordinator or Board. The CoC Coordinator will document the complaint & conduct an initial investigation & will communicate w/ all parties to determine next steps. The Board will remain informed during the investigation process & go into closed session for discussion. If warranted, the CoC Coordinator will further investigate the complaint w/ at least one Board member. Additional stakeholders will be brought in as needed. The CoC Coordinator & Board will determine if there is a violation & set next steps.
4. If a violation has occurred, the CoC Coord works w/ the agency to develop a plan & timeline for correction. This may include TA, updates to policies & procedures, staff training, etc. If the violation remains unresolved, it will become a matter of record & may have bearing on funding decisions. The CoC Coord keeps records of complaints, investigations & outcomes.

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Madison Community Development Authority	50%	Yes-HCV	Yes

Dane County Housing Authority	44%	Yes-Both	Yes
-------------------------------	-----	----------	-----

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

Describe in the field below:

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

(limit 2,500 characters)

There are two PHAs in Dane CoC’s geographic area. Dane County Housing Authority (DCHA) already has a homeless preference for Housing Choice Vouchers (HCV) and public housing, so no additional steps were taken. Madison Community Development Authority (CDA) does not have a homeless preference for public housing and the CoC would like to see a preference in place. The CoC spent time strengthening relationships with both PHAs through the application, award, and implementation of Mainstream Vouchers. As a result, Mainstream Vouchers were allocated to households currently in CoC housing programs (move-on strategy) or those who met Category 1 or 4 definitions of homelessness. Additionally, the CoC is working closely with both PHAs on the Emergency Housing Vouchers (EHV). As a result, 100% of the EHVs are being allocated through a preference to households currently served in CoC housing programs (move-on strategy) and households currently experiencing homelessness identified by Coordinated Entry. The CoC focused time and energy on the rollout of EHV and has not resumed talks with CDA about a homeless preference for public housing. The CoC worked with CDA to apply for and receive Stability Vouchers to pair with the unsheltered funding. There has been leadership turnover at CDA. At this time, the CoC is prioritizing strengthening this new relationship through our work as a trusted partner on EHV and implementation of the Stability Vouchers.

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

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

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

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

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

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

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
--	--	-----

1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored—For Information Only	

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

--

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

PHA
Community Develop...
Dane County Housi...

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

Name of PHA: Community Development Authority

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

Name of PHA: Dane County Housing Authority

1D. Coordination and Engagement Cont'd

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

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

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	12
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	12
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

1. There are several ways the CoC evaluates recipients on their project application to determine if they are using a Housing First approach. Projects must use CE to fill their units. Because CE is in HMIS, the CoC is able to review if households enter projects outside the CE process or if an agency is repeatedly turning down referrals. Prior to the CoC Competition, applicants are asked to complete the Written Standards Checklist, a self-assessment tool to note project consistency w/ the Written Standards, including Housing First requirements. Renewal applicants must submit their policies & procedures to determine if they are consistent w/ Housing First. Info about Written Standards adherence & policies & procedures is considered in the CoC Competition. Additionally, the CoC is piloting a tool to evaluate Housing First fidelity w/ CoC-funded projects.
2. During the competition, applicants are asked to describe how their “project takes proactive steps to minimize or overcome barriers to housing retention.” Renewal projects must provide info on how many households exited in the last operating year, why they exited & if the agency used the CoC’s transfer process. Project policies & procedures are reviewed to ensure that they, at a minimum, match HUD requirements to be considered Housing First. The evaluation tool piloted in the CoC considers the following areas: housing choice & structure, separation of housing & service, service philosophy, service array, & program structure. Each area has several factors that the project is ranked using a 1-4 scale.
3. The CoC is working with the WI Housing First Coalition to pilot a tool to evaluate projects on housing first fidelity. This pilot is currently in process & the tool will be used to evaluate all projects. The CoC is also providing feedback to the Coalition on the structure of the tool & how well it works. Currently, the CoC Coordinator meets with project staff to go through the tool & have conversation about how the program is or is not meeting each of the factors. The tool provides a score for each area on how well the program is upholding the housing first approach. The CoC Coordinator will do this with all CoC-funded projects. The info gathered is used to provide feedback to individual projects & will be used to determine CoC-wide strategies to increase adherence to the Housing First approach. The CoC continues to monitor project adherence to CE policies & Written Standards outside of the competition.

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

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

4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.
----	--

(limit 2,500 characters)

1. Street outreach (SO) connects w/ people who are unsheltered. Teams concentrate on both urban and rural areas. Housing-focused teams are mobile CE hubs & complete the CE assessment, document CH & connect people to low-barrier shelter & housing. Police, park rangers & community members contact SO if they find someone sleeping outside & outreach follows up. SO teams use a shared Release of Information & hold case-conferencing meetings 3 times a month to coordinate, de-duplicate services & ensure people sleeping unsheltered are connected. Additional case conferencing meetings focus on Veterans & those in a County-funded RRH program. SO is alerted to people exiting housing programs to unsheltered homelessness. During the unsheltered PIT, people are asked if they want contact w/ outreach & those who did have a team assigned.
2. Outreach covers 100% of the CoC's geographic area.
3. Outreach is conducted six days a week during early mornings, day-time & evenings.
4. A variety of strategies are used to engage w/ people least likely to request assistance. A city-sanctioned campground engages vulnerable folks w/ long-term unsheltered homelessness. Youth SO uses social media to engage. SO workers go to people in order to eliminate transportation barriers. Workers provide access to phone & internet at the library, their offices, & the day resource center. If language is a barrier, SO teams use staff who are fluent in the language or connect w/ language services, including ASL. Accommodations for people w/ cognitive & physical disabilities include meeting in an accessible area, reading/filling out paperwork & connecting to assistive technology. Workers w/ lived experience of homelessness connect w/ people who do not trust the homeless system. Teams engage w/ community partners such as barber shops, libraries, community centers, churches & pantries to learn about people sleeping unsheltered. The hospital, VA & grassroots orgs target populations that do not normally seek services. If a guest is suspended from shelter, SO is alerted so they can connect & develop a plan for a safe return to shelter. SO providers share info about housing & services to all eligible persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status or disability. SO providers build rapport by supplying survival gear & continuing to be a presence, visiting someone multiple times to effectively engage & enroll in services.

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

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes

3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	531	603

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

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

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

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

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

(limit 2,500 characters)

1. The CoC has a listserv consisting of over 600 people. The listserv is a way the CoC provides up-to-date information on mainstream resources. As needed, mainstream program providers come to CoC membership meetings to provide updates on application, eligibility and recertification of benefits. Minutes are taken at these meetings and emailed to the membership and posted on the CoC’s website. The CoC requires HUD-funded agencies to utilize a mainstream resources checklist with participants to ensure they receive all resources and benefits for which they are eligible. The CoC provides a glossary of information and contacts for the resources to keep case managers informed. The checklist and glossary are on the CoC’s website and are updated regularly.
2. The CoC works with providers to ensure access to healthcare services for participants. The CoC encourages providers to bring services to people rather than requiring them to go to an office. The CoC and providers have connections with the following services to make them easily available to program participants: HEALTH program UnityPoint Health-Meriter, MEDiC through UW, Tellurian, Madison Street Medicine (including foot clinics), MyChoice Wisconsin, Kabba Recovery Services and Public Health. Nurse Disrupted is an organization that works with the CoC to provide telehealth services. The WI Department of Health Services requires HMOs to have a staff person who connects with the local CoC. The CoC Coordinator provides education on our services, ways to partner and discusses ways HMOs can fund services. The CoC Coordinator attends every other week meetings with WI DHS and other WI CoCs to discuss the overlap of housing and healthcare services and find ways to better integrate services.
3. The CoC Coordinator has conversations with agencies on strategies to assist participants to increase their income. SOAR training is an identified need and several agencies have committed to getting staff trained. The CoC Coordinator sends information about free online SOAR training to the COC listserv and encourages agencies to participate.

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

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

(limit 2,500 characters)

The COVID-19 pandemic presented opportunities to increase capacity to provide non-congregate shelter. The CoC provided hotel rooms for people who were most vulnerable to severe illness due to COVID. Additionally, we used a hotel as an Isolation and Quarantine Center, specifically for people experiencing homelessness. These options were sustained for over two years, but have since ended, due to the short-term nature of the funding.

The Salvation Army provides a medical voucher program, funded through ESG, for people experiencing homelessness who are unable to access shelter due to a medical condition. This provides short-term respite until people are able to return to shelter. Local hospitals and clinics match funding for participants they refer to this program. Meriter Hospital funds an SRO unit to serve as medical respite.

Tiny houses are a successful option for some people who sleep unsheltered and are unwilling to access congregate shelter. Occupy Madison developed 28 tiny homes to serve people experiencing unsheltered homelessness. Dane County is pursuing an agreement with Occupy Madison to develop a project for additional tiny houses.

The City developed an urban campground using pallet shelters to serve people experiencing unsheltered homelessness. Zoning ordinances were changed to allow this and similar future projects. The City funds supportive services at this location and the service provider has had great success connecting people to housing and services.

The City and County allocate funds to provide short-term emergency hotel stays for households experiencing unsheltered homelessness during extreme weather conditions when congregate emergency shelters are not an option due to lack of availability or individual circumstances.

The City and County are jointly working on creating a new purpose-built permanent shelter. While it will largely be a congregate shelter, many design considerations will be incorporated to attract people who used to avoid congregate shelters such as privacy partitions, smaller dorm spaces, and an isolation room. The men’s shelter is currently in a temporary location and many of these aspects have already been incorporated into the design, contributing to significantly increased use of this facility.

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

(limit 2,500 characters)

1. The relationship w/ local public health officials strengthened during the COVID-19 pandemic. The CoC & public health met on a regular basis to develop policies & procedures regarding the CoC's response to infectious disease outbreaks. Discussions included review on how well policies & procedures were working for staff & participants & updates were made as needed. Local public health has an enhanced understanding of the homeless services system which allows them to update procedures to meet needs. The CoC's Isolation & Quarantine facility closed this year. Leading up to the closure, public health met regularly with shelter staff to develop policies & procedures for handling COVID (& other infectious disease) in their facilities. Public health listened to provider concerns & provided education & a variety of strategies to address infectious disease. The CoC continues to meet w/ state public health officials twice each month. During the pandemic, the groups realized how much crossover their work has & decided to continue the relationship to create change across the State. The focus of these meetings is developing ways to integrate health resources & CoC resources.

2. The CoC has collaborated w/ local public health to prevent infectious disease outbreaks. Public Health partnered w/ agencies to develop a COVID mitigation guide to reduce transmission in congregate settings. The information is posted on their website. Connections with City, County & State allow for quick access to PPE when needed. Public health continues to provide access to self-administered COVID tests & vaccine clinics. Public health provides education on infectious disease as needed. Local public health reaches out to the CoC Coord when they have important health information related to someone experiencing homelessness & are unable to reach the individual. The CoC Coord works w/ shelter staff to ensure the person receives the message from Public Health; this is all done while maintaining confidentiality of the health issue & of services the person is accessing. The CoC worked w/ State Public Health to ensure people experiencing homelessness were a priority population when the COVID vaccine first became available. It took a coordinated advocacy effort, and we were successful in prioritizing this vulnerable population. Conversations continue w/ State public health around the needs of people experiencing homelessness & the importance of considering this population in creating response plans.

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

(limit 2,500 characters)

1. The CoC provides accurate, thorough and timely communication related to prevention of infectious disease outbreaks. The CoC works with public health to develop messaging and communication documents. This information is provided by sending emails through the CoC listserv or to specific providers or groups. As needed, meetings are scheduled to provide this information to specific groups. The CoC disseminates information from the State and Federal levels that address infectious disease concerns. Information is also shared via CoC membership and committee meetings as appropriate. The CoC provides training on the homeless services system to public health staff as needed.

2. The CoC has developed relationships with the local public health agency that allow for communication regarding infectious disease, when needed. In the beginning of the COVID-19 pandemic, the CoC led weekly meetings for specific program types: street outreach, emergency shelter, and permanent/transitional housing. Public health attended these meetings to provide regular updates. The regular meetings are no longer needed, but Public Health and the CoC call meetings as necessary. As requested, public health attends committee meetings to provide updates and answer questions as requested. When the Isolation and Quarantine facility was set to close, public health provided guidance to agencies, including visits to facilities to help develop protocols and answer any questions. Agencies continue to reach out to the CoC Coordinator when they have PPE or self-administered testing needs. The CoC Coordinator has relationships and is able to quickly secure supplies. The COVID-19 pandemic highlighted the intersections for work for public health and the CoC. The groups continue to find ways to work together, including Public Health providing training in other areas such as overdose prevention.

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

(limit 2,500 characters)

1. Coordinated Entry (CE) covers 100% of the CoC’s geographic area. People connect to CE when accessing shelters or the day resource center in person, calling a dedicated CE phone line, submitting an online CE form via the CoC website, connecting to street outreach, connecting to youth system navigation and/or calling the CE Prevention Hub. Most of the services in Dane County are available & accessed in the City of Madison. CE staff outreach to school districts & agencies serving rural communities to ensure they are aware of CE & determine if there is a need for regular walk-in hours. CE staff travel to other communities on an as-needed basis.
2. The CoC is engaging in a process to revamp the assessment process for CE. System Performance and HMIS data are being examined for disparities & a new process is expected to be implemented in the next year. Currently, the CoC uses the VI-SPDAT as the standardized assessment tool. We use the versions for single adults, households with children & young adults. The assessment score, along w/ chronic homeless status & LOT homeless are used for assessment determination. When someone initially contacts CE, they receive referrals to basic housing resources such as diversion, housing navigation and/or case management. If they are experiencing literal homelessness for 7 days, CE staff complete the assessment & refer to the CE housing list. The assessor will connect with them every 30-45 days to confirm their housing needs. As a YHDP community, the CoC is implementing a youth-specific CE process that will be launched soon
3. The CE Lead considers feedback from providers and participants to regularly update guidance & training in an effort to streamline data collection & entry associated with the assessment process in order to make it more trauma informed. The Written Standards workgroup updates the CE Standards as system level changes are implemented. The CoC has updated the assessment process & prioritization in response to feedback from providers, participants, the Lived Experience Council and data reviews. As the CoC updates the assessment process, a mechanism for regular feedback, review and updates will be incorporated. The youth-specific CE process was developed by using feedback from YYA on the current process.

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

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

(limit 2,500 characters)

1. People in rural communities tend not to seek services in the City of Madison. CE staff can go to rural communities to reach people. Several agencies outside the City of Madison make referrals to CE as appropriate and/or allow people to use the phone/internet to connect: START, CART, Sunshine Place, & Joining Forces for Families. The CoC has outreach teams that serve as CE mobile hubs and focus a variety of populations including youth, people w/ medical needs, Veterans & people w/ mental illness. Many of the outreach teams include staff w/ lived experience of homelessness. CE advertising is in English, Spanish, & Hmong. Language services are provided by staff or a language line. CE physical locations are accessible & accommodations are made for people w/ disabilities. People can connect to CE via phone &/or request info via the CoC's website. As a YHDP community, a new System Navigation project is starting that includes a drop-in center for YYA.
2. The CoC prioritizes households based on CH status, LOT homeless & VI-SPDAT score.
3. Outreach & shelter staff work to get CH & other landlord-required documentation (IDs, proof of income, etc.) needed for people to move into housing quickly. The CE Manager reviews & monitors the CH documentation submitted to ensure accuracy. Outreach & shelter staff receive CH documentation training regularly. CE participants are offered the option to complete a Participant Interest Form. This informs CE & project staff on preferences for location, services, accessibility needs, etc. When a housing program receives a referral from CE, they must initiate contact w/ the person w/in 2 business days. If a participant is offered a housing option but it does not meet their needs, they keep their place on the CE list & are offered the next available housing opportunity. The CoC does not limit the number of times a participant can turn down housing.
4. There is a CoC workgroup examining data & hearing feedback on the CoC's current assessment & prioritization process. The group will present a recommendation to the CoC Board early next year. The CoC is looking at several options to reduce the number of invasive questions asked during assessment. Possibilities include using data to get info for prioritization or using a pre-screen of simple questions & only asking in-depth questions of those who pass the pre-screen. The CoC is also considering timing of assessments. They are currently done after 7-10 days of literal homelessness.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

1. Marketing materials for Coordinated Entry are distributed to places where people experiencing homelessness frequent. Additionally, agencies/businesses contact the CoC for marketing materials if they see a need. Materials are available in multiple languages. Marketing materials indicate that services are available to all people regardless of race, color, national origin/ancestry, religion, sex, age, family/familial status, disability/handicap, actual or perceived sexual orientation, lawful source of income, gender identity, marital status, domestic abuse/sexual assault/stalking victims, military discharge status, physical appearance, political beliefs, student status, domestic partnership, tenant union association, genetic identity, citizenship status, Section 8 housing voucher participant, nonreligion, and homelessness.
2. The CoC has several ways to inform participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws. The information is posted on the Coordinated Entry page of the CoC’s website. Information is posted at all Coordinated Entry hubs and hard copies of forms and information are available at each hub. This information is also found in the CoC’s Written Standards and on the CoC website..
3. If someone makes a report regarding impediments to fair housing, the CoC will direct them to the process outlined in our Written Standards. First, it is recommended to follow the agency’s complaint/grievance process. If the situation is not remedied, the person may file a complaint with the City of Madison. Participants are also referred to Fair Housing Wisconsin. If the CoC is aware of impediments to fair housing, this information will be relayed during the consolidated planning process.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	07/14/2023

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

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

(limit 2,500 characters)

1. In 2023, the CoC regularly analyzed data for racial disparities. In re-imagining the CoC’s CE assessment and prioritization, we reviewed System Performance Measures and CE data for racial disparities. The review of System Performance included both CoC- and non-CoC-funded projects. CE is a CoC Program-funded homeless assistance project. For SPMs, we looked at LOT homeless, exits to permanent destinations, and returns to homelessness. For the CE data, we looked at people served, those reassigned to a permanent housing program, permanent housing enrollment, and permanent housing enrollment with a move-in date. The HMIS lead ran data reports and presented them to the planning group for CE meetings. The planning group reviewed the data and identified disparities to present to the larger group. When the larger group met, discussion centered on identified disparities, possible reasons for disparities, and solutions.

2. The CoC identified several disparities:

- a. Families:
 - i. Black parenting youth experienced a longer period of homelessness.
 - ii. Black families had a lower rate of exit to permanent destinations than White families.
 - iii. No substantial difference in returns to homelessness
 - iv. Latinx families were less likely to be referred to PSH than White families.
 - v. Latinx families were less likely to be housed through a PSH program than White families.
 - vi. Black families were less likely to be referred to RRH than White families.
 - vii. Black families were less likely to be housed through a RRH program than White families.
- b. Single Adults
 - i. Black individuals had a higher rate of returning to homelessness than White individuals.
 - ii. Latinx individuals had a higher rate of returns to homelessness than non-Latinx individuals.
 - iii. Black single youth had a higher rate of returns to homelessness than White youth.
 - iv. No substantial difference was observed in the length of time homeless.
 - v. No substantial difference was observed in exits to permanent destinations.
 - vi. Black and Latino singles were less likely to be referred to PSH than White singles.
 - vii. Black and Latino singles were less likely to be housed through a PSH program than White singles.
 - viii. Black and Latino singles were less likely to be referred to RRH than White singles.
 - ix. No substantial differences were observed for singles in obtaining housing through RRH.

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

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	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.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	No
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	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.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

The CoC has focused on disparities identified in the CE process, specifically related to prioritization. There is a workgroup, made up of providers (both homeless services and other sectors), government, funders, and people with lived experience (including youth) dedicated to recommending strategies to address the disparities. The workgroup spent much of this year ensuring everyone had the same base knowledge related to CE and reviewed/discussed a variety of data points. The workgroup is now in Phase 2 of the work where they will make recommendations. Points of consideration include: implementing a CE pre-screen and doing a full assessment on those who are eligible, tweaking questions on the VI-SPDAT or creating new questions, using data already available to eliminate the need for asking questions, timing of CE assessment, whether or not to continue prioritization for those who have chronic documentation in place, etc. The next few months will involve very important discussions. Additionally, during funding competitions for homeless services funds (including CoC & ESG), points are awarded to applicants whose staff reflect the people served in the project. The Youth Action Board and Lived Experience Council have increased influence in the CoC through involvement on committees where decision-making and policy development occur. Their involvement in CoC-wide decision making directly affects the provision of services to the community. The CoC is in a process of developing a community plan that will seek to address disparities on a wider scale. The CoC will work on specific strategies called out in the plan that will address disparities.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
	1. the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
	2. the tools your CoC uses.	

(limit 2,500 characters)

1-2. The CoC has focused its racial disparity analysis on Coordinated Entry and are specifically working to make changes on assessment and prioritization. Part of the workgroup’s task is to determine what data will be analyzed and how often, to see if the changes are having the desired effect. The CoC uses HMIS and Stella P for review of system data. The CoC’s HMIS has custom equity reports that individual agencies, committees and workgroups review. These reports can be saved and referenced against new reports to determine the impact of actions. Charts and graphs will be created to show the impact of changes over time. The workgroup is committed to developing a method for regular data analysis and tweaking of strategies if they are not achieving the desired outcome. The CoC is in the midst of a community planning process that will identify system-wide disparities. The Plan will provide measures for success that will allow the CoC to easily track progress toward specific goals.

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

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

(limit 2,500 characters)

The CoC has several outreach efforts to engage people with lived experience of homelessness in leadership roles and decision making processes. Specific efforts are made to seek members for the Youth Action Board, Lived Experience Council and seats on the CoC's Board of Directors. All opportunities are sent out via the CoC's listserv which reaches over 600 people. Providers on the listserv are encouraged to share the information widely. The CoC, Lived Experience Council and Youth Action Board all maintain Facebook pages as a mechanism to share information through social media. The Youth Action Board developed their own website, which provides information on how to join. Their website is linked on the CoC's website. The CoC's website has a page for the Lived Experience Council, which contains contact information for interested parties. Fliers are posted in schools and libraries with information about the groups to increase our reach. Outreach materials highlight the benefits of joining: impacting local work, developing leadership skills and other professional development, compensation, etc. Training and compensation are available for group members.

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	11	7
2.	Participate on CoC committees, subcommittees, or workgroups.	12	7
3.	Included in the development or revision of your CoC's local competition rating factors.	8	5
4.	Included in the development or revision of your CoC's coordinated entry process.	8	6

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

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

(limit 2,500 characters)

Many CoC membership agencies have changed employment criteria to include lived experience as a consideration in hiring to intentionally hire people with lived experience. Agencies are expanding the use of Peer Support specific to homelessness, which creates new employment opportunities. Porchlight Products, JustBakery and YWeb Career Academy are programs that provide training and employment with specific outreach to people who have experienced homelessness. In the CoC, members of the Lived Experience Council (LEC) and Youth Action Board (YAB) are paid an hourly wage for their work. These groups provide introductory training to new members as well as ongoing professional development. Training provided by the CoC is open to members of the LEC and YAB. People with lived experience are encouraged to serve on committees, which provide training into the homeless services system and ongoing professional development. CoC members are available to meet one-on-one or in small groups with LEC or YAB members to provide additional training or technical assistance. The CoC sends information out via the listserv for various and, often, free training. The CoC sends announcements for paid opportunities that are seeking people with lived experience to the CoC's listserv and directly to LEC and YAB members. As funding allows, YAB and LEC members are able to attend national conferences.

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

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

(limit 2,500 characters)

1. There are several ways the CoC gathers feedback from people experiencing homelessness & who have received assistance. The CoC is engaged in a community planning process & is holding focus groups for people currently experiencing homelessness. An online survey is available to the general public & distributed widely for completion. The Community Action Coalition & Domestic Abuse Intervention Services complete Community Needs Assessments to gather feedback on gaps and needs. Madison Street Medicine completes a Community Health Needs Assessment. Some funding contracts require projects to gather feedback from participants, at least annually. Many agencies are exploring ways for participants to provide feedback at any time. The CoC works with the Youth Action Board (YAB) and Lived Experience Council (LEC) to incorporate voices & concerns of people with lived experience. Members of these groups are invited to serve on funding review committees. The CoC Board has 2 seats dedicated and appointed by YAB and 3 dedicated seats for lived experience, with one being appointed by LEC.

2. During the unsheltered PIT, optional survey questions ask why people are not accessing shelter. In the CoC & ESG funding competitions, projects are asked about how they improve programming, including how they incorporate feedback from participants. CoC member agencies routinely offer a variety of ways for participants of CoC- & ESG-funded projects to provide feedback on services.

3. The info gathered during the community planning focus groups & through the survey will inform the strategies and priorities in the Community Plan to Prevent & End Homelessness. Info gathered during the PIT count about shelter access has been used to lower barriers in current shelters and is being considered in development of a new shelter. Additional surveys & focus groups were completed to get feedback on design and services of a new emergency shelter. Discussions about addressing pets, storage & serving couples are ongoing. Community Action Coalition, Domestic Abuse Intervention Services & Madison Street Medicine use their assessment results in strategic planning. Feedback from the LEC prompted the CoC to develop a workgroup to review & make recommendations on changes to CE assessment & prioritization. Agencies make changes to policies, procedures, & systems based on feedback received. The CoC has started asking LEC members to participate in providing CoC wide training to provide their viewpoint.

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

(limit 2,500 characters)

Over the past 12 months, the CoC has collectively engaged w/ local governments & elected officials on changes that seek to address easing barriers to housing development resulting in the following:

* Implementation of a Transit Oriented Development zoning overlay district to increase the # of dwelling units as a permitted use, increase permitted/allowable heights, eliminate parking minimums & reduce maximums, reduce open space requirements, & increase the viability of accessory dwelling units

*Proactively rezoning parcels for use as high-intensity residential & mixed-uses w/in the City’s recently adopted area plans which envision & now allow for by-right high-density housing uses in- & proximate to the City’s major suburban-style mall developments

*Adopting 2 new Neighborhood Development Plans, which call for implementation of significantly more dense housing development

*Amending the Comprehensive Plan to achieve more predictable & sustainable housing development outcomes thru: Adjustments to the Future Land Use map for key parcels, making rezoning for higher-intensity use more feasible & predictable in key areas & Guidance to allow redevelopment of Special Institutional parcels (e.g. places of worship) to be rezoned for medium- to high-intensity housing uses where previously prohibited

*Adjustment to the zoning code to allow mixed-use development on parcels zoned for a singular use, such that both uses in the mixed use development would otherwise be allowable as a standalone use w/in a zoning district (e.g. multifamily residential & places of worship collocating in new development)

* Adoption of a Downtown Affordable Housing Story Bonus, allowing developers to construct additional stories, so long as a set percentage of the additional stories is dedicated as legally-restricted affordable housing thru a recorded land-use restriction agreement

*Adoption of a detailed Transportation Demand Management Ordinance, which creates incentives for developers to utilize sustainable & holistic transportation methods in planning for their development, & de-bundles the cost of parking from residential leases, while also providing clarity & consistency to developers seeking land use approvals

*Engagement in development of the Dane County Regional Housing Strategy which will acknowledge, reinforce, & build on local efforts, assess ongoing challenges, & work to take next steps to expedite the development & preservation of affordable/workforce housing.

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

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

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

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
-------	---	--

1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	07/17/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	07/17/2023

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

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

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

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	386
2.	How many renewal projects did your CoC submit?	11
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC Board approves a Project Performance Scorecard (PPS) used to track & analyze data for CoC-funded projects. The CoC Coordinator works w/ the HMIS Lead to obtain data from HMIS on the following SPMs: increase in income, exit or retain permanent housing, LOT enrolled to housed & returns to homelessness. Other data is collected from APRs, CoC committee attendance records, written standards checklists & monitoring results. The CoC Board sets & approves scoring criteria for each data point. The CoC Coordinator reviews the PPS w/the Board, sends it to CoC-funded agencies & posts it on the CoC website. Projects must score at least 60% on the scorecard to have their renewal in Tier 1. The total project score is determined using 65% of the applicant’s performance score & 35% of the narrative score.
2. The PPS has a section for “average length of time enrolled to housed (days)”. The average for each project is compared to the overall average for that project type.
3. CoC-funded projects are required to use CE to fill program vacancies so are serving those w/ the highest needs & vulnerabilities. The CE Manager alerts the CoC Coordinator if a project is not using CE. This year, evidence indicated that a CoC-funded project was not using CE. The CoC Coordinator met w/ them, reviewed expectations & developed a performance improvement plan. Monthly, the CoC Coordinator checks-in w/ the CE Manager & there have been no further concerns. The PPS has a section that indicates if a project has denied 10% or more of CE referrals to determine if a project is screening out individuals based on perceived barriers. PSH & RRH projects have different scoring for increasing income to account for the increased vulnerabilities & severe needs of people being served in PSH (chronic homelessness).
4. The CoC gave consideration to the scoring for PSH & RRH projects on increase in income. PSH projects get the following scores for percent of participants w/ an increase in income: 30 pts for 50-100%, 20 pts for 35-49% & 10 pts for 20-34%. RRH projects get the following: 30 pts for 75-100%, 20 pts for 45-74%, & 10 pts for 30-44%. PSH projects are serving people w/ severe needs & increased vulnerabilities & should not be held to the same standards as RRH projects regarding income. PSH projects are needed in our community. The Funding Review Committee hosts a Q&A session where applicants can address low performance. This info may be considered during ranking.

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

(limit 2,500 characters)

1. The CoC made slight changes to the rating and review factors this year. The CoC Coordinator engaged with a group of CoC Board & Lived Experience Council members to discuss potential changes to the rating and review factors. In the CoC’s geographic area, approximately 40% of the population experiencing homelessness is Black, while only 5% of the total population is Black. In the group, approximately 33% of the participants were Black. This group had discussions around what data is important, what is available, and how it should be evaluated. There were some items that the group felt needed more discussion before making changes, so will continue those conversations throughout the year. The CoC Board of Directors approved the final rating factors. Approximately 38% of Board members are Black.

2. The CoC Funding Review Committee is composed of representatives from the following: United Way, City of Madison, Dane County, CoC Board, Lived Experience Council and Youth Action Board. This committee is facilitated by the CoC Coordinator who is White. There were 7 members on the Committee, 71% are BIPOC with 43% identifying as Black. All members of the group read all submitted applications and scored them. The group met to discuss and determine a ranking for projects. This proposal was presented to the CoC Board for approval.

3. In the narrative application, applicants responded to these questions: “What barriers does your project have for participation by Black, Indigenous and Persons of Color (e.g. lack of outreach)? What steps has your agency taken or will take to eliminate the identified barriers?” Applicants were awarded a maximum of 10 points if they clearly identified barriers and had a plan to address them that will likely see results. Review committee members recommend that next year, the CoC provides additional guidance on what we are seeking in an answer. The Funding Review Committee is very interested in the equity questions and will make recommendations to the Board for improvements for next year’s competition.

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

Describe in the field below:

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

(limit 2,500 characters)

1. The reallocation process includes two types: voluntary and involuntary. In advance of the CoC competition, the CoC Coordinator contacts agencies to have conversations about their intentions to renew. If a project is consistently underspending, reallocation is recommended. Initially, all agencies were interested in applying for renewal. The CoC Board approves a Performance Scorecard and the renewal project must meet a performance threshold to be guaranteed a renewal (score of at least 60%). Projects that do not score at least 60% are required to participate in a Performance Improvement Plan (PIP) process. The PIP is reviewed by the CoC Board of Directors and used to determine if the project is eligible for renewal or will be considered for reallocation. If the project is not up for reallocation, it can be renewed, but may be ranked below other renewals and new projects.
2. The CoC identified four projects that were low performing: The Road Home - Foundations, Community Action Coalition - Dane County RRH, Housing Initiatives - Permanent Housing for Chronically Homeless, and Lutheran Social Services - LSS Housing First. The CoC did not identify any less needed projects.
3. The CoC did not involuntarily reallocate any projects. One project decided to voluntarily reallocate.
4. The CoC Board allowed all four projects to seek renewal in the funding competition, with the understanding that their application may be rejected for a new project. Lutheran Social Services ultimately decided to not seek renewal so a voluntary reallocation was needed. All four projects are participating in a Performance Improvement Plan.

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

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	Yes
--	---	-----

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

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/11/2023

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/11/2023
--	--	------------

1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank—if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
--	---	-----

1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	
--	--	--

You must enter a date in question 1E-5c.

1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	
--	---	--

You must enter a date in question 1E-5d.

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

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

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

	Select from dropdown menu your CoC’s HMIS coverage area.	Statewide
--	--	-----------

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

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/25/2023
--	---	------------

2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

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

(limit 2,500 characters)

1. The requirement to use a comparable database does not apply to any victim service housing providers in the Dane CoC. The two victim service providers - one emergency shelter provider and one transitional housing provider - do not receive HUD ESG or CoC program funding. These providers do submit data for the Point in Time count. When necessary, the HMIS lead is available to provide support to any DV agencies while selecting a comparable database.
2. This question does not apply as there are no victim service providers in the Dane CoC that are required to use a comparable database.
3. The CoC is compliant with the FY 2022 HMIS Data Standards.

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

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	445	28	473	113.43%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	130	0	108	83.08%
4. Rapid Re-Housing (RRH) beds	603	0	603	100.00%
5. Permanent Supportive Housing (PSH) beds	895	0	895	100.00%
6. Other Permanent Housing (OPH) beds	829	0	711	85.77%

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

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

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

(limit 2,500 characters)

The CoC's Transitional Housing HMIS bed coverage is 83.08%, down from 100% the previous year. YWCA Madison operates a Transitional Housing program that serves survivors of domestic violence. They do not receive funding that requires entry into HMIS and have decided not to enter information. YWCA is not considered a victim services provider, but staff at YWCA are exploring entry of data into a comparable database. The CoC Coordinator will follow-up with them to learn about progress. If YWCA does not move forward with a comparable database, the CoC Coordinator and HMIS lead will meet with staff to see if there are any enhanced measures we can take to provide confidentiality and have these beds entered into HMIS.

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

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

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

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/25/2023
--	---	------------

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/25/2023
--	---	------------

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

In our CoC’s most recent PIT count planning process, we took proactive steps to engage youth and youth-serving organizations. To ensure their involvement, we extended individual invitations to key stakeholders, including members of the CoC’s Youth Action Board, youth service providers, and school district staff, inviting them to join our Committee responsible for planning and executing the local PIT count and participating in the PIT unsheltered count. To ensure meaningful participation by those who could not regularly attend the committee meetings, we also scheduled a dedicated meeting after coordinating with Youth Action Board members to ensure their availability. During this special meeting, we shared our efforts and findings from the previous year’s PIT, focusing specifically on identifying homeless youth during the PIT count. We sought their advice and input, recognizing their unique expertise and on-the-ground knowledge. Additionally, we provided them with our current list of known locations and encouraged them to contribute any additional sites that we should visit on the night of the PIT count and post-count activities. Through this collaborative effort, a few new potential locations were identified, particularly as areas where youth might be car camping. Notably, in two of the newly-identified locations proposed by Youth Action Board members, we successfully identified individuals.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
	3. describe how the changes affected your CoC’s PIT count results; or	
	4. state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

Not Applicable - There were no changes in PIT sheltered and unsheltered count implementation.

2C. System Performance

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

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

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

(limit 2,500 characters)

1. The CoC researched risk factors of homelessness by reading studies & engaging in conversations w/ providers. The info gathered was presented to the Written Standards workgroup, which included a variety of stakeholders, & they created a prioritization tool. The tool & accompanying standards were approved by the CoC Board. Households are prioritized based on their vulnerability to experiencing homelessness. The CoC recently completed an equity analysis of those experiencing homelessness for the 1st time. This info will be used to evaluate our current prioritization.
2. The CoC has several strategies to address households at-risk of homelessness. Prevention funds & services are funded by US Treasury, ESG, State & donations. Households can contact 211 or CE for referrals to prevention services, including assistance to meet basic needs in order to free up funds for rental payments. The Eviction Diversion & Defense Partnership (EDDP) provides mediation, housing counseling, court & housing navigation, rental & utility assistance, along w/ referrals to partner attorneys who provide free legal services. In many cases, an eviction is prevented w/ a settlement agreement. Funds may be required to settle an eviction & are accessed through the EDDP, CE or other community providers. Formal diversion services, providing flexible funding & services to obtain permanent housing, are in place for families & single women. An additional full-time staff was hired to provide diversion services to families. There is increased programming & staff available to provide services & rental assistance to households at-risk of homelessness, focusing on households w/ children living in doubled-up situations. The CoC has a Doubled-Up Work Group, focused on those at-risk of homelessness, specifically households who are doubled-up or self-paying at hotels. The County hired a Housing Strategy Specialist who focuses on this population & is tasked w/ mapping current services available, identifying gaps & needs, identifying funding sources and developing a system to identify, assess, prioritize (those at risk of abuse) & refer households to housing & services. The County funds a pilot program to serve doubled-up populations who are most vulnerable to entering the homeless services system. Thru the work of YHDP, the community will open a youth drop-in center to serve youth experiencing or at-risk of homelessness.
3. The CoC Coordinator w/ oversight from the CoC Board is responsible.

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

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

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

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

In the field below:

1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
----	--

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

(limit 2,500 characters)

1. The CoC uses a variety of strategies to reduce LOT homeless. 1. CE prioritizes those w/ the longest LOT homeless. 2. Diversion: Formal diversion services are provided to single women & families seeking shelter. With YHDP funds, the CoC provides system navigators/peer support for YYA. 3. A City-sanctioned campground serves as bridge housing for people who are sleeping unsheltered. Staff work w/ folks, who were previously difficult to engage w/, to connect to housing. 4. Reduce housing barriers: Legal Action of WI works to seal eviction records. Housing Navigation services prioritize those who are literally homeless & include access to funds to reduce barriers to housing. As households near the top of the CE list, outreach & shelter staff work to ensure eligibility documents are in place for rapid move-in upon unit identification. 5. Increase housing opportunities: The County used federal funds to increase RRH. The 2 PHAs & the CoC work together on MVP & EHV to serve people experiencing homelessness and/or move-on strategy to free up CoC units. The CoC was awarded funds in the Special NOFO & the PHA received stability vouchers to increase RRH slots. The City & County require, with their affordable housing funding, developers to allocate units for use by CE & require a partnership w/ a service provider. 6. United Way & Dane County lead a Landlord Engagement Group consisting of service providers, the CoC, funders & property owners. The group will hold an event to further engage & develop relationships w/ property owners. 7. Collaboration w/ Stakeholders: Regular cross-system meetings occur to address the needs of people who are unable to live independently due to aging, disability or other health needs. This group consists of homeless services providers, ADRC & Adult Protection Services & has been successful in connecting people to long-term care. The Lived Experience Council is a CoC partner & provides input at committee meetings on how to reduce LOT homeless.

2. The CoC is able to identify households with the longest LOT homeless through HMIS and CE. An HMIS report is run by CE staff to determine who is accessing services & has not been assessed by CE. These households are targeted for engagement & assessment by shelter & street outreach staff. Case conferencing meetings are used to discuss options for those w/ the longest LOT homeless, focusing on Veterans & unsheltered populations.

3. The CoC Coordinator w/ oversight from the CoC Board.

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

In the field below:

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

(limit 2,500 characters)

1. The CoC partners with 2 PHAs to target vouchers for a move-on strategy, creating space in PSH & RRH projects. The County provides a RRH program to previous residents of the COVID hotel, many of whom are moving on w/ Section 8. The City provided funds for a TBRA program that is paired w/ optional support services. Shelter & housing programs encourage & assist households w/ applying for Section 8 or subsidized housing & have funds for entry costs. The YWCA's program, Steps to Stability, provides education on obtaining & maintaining housing. The State provides funding for an employment program to serve people experiencing homelessness to increase their ability to afford housing. Mediation services are available to tenants & property owners. These services, along w/ case management are offered at eviction court. To increase income, the Written Standards require program staff to complete the mainstream resources checklist to ensure participants, including minors, are receiving all benefits for which they are eligible. The CoC attends meetings of the Employment & Training Network. United Way & the County facilitate a group to develop the CoC's landlord engagement strategies. The CoC has some programs that provide landlord incentives, higher security deposits, or rental arrears.

2. Accessing Medicaid-funded services allows for an array of support to help people stabilize in housing. Additionally, the State is seeking approval of an amendment to the 1915i plan that allows providers to bill Medicaid for housing support services. This will enhance service provision in the CoC. Agencies hire Certified Peer Specialists (specific to homelessness) to assist households in maintaining or moving to other permanent housing. The Written Standards allow households to transfer from one PSH project to another if needed, allowing for housing retention. The PHAs have "move-on" vouchers for households in PSH & RRH to provide long-term affordable housing. For the ranking & review process, the CoC Board looks at % of successful exits, # of households retaining housing & use of the transfer policy. If projects do not score well, they develop a Performance Improvement Plan. Households connect w/ CE Prevention services if at-risk of homelessness. Through regular check-ins with owners, program staff educate them about housing first, supporting people to maintain housing and implementing housing stability plans.

3. The CoC Coordinator w/ oversight from the CoC Board is responsible.

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

(limit 2,500 characters)

1. The CoC uses HMIS reports to identify households who have returned to homelessness. The CoC understands that a significant predictor of homelessness is a previous episode of homelessness. For prevention programming, the CoC identified several factors that may cause a household to have difficulty finding new housing & may result in a return to homelessness. These are: place in the eviction process, renting subsidized housing, eviction hx, criminal hx, need for an accessible unit, & household of 5+ members. Street outreach providers keep a by-location list of people who are unsheltered that has historical data to identify those returning. Many projects check-in w/ participants for up to 1 year after program exit & can identify people at risk of returning to assist with prevention. Households in CoC-funded programs all entered from homelessness so staff are aware of their risk for return.

2. The CoC has 2 overarching strategies for reducing the rate of returns to homelessness: 1) as people leave programs, providing skills & resources for housing maintenance and 2) providing resources to prevent homelessness for those at-risk. Housing case managers work w/ participants on general skills related to maintaining housing: budgeting, maintenance, tenant rights & responsibilities. They help connect participants to mainstream resources including energy assistance, health care, childcare, SNAP, phone & internet, & tax credits allowing income to be freed up for housing costs. There is an increased emphasis on providing peer support services & hiring people w/ lived experience of homelessness. Staff help participants enroll in Medicaid-funded support services to assist in housing stability after program exit. The CoC's Written Standards allow for a household to transfer from one PSH project to another to avoid a return to homelessness. For at-risk households, the CoC has a CE Prevention Hub. Prevention funds are typically targeted to those w/ a previous episode of homelessness. The Eviction Diversion & Defense Partnership provides mediation, housing counseling, court & housing navigation, rental & utility assistance, along w/ referrals to partner attorneys who provide free legal services. Formal diversion practices are in place for families & single women requesting shelter. A pilot project is available for households experiencing doubled-up homelessness to prevent the need for shelter.

3. The CoC Coordinator w/ oversight from the CoC Board is responsible.

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

(limit 2,500 characters)

1. The CoC works w/ a variety of employment & training programs to ensure participants have access. CoC members attend meetings of the Employment & Training Network to learn about resources & develop relationships. United Way has a HIRE Initiative that involves 6 agencies providing education & training: Literacy Network, Urban League, JustDane, Latino Academy of Workforce Development, YWCA & Centro Hispano. This initiative also provides services to address housing & childcare needs. There are two employment programs, Porchlight Products & Just Bakery, that work specifically w/ people who have experienced homelessness and/or are disabled. YWCA received funding to pay 9-10 students while they complete YWeb Career Academy which trains & connects people to tech jobs. The City of Madison Parks Department worked w/ shelters to reduce barriers to their jobs & recruit applicants. The CoC ranks & reviews applications based on an increase in any income from program entry to annual assessment or exit. Employment programs send information about opportunities to the CoC listserv & present at membership meetings. FoodShare Employment & Training comes to the day resource center on a regular basis to enroll & work w/ participants. There are programs to assist people in reinstating their driver's license & Operation Fresh Start assists young adults in obtaining their license. Several programs & agencies provide support around job readiness skills (resume building, job connections, mock interviews, supplies needed for employment).

2. The CoC has relationships w/ staff at the local Job Center, ADRC, Employment Resources Inc., YWCA, Urban League, DVR, Employment & Training Association, and other employment & training programs to connect participants. Housing case managers work with participants to incorporate employment & training goals into their Individualized Service Plans, as appropriate. Many programs are able to offer transportation assistance so participants can attend appointments & classes. The CoC provides education to employment & training staff on the unique needs of people experiencing homelessness. The CoC is working w/ the Employment & Training Network to plan an event that will bring together both employment & training & housing staff to learn about each other's work & develop relationships. CoC-funded projects are working to improve data collection on increases in employment income.

3. The CoC Coordinator with oversight from the CoC Board is responsible.

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

(limit 2,500 characters)

1. The CoC requires use of a Mainstream Resources Checklist that providers review with program participants. The checklist is used to document benefits participants are receiving and for which they are eligible and may apply. It serves as an educational tool to let participants know what is available. The CoC provides definitions and contacts that accompany the checklist. The checklist allows for discussion on systemic and individual barriers to enrollment. This may result in a plan for overcoming some of the barriers to ensure participants receive all benefits. Case managers provide assistance with technology access, transportation to appointments and completion of application materials. Providers present on benefits, eligibility and access at CoC membership meetings. In order to assist with the social security process, CoC members are completing SOAR training, connecting participants to ERI for application assistance, and connecting participants with the homeless liaison at the Social Security office. If a participant is denied benefits, Legal Action of WI (a CoC member) assists with the appeal. Use of Medicaid case management services has increased capacity to assist participants in receiving non-employment income. Mainstream eligibility workers hold regular sessions at the day resource center to connect people to benefits or complete recertification. The CoC will continue to work with the HMIS Lead Agency to ensure program staff are reporting increases in income in HMIS.
2. The CoC Coordinator with oversight from the CoC Board is responsible.

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
--	--	-----

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

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

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

Project Name	Project Type	Rank Number	Leverage Type
Hearts of Hope	PH-RRH	12	Housing

3A-3. List of Projects.

1. What is the name of the new project? Hearts of Hope

2. Enter the Unique Entity Identifier (UEI): NDM9CJA8ZSH8

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your CoC's Priority Listing: 12

5. Select the type of leverage: Housing

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

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

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

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

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

(limit 2,500 characters)
 NA

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

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

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

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

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

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

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

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

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

(limit 2,500 characters)

N/A

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

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

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

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

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

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

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

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

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

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

1.	Enter the number of survivors that need housing or services:	384
2.	Enter the number of survivors your CoC is currently serving:	30
3.	Unmet Need:	354

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(c)	

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

(limit 2,500 characters)

The CoC calculated the number of survivors needing housing or services by running a report for people served in emergency shelter and street outreach programs who were fleeing DV in FY 22. Additionally, the CoC reached out to the DV shelter provider to learn how many households they served in shelter in FY22. The CoC also looked at the number of people who moved into housing in FY22 who were fleeing DV. Data sources used include HMIS for non-DV projects and a comparable database.

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

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

Applicant Name
The Salvation Army
Urban Triage

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

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

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

1.	Applicant Name	The Salvation Army
2.	Project Name	Hearts of Hope
3.	Project Rank on the Priority Listing	12
4.	Unique Entity Identifier (UEI)	NDM9CJA8ZSH8
5.	Amount Requested	\$228,724
6.	Rate of Housing Placement of DV Survivors—Percentage	0%
7.	Rate of Housing Retention of DV Survivors—Percentage	0%

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

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

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

(limit 1,500 characters)

The Salvation Army does not currently operate any program that specifically serves survivors of domestic violence so are unable to supply the requested data. The Salvation Army operates a shelter for single women and a shelter for households with children. In 2022, 53% of single women and 29% of households with children accessing shelter identified as survivors of domestic violence. The Salvation Army operates several Rapid Rehousing programs and participants are likely survivors of domestic violence, but that is not the target population. The Salvation Army has experience in serving survivors.

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

Describe in the field below how the project applicant:

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

(limit 2,500 characters)

Although The Salvation Army (TSA) does not currently operate programming specifically serving survivors of domestic violence, we have over 14 years experience operating Rapid Rehousing programs. The information provided is based on that experience.

1. TSA works to quickly connect participants to housing opportunities. For survivors, we will work with them to ensure they are in a safe situation while seeking permanent housing. This may involve coordinating services w/ local victim service providers. Staff will listen to survivors about where they want to live, safety/security features needed and any barriers they have to obtaining housing. Staff will work w/ participants to reduce any barriers, including those that were caused by the abusive situation (criminal history, poor credit, poor housing references, etc.). The staff have relationships with property owners in the community and will connect participants to those properties, if interested. This program will provide a security deposit and first month's rent.
2. TSA does not currently prioritize domestic violence survivors, but will for the new program. Based on experience in serving shelter guests, we know there is a significant need for housing & services for this population. Staff will work with the HMIS and Coordinated Entry Leads to determine a process for referrals.
3. All RRH participants are offered case management services. When the participant is ready, the case manager will go through an assessment of needs. The participant identifies needs they have & goals they want to focus on. TSA provides housing-focused case management services & makes referrals to community partners for other specific needs. For services specific to domestic violence, we will partner with local victim service providers. Case managers assist participants in making these connections.
4. During the assessment of needs, the survivor will determine what their needs are. The case manager will offer resources & options to meet those needs & the survivor can determine next steps. The case manager will support the survivor in their plans.
5. In current RRH programs, TSA staff works w/ participants so they are able to maintain housing after assistance ends. This may involve: assistance with increasing income, reducing any barriers to locating housing, education on tenant rights & responsibilities, connection to neighborhood resources, identification of natural supports, & for survivors, safety planning.

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

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

1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
----	---

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

(limit 2,500 characters)

The Salvation Army does not currently operate programming specifically for survivors, but have served this population. The answer below includes things we have done and things we plan to do.

1. The intake and interview process typically takes place in a private staff office. This meeting can take place elsewhere based on participant's feelings of safety and comfort. Participant files are kept in a locked filing cabinet in a locked office. For the new project, we may restrict access to client information in HMIS.
2. Participants are able to choose their housing. The Salvation Army has relationships with property owners and will offer those available units to participants, but will also look beyond those relationships to meet participant needs and preferences. Participants will determine what is safe housing for themselves. Staff will assist them in looking for units that have enhanced security features, if they so choose.
3. The Salvation Army keeps all participant information confidential. Participant files are kept in a locked cabinet in a locked office. Staff do not release information about where a participant is living without a specific signed release of information.
4. All staff are trained on The Salvation Army's safety and confidentiality policies and practices. We will work with local victim services providers to review our policies and practices and determine any needed improvements to serve this population.
5. Staff will listen to participants about safety needs for housing. This information will be used in safety planning and location of housing. Staff will look for units that have security features to meet participant needs or find ways to provide those security features. Information on where participants live is kept confidential unless there is a signed release of information.

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

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

(limit 2,500 characters)

The Salvation Army does not currently operate any DV specific programs. For current Rapid Rehousing participants, we send a survey twice each year and at program exit. For the new project, we will incorporate questions around safety and services for survivors. For our shelter programs, we regularly convene town hall meetings. These have been popular in generating feedback and ideas. Staff are currently considering how to implement town hall meetings with Rapid Rehousing participants by holding space at community centers or other neighborhood locations.

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

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

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

(limit 5,000 characters)

The Salvation Army does not currently operate programming specifically for survivors, but does serve this population. Experience in operation of current RRH projects will inform our work on this project. Information below is based on our current experience.

1. Staff talk with participants about their wishes and needs regarding housing placement and stabilization. During the Coordinated Entry process, participants complete a Participant Interest Form which includes information about where they want to live, types of amenities they are seeking, and services they are interested in. This information is reviewed again upon program entry and updated if needed. For survivors, staff will review any safety concerns they have and work with them to locate housing that is safe.

2. Staff focus on participant choice in determining service plans and next steps. Staff are flexible with service plans and will make adjustments as requested by participants. Participants are experts in their own needs and will lead planning. Staff are trained on the needs of survivors and trauma informed care. The Salvation Army does not use punitive interventions.

3. Staff are trained on the effects of trauma. They attend regular trauma informed care training, one that is provided by a local victim service provider. Staff discuss effects of trauma with participants as appropriate (e.g. identify triggers). If participants request information about the effects of trauma, staff will provide that. Staff do make referrals to mental health supports and victim service providers to thoroughly address these issues.

4. All intakes and case plans done at The Salvation Army use a strengths-based approach. These tools are reviewed regularly using strengths-based and equity lenses. Staff see survivors as the expert in their own lives and allow them to drive the goal planning and help them identify strengths.

5. The Salvation Army staff attend the CoC's annual trainings on equal access and domestic violence. Staff receive annual training on trauma informed care and cultural competency. Several staff are attending YWCA Madison's Racial Justice Summit. Shelter staff have identified language access needs and worked with the City of Madison to have documents translated into Spanish. The new Associate Director of Social Services at The Salvation Army is fluent in Spanish and formerly worked as an associate director at a DV shelter. He uses these skills/experiences to examine the current policies and practices and identify areas for improvement.

6. RRH staff work with participants to help them learn about assets in their neighborhood and help make connections as appropriate. For survivors, staff work to connect them with local DV providers who offer a variety of groups and services. For the new program, there may be an option to provide onsite programming if multiple survivors choose to live in the property of our partner developer.

7. The Salvation Army provides services to many households with children, both in emergency shelter and rapid rehousing. Staff are very familiar with parenting resources and will refer households as appropriate. The CoC worked with a local DV provider to provide training on legal services/resources for survivors.

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

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

(limit 5,000 characters)

Crisis DV Services: Staff work to ensure the participant has a safe place to stay during the housing search process. They make referrals to the DV shelter, as appropriate. Victim service providers offer a wide variety of support services so case management ensures the participant is aware of those. Safety planning is completed on a regular basis.

Barrier reduction: staff work with participants to quickly identify any barriers they have to housing and identify which ones are a result of domestic violence, case management works with the participant to reduce the barriers which could involve creating payment plans for past debts, building credit, creating an advocacy letter to explain any poor housing references or other barriers, obtain identification documents, etc.

Housing Search & Stability: Case management asks the participant what they are seeking in a place to live: location, amenities, safety features, etc. and works with them to quickly identify potential units, including units with our partner property owners. Case managers can take the participant to view units, help with completion of paperwork and attend lease signing or other appointments with property management.

Childcare Assistance: Case managers assist participants in signing up for childcare assistance through the County. They will also work with them to locate and inquire about childcare openings. Many childcare options require parents to provide diapers, formula, extra clothes, ect which the case manager will help the participant gain, if needed.

Increasing Income: When participants want assistance in increasing income, the case manager reviews the CoC’s Mainstream Benefits Checklist to see if the household is receiving all benefits for which they are eligible. If not, and they are interested in pursuing benefits, the case manager will assist in the process and provide support. Additionally, referrals are made to appropriate employment and training programs.

Basic Resources: The service plan is driven by participant identified needs. The case manager will work to provide any resource the participant is requesting and make referrals to other agencies, as appropriate.

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

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

7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.
----	--

(limit 5,000 characters)

1. Staff will talk with participants about their wishes and needs regarding housing placement and stabilization. During the Coordinated Entry process, participants complete a Participant Interest Form which includes information about where they want to live, types of amenities they are seeking, and services they are interested in. This information is reviewed again upon program entry and updated if needed. For survivors, staff will review any safety concerns they have and work with them to locate housing that is safe.
2. Staff focus on participant choice in determining service plans and next steps. Staff are flexible with service plans and will make adjustments as requested by participants. Participants are experts in their own needs and will lead planning. Staff are trained on the needs of survivors and trauma informed care. The Salvation Army does not use punitive interventions.
3. Staff are trained on the effects of trauma. They attend regular trauma informed care training, one that is provided by a local victim service provider. Staff discuss effects of trauma with participants as appropriate (e.g. identify triggers). If participants request information about the effects of trauma, staff will provide that. Staff do make referrals to mental health supports and victim service providers to thoroughly address these issues. For this program, The Salvation Army will talk with local victim service providers about other training that may be necessary.
4. All intakes and case plans done at The Salvation Army use a strengths-based approach. These tools are reviewed regularly using strengths-based and equity lenses. Staff see survivors as the expert in their own lives and allow them to drive the goal planning and help them identify strengths.
5. The Salvation Army staff attend the CoC's annual trainings on equal access and domestic violence. Staff receive annual training on trauma informed care and cultural competency. Several staff are attending YWCA Madison's Racial Justice Summit. Shelter staff have identified language access needs and worked with the City of Madison to have documents translated into Spanish. The new Associate Director of Social Services at The Salvation Army is fluent in Spanish and formerly worked as an associate director at a DV shelter. He uses these skills/experiences to examine the current policies and practices and identify areas for improvement.
6. RRH staff work with participants to help them learn about assets in their neighborhood and help make connections as appropriate. For survivors, staff work to connect them with local DV providers who offer a variety of groups and services. For the new program, there may be an option to provide onsite programming if multiple survivors choose to live in the property of our partner developer.
7. The Salvation Army provides services to many households with children, both in emergency shelter and rapid rehousing. Staff are very familiar with parenting resources and will refer households as appropriate. The CoC worked with a local DV provider to provide training on legal services/resources for survivors.

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

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

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

(limit 2,500 characters)

The Salvation Army will use feedback from surveys and townhall meetings for initial policy and program development. Once the new program is in place, staff will gain feedback from program participants and, at least, annually evaluate and make changes to program policies and procedures. Additionally staff will connect with local victim services providers to learn about how they received feedback from people with a range of lived experience. Any feedback these agencies already have regarding housing programs, will be used to develop policies and procedures for this new program.

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

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

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

1.	Applicant Name	Urban Triage
2.	Project Name	Unhoused Youth Domestic Violence Initiative
3.	Project Rank on the Priority Listing	14
4.	Unique Entity Identifier (UEI)	RLQ5SFJB8FN8
5.	Amount Requested	\$200,241
6.	Rate of Housing Placement of DV Survivors–Percentage	0%
7.	Rate of Housing Retention of DV Survivors–Percentage	0%

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

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

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

(limit 1,500 characters)

Urban Triage does not currently operate a project specifically serving survivors of domestic violence so are unable to provide the asked for data. However, Urban Triage operates several other programs and have served survivors in those programs. Of the households served in our programs in 2022, approximately 41% identified as having experienced domestic violence.

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

(limit 2,500 characters)

Urban Triage has been providing housing services since 2016. While we haven't had an initiative specific to supporting those in domestic violence situations who are experiencing homelessness or housing insecurities, we have supported domestic violence survivors through our housing programs regularly. The support of survivors led us to pivot the delivery of our services, especially services to youth, and develop an initiative that specifically addresses youth domestic violence survivors through our Unhoused Youth Domestic Violence Initiative.

Through our other housing services, we provide case management, housing navigation, outreach, chronic documentation, and other support services to individuals and families experiencing homelessness and housing insecurities. In the last 12 months, we have served more than 3,500 individuals and families, moved more than 235 families from unhoused to housed, and distributed more than \$21.3 million in rental support to residents of Dane County, excluding the City of Madison. Of the individuals and families we served, approximately 41% were domestic violence survivors or in domestic violence or in intimate domestic violence relationships.

In order to prioritize survivors and move them quickly into safe affordable housing, we rely heavily on our collaborations with other public and private housing providers. Our case managers and housing navigators navigate the complex web of resources and services. We have established a centralized intake system to simplify the process and serve as a single point of entry to access information, complete applications, and receive referrals to appropriate housing options. We also work with the coordinated entry system to ensure that survivors are matched with the most suitable housing resources based on their individual needs and preferences. The coordinated entry system prioritize those with the highest level of need and ensure fair and equitable distribution of available resources. Additionally, we work with the Homeless Services Consortium and numerous other collaborating partners and service providers mentioned in other sections of this grant application in order to streamline access to housing resources share information, coordinate efforts, and establish referral networks to assist survivors in navigating the system more efficiently.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentiality policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

Ensuring confidentiality and the physical safety of our youth domestic violence (DV) survivor participants is of utmost importance to us. We provide a Person/Survivor-centered approach to the delivery of our services to participants. Below are some of the measures we have implemented to ensure our participants' privacy and safety:

Trauma-Informed Case Management (TCM): Participants will be assigned to a dedicated TCM so survivors can help ensure that their emotional needs are addressed comprehensively. Our TCM will be trained in trauma-informed care as this approach is essential when working with survivors as it recognizes the impact of trauma on individuals and ensures that services are delivered in a sensitive, supportive, and empowering manner. Our TCM will assist participants with accessing appropriate services, coordinating care, and providing ongoing support. They will also have extensive training in confidentiality, data protection, and security which is discussed below. Our TCM will assess the participant's safety concerns and needs and develop a plan based on this assessment.

Data Protection: We have strict data protection policies which include all staff members being trained on confidentiality protocols and that personal information is securely stored and accessed only on a need-to-know basis. Participants will be given the option to sign non-disclosure agreements to protect their privacy and the unauthorized sharing of their personal information.

Address Confidentiality: Our TCM will collaborate with Safe at Home, a statewide address confidentiality program that provides victims of actual or threatened DV with a legal substitute address to be used for both public and private purposes, to obtain a substitute address to avoid being located by their abusers.

Safe Shelter Options: We work with external safe and secure shelter options designed for DV survivors that have robust security measures in place to prevent unauthorized access and protect survivors from potential harm. Additionally, our service centers, RRH units, & TH units will all have secure entry systems with surveillance cameras in common areas, as well as the outside of these units to deter threats and provide evidence for any incidents. We also have strong relationships and partnerships with the Madison Police Department and Dane County Sheriff's Office. We will utilize these collaborations to ensure a swift response to any security concerns or emergencies that may arise.

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

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

(limit 2,500 characters)

Our Unhoused Youth Domestic Violence initiative hasn't started yet, but we will implement the following to evaluate our ability to ensure the safety of our participants:

Survivor-centered approach: Our initiative will prioritize the needs and experiences of survivors in all aspects of its design and implementation. This includes involving survivors in the development and evaluation of the program, providing culturally sensitive and accessible services, and addressing the unique needs of diverse populations.

Risk assessment and management: Our initiative will have a comprehensive risk assessment and management system in place to identify and mitigate potential risks to survivors. This includes assessing the perpetrator's history of violence, the severity of the abuse, and the survivor's current situation and needs.

Legal and law enforcement collaboration: We will collaborate with legal and law enforcement agencies to ensure that survivors receive appropriate legal protection and support. This includes providing information about available legal resources, assisting with obtaining restraining orders, and collaborating with law enforcement to ensure the perpetrator is held accountable.

Trauma-informed care: We will provide trauma-informed care that recognizes the impact of trauma on survivors' lives and addresses their physical, emotional, and psychological needs. This includes providing mental health services, advocating for medical care, and addressing the needs of children and other family members.

Cultural competence: Our initiative is culturally competent and responsive to the needs of diverse populations. We will provide services that are sensitive to the cultural backgrounds and experiences of survivors and address the unique needs of marginalized communities.

Collaboration with community organizations: We will collaborate with community organizations and advocacy groups to provide a comprehensive range of services and support to survivors, including partnering with organizations that provide legal, housing, and employment services, as well as advocacy groups that support the rights of survivors.

Ongoing evaluation and improvement: We will have a system of ongoing evaluation and improvement in place to ensure that we are meeting the needs of survivors and making progress toward our goals. We collect data on program outcomes, conduct regular assessments of program effectiveness, and make changes to improve the initiative as needed.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	

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

(limit 5,000 characters)

Urban Triage does not currently operate a program specifically to serve survivors, but has experience in serving this population through our other programs. The services offered by Urban Triage are survivor-centered, trauma-informed and culturally responsive.

1.The work of Urban Triage is led by acknowledging the participant as the experts of their own needs and goals. For placement and stabilization in permanent housing, Urban Triage listens to participant’s housing needs regarding location, amenities, security features, etc. When a referral comes to us from Coordinated Entry, we will consult the Participant Interest Form, which contains info on what the person is looking for in a housing situation. We will review their answers and determine a plan for locating safe appropriate housing. Urban Triage has partnerships with property owners and will use those relationships to quickly rehouse participants.

2.Urban Triage believes in creating an environment of agency and mutual respect. Our Trauma-informed Case Managers work alongside survivors to learn about their needs and goals. We assist participants in creating a plan to meet their goals. The planning process is participant-led and can be changed at any time to meet one’s changing needs. Staff will not use punitive measures with program participants.

3.Urban Triage provides a program called Supporting Health Black Families. This program is a 12-week personal leadership and change workgroup that empowers and inspires breakthroughs and transformation in Black people, families and communities. This program provides tools and cultivates a space to unpack one’s trauma and heal while learning the root of it all. Participants gain a better understanding of trauma and how it shows up in their lives. Participants will build an analysis of white supremacy racism and identify the impact on oneself and one’s perceptions, which lead to disempowerment and the embodiment of an inferiority complex. This program increases Black personal wellness and community wellness. Participants in all of our programs are encouraged to participate in Supporting Healthy Black Families. Additionally, staff attend the CoC sponsored training on domestic violence and engage in other professional development opportunities.

4.Our Trauma-informed Case Managers operate with the understanding that all participants have strengths. Case managers work with participants to assess individual strengths, build upon them and develop new strengths. Assessment tools and case plans are strengths-based. Development of case plans is participant led and honors their goals and plans for the future.

5.Our initiative is culturally competent and responsive to the needs of diverse populations. We provide services that are sensitive to the cultural backgrounds and experiences of survivors and address the unique needs of marginalized communities. Urban Triage staff will attend the CoC’s annual training on Equal Access.

6.Urban Triage offers a variety of programs that create opportunities for connection for program participants. These include

- a. Supporting Healthy Black Families (described above)
- b.Supporting Healthy Black Agriculture: This is a 12-week leadership workgroup designed to empower and inspire breakthroughs and transformation in Black communities. Our workgroup teaches the basics of growing your own food as well as the entrepreneurial benefits/opportunities in the agriculture field.
- c.Supporting Healthy Black Youth: This workgroup provides youth with the tools, skills and space to explore their character, their feelings, motives, and desires through creative arts such as hip hop, creative writing, photography, videography, trauma recovery, healing, and personal development.
- d.Community Events: Throughout the year, Urban Triage hosts a variety of

community events throughout Dane County. These events are free and open to all community members.

7.Urban Triage will provide support to survivors who are parenting. Again, they will be able to attend our Supporting Healthy Black Families workgroup that will provide education and build natural supports. Staff will work with survivors to learn about their needs for parenting supports and will work to provide those or make referrals to community partners.

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

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

(limit 5,000 characters)

Urban Triage provides a variety of supportive services to survivors while quickly moving them into permanent housing and addressing their safety needs.

Trauma-Informed Case Management (TCM): Participants are assigned to a dedicated TCM so survivors can help ensure that their emotional needs are addressed comprehensively. Our TCM is trained in trauma-informed care, as this approach is essential when working with survivors as it recognizes the impact of trauma on individuals and ensures that services are delivered in a sensitive, supportive, and empowering manner. Our TCM will assist participants with accessing appropriate services, coordinating care, and providing ongoing support. They will also have extensive training in confidentiality, data protection, and security. Our TCM will assess the participant’s safety concerns and needs and develop a plan based on this assessment.

Address Confidentiality: Our TCM collaborates with Safe at Home, a statewide address confidentiality program that provides victims of actual or threatened DV with a legal substitute address to be used for both public and private purposes, to obtain a substitute address to avoid being located by their abusers.

Safe Shelter Options: We work with external safe and secure shelter options designed for DV survivors that have robust security measures in place to prevent unauthorized access and protect survivors from potential harm. We have strong relationships and partnerships with the Madison Police Department and Dane County Sheriff’s Office. We utilize these collaborations to ensure a swift response to any security concerns or emergencies that may arise.

Barrier reduction: TCM work with participants to quickly identify any barriers they have to housing and identify which ones are a result of domestic violence, case management works with the participant to reduce the barriers this could involve creating payment plans for past debts, building credit, creating an advocacy letter to explain any poor housing references or other barriers, obtain identification documents, etc.

Housing Search & Stability: TCM asks the participant what they are seeking in a place to live: location, amenities, safety features, etc. and works with them to quickly identify potential units, including units with our partner property owners. Case managers can take the participant to view units, help with completion of paperwork and attend lease signing or other appointments with property management.

Increasing Income: When participants want assistance in increasing income, the TCM reviews the CoC’s Mainstream Benefits Checklist to see if the household is receiving all benefits for which they are eligible. If not, and they are interested in pursuing benefits, the case manager will assist in the process and provide support. Additionally, referrals are made to appropriate employment and training programs.

Education and Empowerment: Another crucial aspect of our approach is education and empowerment. We understand that many individuals facing housing retention challenges may lack knowledge about their rights, available resources, or how to navigate complex systems. Therefore, our initiative focuses on providing education and empowering individuals with the necessary skills and information to advocate for themselves effectively. This includes workshops on tenant rights, financial literacy training, and assistance in accessing legal aid if needed.

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

Describe in the field below examples of how the new project(s) will:

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

(limit 5,000 characters)

Urban Triage does not currently operate a project specifically serving survivors, but has served this population. Below is information on services we do provide. For this new project, we will engage with our participants to learn more about their specific service needs and incorporate those into our work. We will work with victim service providers to learn more about the unique needs of survivors and what supports we should add to our case management. Additionally, staff will receive training on safety planning in order to provide this service on an ongoing basis with participants.

1.The work of Urban Triage is led by acknowledging the participant as the expert of their own needs and goals. For placement and stabilization in permanent housing, Urban Triage listens to participant’s housing needs regarding location, amenities, security features, etc. When a referral comes to us from Coordinated Entry, we will consult the Participant Interest Form, which contains info on what the person is looking for in a housing situation. We will review their answers and determine a plan for locating safe appropriate housing. Urban Triage has partnerships with property owners and will use those relationships to quickly rehouse participants.

2.Urban Triage believes in creating an environment of agency and mutual respect. Our Trauma-informed Case Managers work alongside survivors to learn about their needs and goals. We assist participants in creating a plan to meet their goals. The planning process is participant-led and can be changed at any time to meet one’s changing needs. Staff will not use punitive measures with program participants.

3.Urban Triage provides a program called Supporting Health Black Families. This program is a 12-week personal leadership and change workgroup that empowers and inspires breakthroughs and transformation in Black people, families and communities. This program provides tools and cultivates a space to unpack one’s trauma and heal while learning the root of it all. Participants gain a better understanding of trauma and how it shows up in their lives. Participants will build an analysis of white supremacy racism and identify the impact on oneself and one’s perceptions, which lead to disempowerment and the embodiment of an inferiority complex. This program increases Black personal wellness and community wellness. Participants in all of our programs are encouraged to participate in Supporting Healthy Black Families. Additionally, staff attend the CoC sponsored training on domestic violence and engage in other professional development opportunities.

4.Our Trauma-informed Case Managers operate with the understanding that all participants have strengths. Case managers work with participants to assess individual strengths, build upon them and develop new strengths. Assessment tools and case plans are strengths-based. Development of case plans is participant led and honors their goals and plans for the future.

5.Our initiative is culturally competent and responsive to the needs of diverse populations. We provide services that are sensitive to the cultural backgrounds and experiences of survivors and address the unique needs of marginalized communities. Urban Triage staff will attend the CoC’s annual training on Equal Access.

6.Urban Triage offers a variety of programs that create opportunities for connection for program participants. These include

- a. Supporting Healthy Black Families (described above)
- b.Supporting Healthy Black Agriculture: This is a 12-week leadership workgroup designed to empower and inspire breakthroughs and transformation in Black communities. Our workgroup teaches the basics of growing your own food as well as the entrepreneurial benefits/opportunities in the agriculture field.
- c.Supporting Healthy Black Youth: This workgroup provides youth with the

tools, skills and space to explore their character, their feelings, motives, and desires through creative arts such as hip hop, creative writing, photography, videography, trauma recovery, healing, and personal development.

d. Community Events: Throughout the year, Urban Triage hosts a variety of community events throughout Dane County. These events are free and open to all community members.

7. Urban Triage will provide support to survivors who are parenting. Again, they will be able to attend our Supporting Healthy Black Families workgroup that will provide education and build natural supports. Staff will work with survivors to learn about their needs for parenting supports and will work to provide those or make referrals to community partners.

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

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

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

(limit 2,500 characters)

Urban Triage believes that feedback from program participants is necessary to enhance our programming. Currently, our agency gathers involves people with lived experience in evaluation of our programs in the following ways:

Surveys: This is one of the most popular methods we use to collect client feedback. We email surveys and post them on our website/social media pages. The surveys involve multiple-choice, questions, rating scales and open-ended questions.

Focus Groups: This involves bringing together a small group of clients to discuss their experiences with our organization. For the new program, we will work to bring together participants with a range of lived experience to get input on the program policies and procedures. Input will be sought and considered on regular basis.

Customer Reviews: Participants can leave reviews on our website, social media pages, or third-party sites like Yelp or Google Reviews. We use these reviews to identify areas for improvement and respond to concerns.

Monitor Social Media: We monitor social medial platforms like Twitter, Facebook, and Instagram to see what individuals are saying about us in real time.

For this project, we will communicate with Domestic Abuse Intervention Services, the largest local DV provider, to see if their participant feedback group has provided general feedback/thoughts on operation of housing programs and we will incorporate that information from program start.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/13/2023
1C-7. PHA Moving On Preference	No	PHA Moving on Pre...	09/13/2023
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/18/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/14/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	09/25/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/11/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	09/11/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/12/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/12/2023
1E-5b. Local Competition Selection Results	Yes	Final Project Sco...	09/19/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	FY 2023 HDX Compe...	09/12/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/18/2023
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving on Preference

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores for All Projects

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: FY 2023 HDX Competition Report

Attachment Details

Document Description: Housing Leveraging Commitment

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	07/28/2023
1B. Inclusive Structure	09/25/2023
1C. Coordination and Engagement	09/25/2023
1D. Coordination and Engagement Cont'd	09/25/2023
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/25/2023
2B. Point-in-Time (PIT) Count	09/25/2023
2C. System Performance	09/22/2023
3A. Coordination with Housing and Healthcare	09/25/2023
3B. Rehabilitation/New Construction Costs	09/22/2023
3C. Serving Homeless Under Other Federal Statutes	09/22/2023

4A. DV Bonus Project Applicants	09/25/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

Madison Community Development Authority HCV Homeless Preference

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

CDA Policy

Local preferences will be used to select families from the waiting list. The CDA has selected the following system to apply local preferences:

The CDA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding. Next, the CDA will offer a preference to any family that has been referred under the Family Unification Program, the Moving Up Pilot Program, the Mainstream Voucher Program, or the Emergency Housing Voucher Program. Then,

- 1st Priority Involuntarily displaced by federally declared disaster or FUP Youth Assistance expiration
- 2nd Priority Elderly or disabled families or families with minor children, who live, work, or attend school within the City of Madison, and who are homeless or a victim of domestic abuse or have a rent burden
- 3rd Priority Elderly or disabled families or families with minor children, who live, work, or attend school within the City of Madison
- 4th Priority Applicants who live, work, or attend school within the City of Madison, and who are homeless or a victim of domestic abuse or have a rent burden
- 5th Priority Applicants who live, work, or attend school within the City of Madison
- 6th Priority Elderly or disabled families or families with minor children, who live outside of the City of Madison, but who live, work, or attend school in Dane County, and who are homeless or a victim of domestic abuse or have a rent burden
- 7th Priority Elderly or disabled families or families with minor children, who live outside of the City of Madison, but who live, work, or attend school in Dane County
- 8th Priority Applicants who live outside of the City of Madison, but who live, work, or attend school in Dane County, and are homeless or a victim of domestic abuse or have a rent burden
- 9th Priority Applicants who live outside of the City of Madison, but who live, work, or attend school in Dane County

Dane County Housing Authority

HCV Homeless Preference

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

DCHA Policy

Local preferences will be aggregated by assigning points for each local preference. The more preference points an applicant has, the higher the applicant's place on the waiting list. The PHA will offer applicant families one (1) "super-preference":

1. The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding. [5 points]
2. The PHA will offer a preference to any family that, due to health/safety concerns or disaster (flood, fire, tornado, etc.) was displaced or faces imminent displacement from federally subsidized housing within Dane County [5 points]
3. The PHA will offer a preference to families that include victims of domestic violence, dating violence, sexual assault, or stalking who is seeking an emergency transfer under VAWA from the PHA's public housing program or other covered housing program operated by the PHA. [5 points]
4. The PHA will offer a preference to FUP youth families that will be terminated due to the time limit on assistance. [5 points]

After "super-preferences", the PHA will use the following local preferences to select families from the waiting list:

Applicants can be eligible for one housing preference and should select the most applicable of the preferences below (or none):

1. Transitioning out of institutional and other segregated settings [3 points]
2. At serious risk of institutionalization [3 points]
3. Currently experiencing homelessness [3 points]
4. Previously experienced homelessness and currently a client in a rapid rehousing project [3 points]
5. Previously experienced homelessness and currently a client in a permanent supportive project [2 points]

6. Rent Burden: Paying more than 40% of their income for rent and utilities [2 points]

In addition to a housing preference, applicants can also qualify for the Residency Preference [1 point]

Preference Definitions:

1. Transitioning out of institutional or other segregated settings

Institutional or other segregated settings include, but are not limited to:

- (1) congregate settings populated exclusively or primarily with individuals with disabilities;
- (2) congregate settings characterized by regimentation in daily activities, lack of privacy or autonomy, policies limiting visitors, or limits on individuals' ability to engage freely in community activities and to manage their own activities of daily living; or
- (3) settings that provide for daytime activities primarily with other individuals with disabilities

2. At serious risk of institutionalization

Includes an individual with a disability who as a result of a public entity's failure to provide community services or its cut to such services will likely cause a decline in health, safety, or welfare that would lead to the individual's eventual placement in an institution. This includes individuals experiencing lack of access to supportive services for independent living, long waiting lists for or lack of access to housing combined with community-based services, individuals currently living under poor housing conditions or homeless with barriers to geographic mobility, and/or currently living alone but requiring supportive services for independent living. A person cannot be considered at serious risk of institutionalization unless the person has a disability. An individual may be designated as at serious risk of institutionalization either by a health and human services agency, by a community-based organization, or by self-identification

3. Currently experiencing homelessness

A "homeless family" includes any individual or family who lacks a fixed, regular and adequate night time residence and has a primary night time residence that is:

- (a) A supervised publicly/privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters and transitional housing);
- (b) An institution that provides a temporary residence for individuals intended to be institutionalized; or
- (c) A public/private place not designed for, or ordinarily used for sleeping for human beings.

Dane County Housing Authority Public Housing Homeless Preference

4-III.B. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use.

Local Preferences [24 CFR 960.206]

PHAs are permitted to establish local preferences and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources [24 CFR 960.206(a)].

DCHA Policy

The Dane County Housing Authority uses the 3 former Federal preferences as its local preferences. Those preferences include the following. They are described below in detail.

1. Currently living in substandard housing (including homeless families)
2. Involuntarily displaced;
3. Currently paying more than 50% of income for rent and utilities (Rent Burden)

1. Substandard Housing: A unit is substandard because it:

- a. Does not have operable indoor plumbing;
- b. Does not have a useable flush toilet in the unit for the exclusive use of the family;
- c. Does not have a usable bathtub/shower in the unit for the exclusive use of the family;
- d. Does not have electricity, or has inadequate or unsafe electrical service;
- e. Does not have a safe or adequate source of heat;
- f. Should, but does not, have a safe or adequate source of heat;
- g. Has been declared unfit for habitation by an agency or unit of government.
 - (i) Dilapidated Unit: A unit is dilapidated if it:
 - (a) Does not provide safe and adequate shelter, and
 - (b) Endangers the health, safety, or well being of a family; or
 - (c) Has one or more critical defects, or a combination of intermediate defects in sufficient number or extent to require considerable repair or rebuilding. (These defects may involve original construction, or result from continued neglect or lack of repair or serious damage to the structure.)
 - (ii) Homeless Family: An applicant who is a "homeless family" meets the criteria of substandard housing. A "homeless family" includes any individual or family who lacks a fixed, regular and adequate night time residence and has a primary night time residence that is:

Madison Community Development Authority

Moving On Preference

- 10th Priority Elderly or disabled families or families with minor children, who live outside of Dane County, and who are homeless or a victim of domestic abuse or have a rent burden
- 11th Priority Elderly or disabled families or families with minor children, who live outside of Dane County
- 12th Priority Applicants who live outside of Dane County, and who are homeless or a victim of domestic abuse or have a rent burden
- 13th Priority Applicants who live outside of Dane County

Definitions for CDA Preferences

Eligible applicants are assigned a place on the waiting list based upon their preference(s) and the date and time a complete application is received by the CDA. Preferences are categories for people with priority status and determine how quickly an applicant may move to the top of the waiting list. Claiming a preference does not automatically grant an applicant a preference. Obtaining a preference does not guarantee admission into the HCV program. Applicants must meet all qualifications in order to receive assistance, regardless of preference status. Preferences may be claimed at the time of application or at any time prior to admission. The CDA maintains the following preferences:

Family Unification Preference

The Family Unification Program (FUP) targets two different populations:

1. Families for whom the lack of adequate housing is the primary factor in:
 - The imminent placement of the family's child(ren) in out-of-home care, or
 - The delay in the discharge of the child(ren) to the family from out-of-home care
2. Youth at least 18 years old and not more than 24 years old who:
 - Left foster care at age 15 or older, or who will leave foster care within 90 days, in accordance with a transition plan described in section 475(5)(H) of the Social Security Act; and
 - Are homeless or are at risk of homelessness

Moving Up Preference

The Moving Up Pilot program targets persons living in permanent supportive housing (PSH) who no longer need intensive services and want to move into affordable housing in the community.

An applicant receives a *Moving Up* preference when the applicant has been referred to the CDA by an assigned supportive housing agency partner (e.g. The Road Home Dane County) and per demonstrated self-sufficiency and housing stability, as defined by an assessment created for the pilot.

Mainstream Preference

Mainstream vouchers assist non-elderly persons with disabilities, under HUD's definition of "persons with disabilities." An applicant receives a Mainstream Preference when the family is

Dane County Housing Authority

Moving On Preference

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

DCHA Policy

Local preferences will be aggregated by assigning points for each local preference. The more preference points an applicant has, the higher the applicant's place on the waiting list. The PHA will offer applicant families one (1) **"super-preference"**:

1. The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding. [5 points]
2. The PHA will offer a preference to any family that, due to health/safety concerns or disaster (flood, fire, tornado, etc.) was displaced or faces imminent displacement from federally subsidized housing within Dane County [5 points]
3. The PHA will offer a preference to families that include victims of domestic violence, dating violence, sexual assault, or stalking who is seeking an emergency transfer under VAWA from the PHA's public housing program or other covered housing program operated by the PHA. [5 points]
4. The PHA will offer a preference to FUP youth families that will be terminated due to the time limit on assistance. [5 points]

After "super-preferences", the PHA will use the following local preferences to select families from the waiting list:

Applicants can be eligible for one housing preference and should select the most applicable of the preferences below (or none):

1. Transitioning out of institutional and other segregated settings [3 points]
2. At serious risk of institutionalization [3 points]
3. Currently experiencing homelessness [3 points]
4. Previously experienced homelessness and currently a client in a rapid rehousing project [3 points]
5. Previously experienced homelessness and currently a client in a permanent supportive project [2 points]

6. Rent Burden: Paying more than 40% of their income for rent and utilities [2 points]

In addition to a housing preference, applicants can also qualify for the Residency Preference [1 point]

Preference Definitions:

1. Transitioning out of institutional or other segregated settings

Institutional or other segregated settings include, but are not limited to:

- (1) congregate settings populated exclusively or primarily with individuals with disabilities;
- (2) congregate settings characterized by regimentation in daily activities, lack of privacy or autonomy, policies limiting visitors, or limits on individuals' ability to engage freely in community activities and to manage their own activities of daily living; or
- (3) settings that provide for daytime activities primarily with other individuals with disabilities

2. At serious risk of institutionalization

Includes an individual with a disability who as a result of a public entity's failure to provide community services or its cut to such services will likely cause a decline in health, safety, or welfare that would lead to the individual's eventual placement in an institution. This includes individuals experiencing lack of access to supportive services for independent living, long waiting lists for or lack of access to housing combined with community-based services, individuals currently living under poor housing conditions or homeless with barriers to geographic mobility, and/or currently living alone but requiring supportive services for independent living. A person cannot be considered at serious risk of institutionalization unless the person has a disability. An individual may be designated as at serious risk of institutionalization either by a health and human services agency, by a community-based organization, or by self-identification

3. Currently experiencing homelessness

A "homeless family" includes any individual or family who lacks a fixed, regular and adequate night time residence and has a primary night time residence that is:

- (a) A supervised publicly/privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters and transitional housing);
- (b) An institution that provides a temporary residence for individuals intended to be institutionalized; or
- (c) A public/private place not designed for, or ordinarily used for sleeping for human beings.

Dear Department of Housing and Urban Development,

I hope this message finds you well. I am writing to you on behalf of the Lived Experience Council (LEC) in Dane County, and I wanted to share some of our recent activities and achievements with you.

The Lived Experience Council has been actively engaged in our local Continuum of Care (CoC) and the Homeless Service Consortium (HSC). We have maintained a 100% attendance record at all meetings, demonstrating our commitment to addressing homelessness in our community. Moreover, we have taken proactive steps to contribute to the cause of homelessness prevention and support, as outlined below:

- **Leadership Development Conferences:** LEC members have actively participated in leadership development conferences, equipping themselves with the knowledge and skills necessary to make a meaningful impact in our community.
- **Men's Purpose-Built Shelter:** We have been instrumental in the design and implementation of a new purpose-built shelter for men, ensuring that it meets the unique needs of individuals experiencing homelessness.
- **Community Engagement:** LEC has actively participated in community events aimed at promoting initiatives to support those experiencing homelessness, fostering a sense of unity and support within our community.
- **Advocacy:** LEC has provided advocacy support on the issue of homelessness, working to raise awareness, challenge stigmas, and advocate for effective policies and solutions.
- **Legislative Engagement:** We have contacted legislators at both local and national levels, urging them to support policies that benefit individuals and families experiencing homelessness, ensuring their voices are heard.
- **Funding Review:** LEC members have been actively involved with the funding review team, ensuring that resources are allocated effectively to address homelessness in our area.

In addition to our active participation, I am proud to inform you that a member of LEC currently holds the position of President of the HSC Board of Directors, further highlighting our dedication and leadership within the CoC. Your continued support would be invaluable in helping us continue our efforts to combat homelessness and create a more inclusive and supportive environment for all.

Thank you for your commitment to making a difference in our community.

Sincerely,

Takisha Jordan

Founder of the Lived Experience Council of Dane County

Aunelis Leslie

Lived Experience Council liaison for the Bartillion Shelter Project

Chara Taylor

President of the HSC Board of Directors and appointee for Lived Experience Council

Web Posting of Local Competition Deadline – Attachment for 1E-1

Agencies interested in applying for funds in the FY2023 CoC Competition must complete application materials below and in e-snaps and submit them to hsc@cityofmadison.com by August 29, 2023 at Noon. **Late or incomplete applications will not be considered. Please do not wait until the deadline to submit the application. No grace period will be granted.**

Competition Documents (approved by CoC Board of Directors on May 3, 2023)
[Review, Rating & Ranking Policy](#)
[Schedule of Events](#)

New Projects
[FY2023 CoC New Project Application - Supplemental Questions](#)
[FY2023 CoC New Project Application \(E-snaps\)](#)
[Scoring Tool FY2023 - New Projects](#)

Special Renewal Projects - No projects meet criteria for Special Renewal
[FY2023 CoC Special Renewal Application - Supplemental Questions](#)
[Scoring Tool FY2023 - Special Renewal](#)

Renewal Projects
[FY2023 CoC Renewal Project Application - Supplemental Questions](#)
[Scoring Tool FY2023 - Renewal](#)

English >

Type here to search

3:55 PM
7/17/2023

Kopp Mueller, Torrie

From: Kopp Mueller, Torrie
Sent: Monday, September 11, 2023 2:30 PM
To: Meghan Mietchen; Bria Holthe; Sandy Hahn; Andrea Sanders
Subject: CoC Board Approved Funding Slate

Hi All-

The HSC Board of Directors met this afternoon to approve the CoC-funding slate. This email serves as notification that your agency's renewal project was accepted. The new project was rejected. It had the lowest average score of all new projects and there was not enough funding for all projects. The hope is that by concentrating on the current project, the performance will continue to improve. Below, please find the slate which indicates where your project ranks, the average score and amount of funding. Please reach out with any questions. Once the CoC Competition is complete, I will work to provide debriefing information so you can know how your application scored on each question and any comments that reviewers provided.

Thanks, Torrie

Madison/Dane Continuum of Care Project Listing

Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds- \$201,047 from LSS
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0
Institute for Community Alliances	HMS	NA	Accepted	7	\$175,450	\$175,450	0
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0
Tier 2							
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0
Dane County	RA - Expansion (Reallocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000	\$201,047
Urban Triage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	\$0	0
Not Ranked							
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506		
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646		
City of Madison	YYA Connections	NA	Accepted	Not Ranked	\$360,000		

OUR MADISON
INCLUSIVE, INNOVATIVE & THRIVING

(she | her | hers)



Torrie Kopp Mueller | CoC Coordinator, Homeless Services Consortium
Department of Planning and Community & Economic Development
Community Development Division

Madison Municipal Building | Suite 300
215 Martin Luther King, Jr. Boulevard
Madison, Wisconsin 53703-3348

Mail P.O. Box 2527 | Madison, Wisconsin 53701-2627

Tel 608 266 6254 | *Fax* 608 261 9661

Email tkoppmueller@cityofmadison.com | *Web* cityofmadison.com/cdd



In compliance with State public records law, the City of Madison retains copies of ALL email messages to and from this mailbox. Email messages may be released in response to appropriate open record requests.

PLEASE CONSIDER THE ENVIRONMENT BEFORE PRINTING THIS EMAIL. ♻️

Kopp Mueller, Torrie

From: Kopp Mueller, Torrie
Sent: Monday, September 11, 2023 2:24 PM
To: Brandi Grayson; 'Zandra Hagberg'
Subject: CoC Board Approved Funding Slate

Hi Brandi and Zandra-

The HSC Board of Directors met this afternoon to approve the CoC-funding slate. This email serves as notification that your agency's project was accepted, but at a reduced amount of \$200,241. The Board ranked new projects based on average score and there were not enough funds to fully fund the Urban Triage project. The Board reduced funding for another project in order to have funding for Urban Triage to start a smaller project. Below, please find the slate which indicates where your project ranks, the average score and amount of funding. Please reach out with any questions. Once the CoC Competition is complete, I will work to provide debriefing information so you can know how your application scored on each question and any comments that reviewers provided.

Thanks, Torrie

Madison/Dane Continuum of Care Project Listing

Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds- \$201,047 from LSS
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0
Institute for Community Alliances	HMIS	NA	Accepted	7	\$175,450	\$175,450	0
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0
Tier 2							
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0
Dane County	RA - Expansion (Reallocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000	\$201,047
Urban Triage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	\$0	0
Not Ranked							
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506		
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646		
City of Madison	YYA Connections	NA	Accepted	Not Ranked	\$360,000		

OUR MADISON
INCLUSIVE, INNOVATIVE & THRIVING

(the | her | hers) **Torrie Kopp Mueller** | CoC Coordinator, Homeless Services Consortium
Department of Planning and Community & Economic Development



Community Development Division
Madison Municipal Building | Suite 300
215 Martin Luther King, Jr. Boulevard
Madison, Wisconsin 53703-3348



Mail P.O. Box 2627 | Madison, Wisconsin 53701-2627
Tel 608 266 6254 | **Fax** 608 261 9661
Email tkoppmueller@cityofmadison.com | **Web** cityofmadison.com/cdd



In compliance with State public records law, the City of Madison retains copies of ALL email messages to and from this mailbox. Email messages may be released in response to appropriate open record requests.

*** Please consider the environment before printing this email. ***

Kopp Mueller, Torrie

From: Kopp Mueller, Torrie
Sent: Monday, September 11, 2023 2:28 PM
To: Dux, Kristina; Hinkfuss, Brad; Karen Andro - work
Subject: CoC Board Approved Funding Slate

Hi All-

The HSC Board of Directors met this afternoon to approve the CoC-funding slate. This email serves as notification that your agency's renewal project was accepted. Your new expansion project was accepted, but at a reduced amount of \$350,000. There was a lot of interest in funding the additional services for your project and expanding the work of Urban Triage. In order to make both happen, it was decided to reduce Dane County's Expansion request to provide funding for Urban Triage to start a project. I will return the application to you in e-snaps so you are able to revise the budget. Below, please find the slate which indicates where your project ranks, the average score and amount of funding. Please reach out with any questions. Once the CoC Competition is complete, I will work to provide debriefing information so you can know how your application scored on each question and any comments that reviewers provided.

Thanks, Torrie

Madison/Dane Continuum of Care Project Listing

Tier 1

Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds- \$201,047 from LSS
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0
Institute for Community Alliances	HMIS	NA	Accepted	7	\$175,450	\$175,450	0
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0
Tier 2							
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0
Dane County	RA - Expansion (Reallocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000	\$201,047
Urban Trage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	50	0
Not Ranked							
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506		
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646		
City of Madison	YYA Connections	NA	Accepted	Not Ranked	\$360,000		

OUR MADISON
INCLUSIVE, INNOVATIVE & THRIVING

1 | the | her | hers |



Torrie Kopp Mueller | CoC Coordinator, Homeless Services Consortium
Department of Planning and Community & Economic Development
Community Development Division

Madison Municipal Building | Suite 300
215 Martin Luther King, Jr. Boulevard
Madison, Wisconsin 53705-3343

Mail P.O. Box 2627 | Madison, Wisconsin 53701-2627

Tel 608 266 6254 | Fax 608 261 9661

Email tkoppmueller@cityofmadison.com | Web cityofmadison.com/cdd



In conformance with State public records law, the City of Madison retains copies of ALL email messages to and from this mailbox. Email messages may be released in response to appropriate open record requests.

» » » Please consider the environment before printing this email. * * *

Kopp Mueller, Torrie

From: Kopp Mueller, Torrie
Sent: Monday, September 11, 2023 2:19 PM
To: Sarah Churchill; Derek Blum; Kim Sutter; Melissa Sorensen; Adam Smith; Dominique Christian; Meghan Salzwedel ; Hinkfuss, Brad; Karen Andro - work
Subject: CoC Board Approved Funding Slate

Good afternoon-

The HSC Board of Directors met this afternoon to approve the CoC-funding slate. This email serves as notification that your agency's project was accepted. Below, please find the slate which indicates where your project ranks, the average score and amount of funding. Please reach out with any questions. Once the CoC Competition is complete, I will work to provide debriefing information so you can know how your application scored on each question and any comments that reviewers provided.

Thanks, Torrie

Madison/Dane Continuum of Care Project Listing

Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds- \$201,047 from LSS	Tier
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0	Tier 1
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0	
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0	
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0	
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0	
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0	
Institute for Community Alliances	HMIS	NA	Accepted	7	\$175,450	\$175,450	0	
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0	
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0	
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0	
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0	
Tier 2								
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0	
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0	
Dane County	RA - Expansion (Reallocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000	\$201,047	
Urban Trage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0	
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	\$0	0	
Not Ranked								
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506			
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646			
City of Madison	YYA Connections	NA	Accepted	Not Ranked	\$360,000			

OUR MADISON
INCLUSIVE, INNOVATIVE & THRIVING

[she | her | hers]



Torrie Kopp Mueller | CoC Coordinator, Homeless Services Consortium
Department of Planning and Community & Economic Development

Community Development Division

Madison Municipal Building | Suite 300

215 Martin Luther King Jr. Boulevard

Madison, Wisconsin 53703-3348

Mail P.O. Box 2627 | Madison, Wisconsin 53701-2627

Tel 608 266 6254 | *Fax* 608 261 9661

Email tkoppmueller@cityofmadison.com | *Web* cityofmadison.com/cdd



In compliance with State public records law, the City of Madison retains copies of ALL email messages to and from this mailbox. Email messages may be released in response to appropriate open record requests.

*** Please consider the environment before printing this email. ***

Kopp Mueller, Torrie

From: Kopp Mueller, Torrie
Sent: Monday, September 11, 2023 2:24 PM
To: Brandi Grayson; 'Zandra Hagberg'
Subject: CoC Board Approved Funding Slate

Hi Brandi and Zandra-

The HSC Board of Directors met this afternoon to approve the CoC-funding slate. This email serves as notification that your agency's project was accepted, but at a reduced amount of \$200,241. The Board ranked new projects based on average score and there were not enough funds to fully fund the Urban Triage project. The Board reduced funding for another project in order to have funding for Urban Triage to start a smaller project. Below, please find the slate which indicates where your project ranks, the average score and amount of funding. Please reach out with any questions. Once the CoC Competition is complete, I will work to provide debriefing information so you can know how your application scored on each question and any comments that reviewers provided.

Thanks, Torrie

Madison/Dane Continuum of Care Project Listing

Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds- \$201,047 from LSS	Tier 1
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0	
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0	
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0	
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0	
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0	
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0	
Institute for Community Alliances	HMIS	NA	Accepted	7	\$175,450	\$175,450	0	
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0	
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0	
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0	
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0	
Tier 2								
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0	
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0	
Dane County	RA - Expansion (Resilocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000	\$201,047	
Urban Triage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0	
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	\$0	0	
Not Ranked								
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506			
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646			
City of Madison	YYA Connections	NA	Accepted	Not Ranked	\$360,000			

OUR MADISON
INCLUSIVE, INNOVATIVE & THRIVING

[the | her | hers]



Torrie Kopp Mueller | Co-C Coordinator, Homeless Services Consortium
Department of Planning and Community & Economic Development
Community Development Division

Madison Municipal Building | Suite 300
215 Martin Luther King, Jr. Boulevard
Madison, Wisconsin 53703-3343

Mail P.O. Box 2627 | Madison, Wisconsin 53701-2627
Tel 608.266.6254 | Fax 608.261.9661
Email tkoppmueller@cityofmadison.com | Web cityofmadison.com/cdd



In compliance with State public records law, the City of Madison retains copies of ALL email messages to and from this mailbox. Email messages may be released in response to appropriate open record requests.

» » » Please consider the environment before printing this email. « « «

Kopp Mueller, Torrie

From: Kopp Mueller, Torrie
Sent: Monday, September 11, 2023 2:28 PM
To: Dux, Kristina; Hinkfuss, Brad; Karen Andro - work
Subject: CoC Board Approved Funding Slate

Hi All-

The HSC Board of Directors met this afternoon to approve the CoC-funding slate. This email serves as notification that your agency's renewal project was accepted. Your new expansion project was accepted, but at a reduced amount of \$350,000. There was a lot of interest in funding the additional services for your project and expanding the work of Urban Triage. In order to make both happen, it was decided to reduce Dane County's Expansion request to provide funding for Urban Triage to start a project. I will return the application to you in e-snaps so you are able to revise the budget. Below, please find the slate which indicates where your project ranks, the average score and amount of funding. Please reach out with any questions. Once the CoC Competition is complete, I will work to provide debriefing information so you can know how your application scored on each question and any comments that reviewers provided.

Thanks, Torrie

Madison/Dane Continuum of Care Project Listing

Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds- \$201,047 from LSS
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0
Institute for Community Alliances	HMIS	NA	Accepted	7	\$175,450	\$175,450	0
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0
Tier 2							
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0
Dane County	RA - Expansion (Relocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000	\$201,047
Urban Triage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	\$0	0
Not Ranked							
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506		
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646		
City of Madison	YVA Connections	NA	Accepted	Not Ranked	\$360,000		

OUR MADISON
INCLUSIVE, INNOVATIVE & THRIVING

Torrie Kopp Mueller | CoC Coordinator, Homeless Services Consortium
Department of Planning and Community & Economic Development
Community Development Division



Madison Municipal Building | Suite 300
215 Martin Luther King, Jr. Boulevard
Madison, Wisconsin 53703-3343

Mail P.O. Box 2527 | Madison, Wisconsin 53701-2527

Tel 608 266 6254 | **Fax** 608 261 9661

Email tkoppmueller@cityofmadison.com | **Web** cityofmadison.com/cdd



In compliance with State public records law, the City of Madison retains copies of ALL email messages to and from this mailbox. Email messages may be released in response to appropriate open record requests.

*** Please consider the environment before printing this email. ***

Kopp Mueller, Torrie

From: Kopp Mueller, Torrie
Sent: Monday, September 11, 2023 2:30 PM
To: Meghan Mietchen; Bria Holthe; Sandy Hahn; Andrea Sanders
Subject: CoC Board Approved Funding Slate

Hi All-

The HSC Board of Directors met this afternoon to approve the CoC-funding slate. This email serves as notification that your agency's renewal project was accepted. The new project was rejected. It had the lowest average score of all new projects and there was not enough funding for all projects. The hope is that by concentrating on the current project, the performance will continue to improve. Below, please find the slate which indicates where your project ranks, the average score and amount of funding. Please reach out with any questions. Once the CoC Competition is complete, I will work to provide debriefing information so you can know how your application scored on each question and any comments that reviewers provided.

Thanks, Torrie

Madison/Dane Continuum of Care Project Listing

Tier 1/2

Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds \$201,047 from LSS
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0
Institute for Community Alliances	HMS	NA	Accepted	7	\$175,450	\$175,450	0
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0
Tier 2							
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0
Dane County	RA - Expansion (Reallocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000	\$201,047
Urban Triage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	\$0	0
Not Ranked							
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506		
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646		
City of Madison	YYA Connections	NA	Accepted	Not Ranked	\$360,000		

OUR MADISON
INCLUSIVE, INNOVATIVE & THRIVING

(she | her | hers)



Tornie Kopp Mueller | Co-C Coordinator, Homeless Services Consortium
Department of Planning and Community & Economic Development
Community Development Division

Madison Municipal Building | Suite 300
215 Martin Luther King, Jr. Boulevard
Madison, Wisconsin 53703-3343

Mail P.O. Box 2627 | Madison, Wisconsin 53701-2627
Tel 608.266.6254 | **Fax** 608.261.9661
Email tkoppmueller@cityofmadison.com | **Web** cityofmadison.com/cdd



In compliance with State public records law, the City of Madison retains copies of ALL email messages to and from this mailbox. Email messages may be released in response to appropriate open record requests.

» » » Please consider the environment before printing this email. » » »

FY23 CoC Funding Slate, Amended on 9/14/23 due to HUD Updates on ARD Report, see memo with details

Madison/Dane Continuum of Care Project Listing (Updated 9/14/23 due to HUD Updates on ARD Report)								Tier 1 Amount	ARD(-YHDP) + CoC Bonus+DV Bonus
Agency	Project Name	Average Score	Accepted or Rejected	Rank (if Accepted)	Requested Funding Amount	Total Recommended Funding Amount	Reallocated Funds-\$201,047 from LSS	\$3,457,976	\$4,294,407
Tellurian	PHP Consolidation	151.6	Accepted	1	\$439,992	\$439,992	0	\$3,017,984	\$3,854,415
Dane County	Rental Assistance	147.15	Accepted	2	\$1,211,734	\$1,211,734	0	\$1,806,250	\$2,642,681
The Salvation Army	RISE	139.7	Accepted	3	\$328,964	\$328,964	0	\$1,477,286	\$2,313,717
Porchlight	HOSTS	137.25	Accepted	4	\$223,568	\$223,568	0	\$1,253,718	\$2,090,149
Tellurian	Willy Street SRO	136.9	Accepted	5	\$82,944	\$82,944	0	\$1,170,774	\$2,007,205
Porchlight	Housing First Leasing	136.6	Accepted	6	\$156,063	\$156,063	0	\$1,014,711	\$1,851,142
Institute for Community Alliances	HMIS	NA	Accepted	7	\$175,450	\$175,450	0	\$839,261	\$1,675,692
Institute for Community Alliances	Coordinated Entry	NA	Accepted	8	\$544,011	\$544,011	0	\$295,250	\$1,131,681
The Road Home	Foundations	125.3	Accepted	9	\$146,683	\$146,683	0	\$148,567	\$984,998
Housing Initiatives	Permanent Housing for Chronically Homeless	123.65	Accepted	10	\$91,000	\$91,000	0	\$57,567	\$893,998
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$57,567	0	\$0	\$836,431
Tier 2								Tier 2 amount	
								\$836,431	
Community Action Coalition	Dane County RRH	94.3	Accepted	11	\$116,798	\$59,231	0	\$777,200	
The Salvation Army	Hearts of Hope (DV Bonus)	189.14	Accepted	12	\$228,724	\$228,724	0	\$548,476	
Dane County	RA - Expansion (Reallocation + CoC Bonus)	171.29	Accepted	13	\$384,450	\$350,000 \$348,235	\$201,047	\$200,241	
Urban Triage	Homeless Youth DV Initiative (DV Bonus + CoC Bonus)	159.5	Accepted	14	\$545,133	\$200,241	0	\$0	
Community Action Coalition	Dane County RRH Expansion	140.43	Rejected		\$80,300	\$0	0		
Not Ranked									
City of Madison	Planning Grant	NA	Accepted	Not Ranked	\$244,506 \$243,245				
City of Madison	Joint TH-RRH	NA	Accepted	Not Ranked	\$786,646				
City of Madison	YYA Connections	NA	Accepted	Not Ranked	\$360,000				

2023 HDX Competition Report

PIT Count Data for WI-503 - Madison/Dane County CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	630	855	701	624
Emergency Shelter Total	396	696	550	498
Safe Haven Total	0	0	0	0
Transitional Housing Total	133	72	68	47
Total Sheltered Count	529	768	618	545
Total Unsheltered Count	101	87	83	79

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	148	245	169	197
Sheltered Count of Chronically Homeless Persons	105	199	117	188
Unsheltered Count of Chronically Homeless Persons	43	46	52	9

2023 HDX Competition Report

PIT Count Data for WI-503 - Madison/Dane County CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	82	104	64	60
Sheltered Count of Homeless Households with Children	82	104	63	60
Unsheltered Count of Homeless Households with Children	0	0	1	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	66	42	48	39	38
Sheltered Count of Homeless Veterans	65	38	44	38	36
Unsheltered Count of Homeless Veterans	1	4	4	1	2

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

2023 HDX Competition Report
HIC Data for WI-503 - Madison/Dane County CoC

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	473	445	445	100.00%	28	28	100.00%	473	100.00%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	130	108	130	83.08%	0	0	NA	108	83.08%
RRH Beds	603	603	603	100.00%	0	0	NA	603	100.00%
PSH Beds	895	895	895	100.00%	0	0	NA	895	100.00%
OPH Beds	829	711	711	100.00%	0	0	NA	711	85.77%
Total Beds	2,930	2,762	2,784	99.21%	28	28	100.00%	2,790	95.22%

2023 HDX Competition Report
HIC Data for WI-503 - Madison/Dane County CoC

2023 HDX Competition Report

HIC Data for WI-503 - Madison/Dane County CoC

Notes

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

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

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

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

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	177	237	237	236

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

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	79	89	104	117

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	357	360	531	603

2023 HDX Competition Report
HIC Data for WI-503 - Madison/Dane County CoC

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for WI-503 - Madison/Dane County CoC

Measure 1: Length of Time Persons Remain Homeless

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

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	2690	2727	102	95	-7	59	49	-10
1.2 Persons in ES, SH, and TH	2805	2828	109	102	-7	61	53	-8

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	2831	2858	415	359	-56	184	127	-57
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	2951	2964	417	363	-54	193	135	-58

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	95	22	23%	5	5%	8	8%	35	37%
Exit was from ES	535	86	16%	36	7%	47	9%	169	32%
Exit was from TH	99	5	5%	7	7%	12	12%	24	24%
Exit was from SH	0	0		0		0		0	
Exit was from PH	367	22	6%	16	4%	19	5%	57	16%
TOTAL Returns to Homelessness	1096	135	12%	64	6%	86	8%	285	26%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	855	701	-154
Emergency Shelter Total	696	550	-146
Safe Haven Total	0	0	0
Transitional Housing Total	72	68	-4
Total Sheltered Count	768	618	-150
Unsheltered Count	87	83	-4

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	2840	2872	32
Emergency Shelter Total	2725	2770	45
Safe Haven Total	0	0	0
Transitional Housing Total	138	114	-24

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	237	188	-49
Number of adults with increased earned income	10	9	-1
Percentage of adults who increased earned income	4%	5%	1%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	237	188	-49
Number of adults with increased non-employment cash income	88	63	-25
Percentage of adults who increased non-employment cash income	37%	34%	-3%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	237	188	-49
Number of adults with increased total income	94	68	-26
Percentage of adults who increased total income	40%	36%	-4%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	101	100	-1
Number of adults who exited with increased earned income	14	21	7
Percentage of adults who increased earned income	14%	21%	7%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	101	100	-1
Number of adults who exited with increased non-employment cash income	19	29	10
Percentage of adults who increased non-employment cash income	19%	29%	10%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	101	100	-1
Number of adults who exited with increased total income	33	44	11
Percentage of adults who increased total income	33%	44%	11%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2482	2293	-189
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	771	758	-13
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	1711	1535	-176

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	2910	2961	51
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1002	1208	206
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1908	1753	-155

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	672	566	-106
Of persons above, those who exited to temporary & some institutional destinations	71	83	12
Of the persons above, those who exited to permanent housing destinations	78	126	48
% Successful exits	22%	37%	15%

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

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1905	1953	48
Of the persons above, those who exited to permanent housing destinations	840	670	-170
% Successful exits	44%	34%	-10%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	1381	1397	16
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1292	1309	17
% Successful exits/retention	94%	94%	0%

2023 HDX Competition Report
FY2022 - SysPM Data Quality
WI-503 - Madison/Dane County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	298	965	787	132	108	108	1507	1492	1699	357	360	531			
2. Number of HMIS Beds	298	965	787	132	108	108	1507	1492	1581	357	360	531			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	93.05	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	2105	2756	2774	183	138	114	1357	1431	1490	769	1218	1126	206	1047	848
5. Total Leavers (HMIS)	1588	2066	2217	104	74	70	209	233	272	328	576	455	104	679	575
6. Destination of Don't Know, Refused, or Missing (HMIS)	796	722	823	41	0	5	25	28	29	7	35	33	41	508	284
7. Destination Error Rate (%)	50.13	34.95	37.12	39.42	0.00	7.14	11.96	12.02	10.66	2.13	6.08	7.25	39.42	74.82	49.39

2023 HDX Competition Report
FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for WI-503 - Madison/Dane County CoC

Date of PIT Count

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

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/25/2023	Yes
2023 HIC Count Submittal Date	4/25/2023	Yes
2022 System PM Submittal Date	2/17/2023	Yes

August 25, 2022

Continuum of Care
215 Martin Luther King Jr Blvd 3rd floor
Madison, WI 53703

To Whom it May Concern,

This is a letter of commitment stating that The Alexander Company has partnered with The Salvation Army of Dane County in operating The Shield Apartments. The Shield Apartments is a new construction consisting of one 3-story building, containing 44 units: 16 studio/one bath and 28 one bedroom/one bath apartments. Thirty-three of the units are designated as supportive units. The units will include 22 units for survivors of domestic violence. The remaining 11 units will be available to applicants with income of 60% AMI or less. All of these units are privately funded and would not be using federal dollars.

Hearts of Hope, operated by The Salvation Army, will be serving 12 households with their Rapid Rehousing program and will have referral access to the 22 units designated for survivors of domestic violence.

If you have any further questions, please let me know.

Sincerely,



Joseph M. Alexander
President