

## 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:** AZ-500 - Arizona Balance of State CoC

**1A-2. Collaborative Applicant Name:** Arizona Department of Housing

**1A-3. CoC Designation:** UFA

**1A-4. HMIS Lead:** Arizona Department of Housing

## 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:

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

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	Yes	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	Yes	Yes	Yes
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes	Yes	Yes
9.	Law Enforcement	Yes	Yes	No
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	Yes	Yes
12.	Local Government Staff/Officials	Yes	Yes	No
13.	Local Jail(s)	Yes	Yes	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	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	No
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	Yes	Yes	No
30.	State Sexual Assault Coalition	Yes	Yes	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 Services	Yes	Yes	Yes
35.	Medicaid/Medicare Providers	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) Participation in the AZBOSCOC is an open and transparent process at all levels. Annual vacancies on the Governance Advisory Board (GAB) level are posted publicly through the statewide ADOH email and web posted bulletins and shared locally through the Local Coalitions/Continuums to End Homelessness (LCEH) level that are present in all 13 AZBOSCOC counties. Locally, participation in the LCEHs is open and promoted locally for new stakeholders. AZBOSCOC participation requirements for the GAB and LCEH are included in the AZBOSCOC Governance Charter.

2) New CoC members are solicited through the ADOH Special Needs webpage and are accessible to those who are hearing impaired through TTY capabilities and electronic formats to offer alternative accessibility formats to those with disabilities/different abilities. Materials can be requested in alternative formats to promote access and inclusivity for all people.

3) To ensure equity, in addition to general publication, both the GAB and LCEHs conduct targeted outreach and recruitment of key stakeholders including organizations and individuals serving specific communities and populations experiencing homelessness. This includes recruitment of peer run organizations and persons with lived experience with homelessness, mental illness or disabilities, domestic violence, and substance abuse history as well as racial and ethnic diversity. The GAB currently has 3 of its 15 members and the LCEHs have 16 members who have self-disclosed their lived experience with homelessness. Please note, the AZBOSCOC does not require disclosure of lived experience to avoid invoking any trauma or perceived stigma a member may feel from their experience. It is a goal of the GAB to generally reflect the diversity and demographics of the AZBOSCOC population. At the present time, there are six BIPOC in the 15 filled GAB seats (40%) consistent with AZBOSCOC demographics. Almost 400 individuals and organizations representing all facets and demographics of the AZBOSCOC, participate in LCEHs.

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 broad array of organizations and people listened to include the GAB which represents providers, state agencies, Tribal Nations, people with lived experience, advocacy partners and private sector developers. LCEH participants of almost 400, like the GAB, are diverse in race, ethnicity, and gender. This year AZ reinstated the Governor’s Interagency Community Council on Homelessness and Housing which convenes state agency leadership, providers, members of the public, including persons with lived experience, and underserved populations to develop strategies to end homelessness.

2)Information is communicated and gathered at all meetings that occur whether they are COC, affordable housing roundtables, stakeholder groups, or tribal entities. They are publicly noticed, and minutes posted online and on bulletin boards across the state. Inter-governmental meetings with other state and local partners make requests for information in open meetings or stakeholder surveys related to specific issues are taken. CA/UFA staff also attend all 13 county LCEHs at least once a year for site visits, listening sessions and technical assistance to ensure development of LCEH local strategic planning processes, awareness and familiarity with local homeless issues and realities.

3)All information is posted on the ADOH Special Needs Webpage and is accessible to those who are hearing impaired through TTY capabilities and electronic formats to offer alternative accessibility formats to those with disabilities/different abilities. Materials can be requested in alternative formats to promote access and inclusivity for all people. All meetings also have virtual capacity now for persons who might not be able to attend live meetings in person.

4)All information gathered is incorporated into AZBOSCOG planning and committee work to reduce homelessness. One example has been leveraging additional state housing resources. ADOH committed \$1.4 million directly to Balance of State CoC efforts to expand capacity of LCEHs including funding 16 FTE to expand CE, Case Conferencing and Outreach. Feedback regarding need for housing stock led to development of state and ARPA grants to expand hotels for shelter and housing, expansion of homeless employment programs, funding for tiny homes and set asides in the LIHTC program for special populations (e.g., persons experiencing homelessness} and rural communities which resulted in a record 8 BOS project awards.

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 AZBOSCOC issued public notice that the 2023 NOFO application was open to all eligible organizations including those not previously funded, on August 7, 2023 through the ADOH Bulletin (circulation of almost 4,000 individuals and organizations throughout AZ) and posting on the ADOH/AZBOSCOC web page. Notices stated that all entities (nonprofit, local government and Tribal Nations)are eligible to apply. The notice was also shared through the GAB, the LCEH membership distribution lists, open meetings and through other partner organizations and government entities (i.e.; ACESDV, ADES}. Specific notice was sent to DV providers via these outlets as well.

2)The bulletins on the website and other notices included the application process and timelines for both renewal and bonus/new applications. This included instructions, and links to publicly posted application templates for the bonus and renewal project and the submission process to ADOH. ADOH as lead agency and UFA for the AZBOSCOC hosted and posted a public webinar on 8/11/23 reviewing the application processes and giving an opportunity for Q and A which was subsequently posted as an FAQ for reference.

3)As with the application, the AZBOSCOC process, the scoring matrices, the ranking and review and the notification process were publicly noticed and posted through the ADOH bulletins and website postings. These processes were also discussed, and questions taken at the webinar. After completion of the scoring and review process, new project applicants were directly notified and a public bulletin and posting of accepted projects was made. Ultimately, two bonus project applications were received and submitted. No DV Bonus Project applications were received. All renewal and bonus projects were accepted.

4)All communication about the competition occurred electronically and contact information was provided if additional formats were required to accommodate persons with disabilities.

## 1C. Coordination and Engagement

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

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

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

**(limit 2,500 characters)**

1. State ESG funding is administered by the AZ Dept. of Economic Security (ADES). ADOH as the CA and UFA for the AZBOSCOC work closely with DES/ESG staff to align ESG/CoC activities, planning, funding and performance. Coordination includes regular monthly meetings, and weekly ADES Coffee Talk zoom sessions for shared providers. Most ESG funded homeless agencies are also CoC subrecipients, so ADES is an ex officio member of the AZBOSCOC GAB. Visits to communities are made jointly to listen and learn about local needs and attend the other program's trainings, and meetings. Both ESG and CoC staff participate in the other's funding processes. As the HMIS Lead, ADOH coordinates to ensure all ESG funded providers are participating in HMIS and have ADES and ESG appropriate reporting. Coordination extends beyond CoC and ESG funding to allocation and disbursement of COVID, ARPA and state funding administered by ADES, ADE, and ADOH.

2. Program evaluation includes: a) ESG staff participate in CoC Ranking and Review committee and ADOH CoC staff participate in DES ESG funding application review; b) as the HMIS lead, ADOH provides DES/ESG with HMIS data c) DES ESG has a seat on the GAB, attends LCEH lead agency meetings, HMIS and other Committee meetings, d) creation of shared ESG/COC program standards for PH-RRH; e) a shared Performance Management Plan for both programs; f) COC HMIS Administrator has created standard ESG and COC reporting tools and performance dashboards for evaluation, and g) ADES and ADOH are working on creation of a data warehouse between ADES, AZ's state Medicaid Program {AHCCCS}, and the three AZ COCs to create standardized project reporting based on HUD HMIS reports (ex: CAPER, SPM, APRs).

3. Local homelessness information is addressed in the Consolidated Plan which is annually reviewed and updated by CoC and ESG staff. ADOH as UFA also shares data summaries from the PIT count with the LCEHs and jurisdictions to inform local planning and consolidated plan development for other BOS entitlement communities.

4. The LCEHs provide information to local consolidated plan processes. Many jurisdictions participate in the LCEH meetings. In addition to PIT count information, ADOH works with its HMIS provider to create county level reporting including local SPM's, BNL's and Community Solutions inflow/outflow tracking dashboards. These tools are available to the LCEHs and their stakeholders to inform local planning, reporting and coordination.

<b>1C-3.</b>	<b>Ensuring Families are not Separated.</b>	
	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.	No

<b>1C-4.</b>	<b>CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.</b>	
	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

<b>1C-4a.</b>	<b>Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.</b>	
	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)**

School Districts and Youth Services Provider participation occurs at both the GAB and LCEH levels within the AZBOSCOC and this continues to be an area the AZBOSCOC is working to standardize participation across all geographic locations, especially in rural areas. Current key efforts include:

- a. The Arizona Department of Education State McKinney Vento Homeless Coordinator of Education Programs is a standing member of the GAB and assists in strategizing how to increase school districts involvement among the 200+ districts in the AZBOSCOC. The State Coordinator is also a conduit of COC information to the McKinney Vento Liaisons in their training to promote LCEH and case conferencing participation, coordination with local homeless providers and to access housing.
- b. LCEH membership consists of homeless liaisons from the school districts that receive McKinney Vento funds. Some LCEH's have participation from Head Start, Homeless Youth Connections, Juvenile Court Services, Runaway Homeless Youth, First Things First, Boy's and Girl's Club, Native American Community Action to name a few. The partnerships are cultivated through outreach and education to address family or individual needs, for those who are accessing homeless services for the first time.
- c. At least one LCEH, Coconino County, has a formal partnership (Memorandum of Understanding) with schools related to participation in Coordinated Entry. A number of other LCEHs are currently in discussion with school districts to establish a Memorandum of Understanding to work with the Homeless Service Providers.
- d. Some of the LCEHs have youth service providers including school programs present during LCEH meetings as a means to educate all members.
- e. In most cases as is common in smaller communities, it is a matter of personal relationships so that communication occurs about families in need and assisting with keeping children in the same school district and filling gaps with services. An additional access site offers GED and continuing education classes.
- f. LCEHs are engaged with local school districts to establish/maintain collaborations. The formal partnership is through membership in the LCEH.
- g. At least one LCEH is working with one of its local school districts to develop affordable housing on vacant school property.

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 ADOH Special Needs Housing Manual, which is part of all CoC contracts, delineates collaboration with Homeless School Liaisons, as appropriate, to ensure all children participating in the program are enrolled in the most suitable educational program and are connected to the related services within the community. This requirement is monitored annually by ADOH Contract Specialists.

In addition to subrecipients the AZBOSCOC supports LCEH work through investment of COC planning funds via contracts with LCEH lead agencies. These agreements include participation in CE and related protocols including notification of education rights and engagement of local McKinney Vento Liaisons in LCEH activities.

Within the LCEHs, as part of case conferencing and supportive service delivery, case managers and program staff regularly engage with McKinney Vento school liaisons as part of case plan activities. One recent example, a COC subrecipient case manager engaged her local McKinney Vento Liaison when a family fleeing domestic violence was about to decline a housing placement due to its location that would be in a different school district. The Achieve Housing case manager worked with the McKinney Vento liaison to ensure the children would continue in the present school district per their McKinney Vento rights.

In the coming year, ADOH and the AZBOSCOC will be reviewing all active policies and procedures as part of the full implementation of our UFA status. This will include updating all COC Coordinated Entry policies to strengthen requirements of notification of education rights as part of the intake and assessment process for all persons engaging in the system. The AZBOSCOC will also be implementing a COC wide Online Training Center(OTC) which will include information on McKinney Vento rights and processes for all COC stakeholders.

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

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

	MOU/MOA	Other Formal Agreement
1. Birth to 3 years	No	Yes
2. Child Care and Development Fund	No	Yes
3. Early Childhood Providers	No	Yes
4. Early Head Start	No	Yes
5. Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6. Head Start	Yes	Yes
7. Healthy Start	No	No

8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

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

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

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

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

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

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

(limit 2,500 characters)

1. In the past year, the AZBOSCOC has formalized its coordination and collaboration with the DV and sexual assault system at all levels of the AZBOSCOC. First, the GAB established and filled a permanent Board position for a leadership appointee from the AZ Coalition to End Sexual and Domestic Violence (ACESDV), the leading DV and SA advocacy coalition to inform system wide policy making. ACESDV leadership has also been invited to all AZBOSCOC work groups and committees. Second, as required in AZBOSCOC CE and LCEH contracts, LCEHs, where possible engage both COC and non COC funded DV programs into their local LCEH activities including planning, establishing local policies and practices, CE access, BNL coordination, prioritization, referrals and collaboration. Victim service providers are also invited to participate in AZBOSCOC committees and workgroups driving system wide policy making. One example of this system’s success has been in CE policy. Based on feedback from multiple LCEH homeless and DV providers, the AZBOSCOC was informed that current assessment tools were resulting in persons reporting DV receiving measurably fewer housing referrals. LCEHs also shared additional assessment pilot DV screening questions that are currently being evaluated by the CE committee for recommendation to the GAB for inclusion.

2. AZBOSCOC written policies require subrecipients and LCEH CE practices to coordinate with DV providers, CE policies require the use of trauma informed practices and that persons seeking services be informed of their VAWA rights. A second component of the AZBOSCOC partnership with ACESDV is training. The AZBOSCOC is finalizing an MOU to implement AZBOSCOC-wide DV awareness and assessments as well as to implement DV trauma informed care training for both CE and system level implementation. DV focused content will be incorporated into the AZBOSCOC Online Training Center (OTC) that will go live by the end of the calendar year for ongoing standard training. This training for the homeless programs and systems will augment training already implemented with AZBOSCOC DV programs including the 2 ACESDV 40-hour trainings (Domestic Violence and Sexual Violence) required of DV staff which include a focus on victim centered services. Each DV provider requires this training for their respective staff.

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

(limit 2,500 characters)

1. Key staff for implementing best practices and training is Cristina Benitez, the Continuum of Care Coordinator. DV protocols and training are required by policy for all CoC subrecipients and in system practices such as CE, case conferencing and outreach. AZBOSCO is contracting with ACESDV to develop formal training for all subrecipients, not just those already participating as DV providers to implement this year. By the end of the calendar year, AZBOSCO will have an online OTC and ACESDV content will be incorporated into this platform for COC wide access. Under current policies, LCEHs implement their own training protocols in their systems around DV but beginning 4th quarter of 2023, through access to OTC and standardized ACESDV tools and resources, minimal annual training will be required on DV 101, Understanding DV Behaviors, Safety Planning, Assessments, Trauma Informed Care and conducting intakes with the DV population.

2. AZBOSCO Coordinated Entry policies require LCEH lead agencies to develop and implement domestic violence safety screening, trauma informed practices and other DV requirements including training. LCEHs currently leverage trauma informed training and DV training through a network of sources including training from AHCCCS (AZ Medicaid Integrated Care Administrator) and DV providers. Trauma informed care training is also required of ESG providers, many of whom are also subrecipients and CE participants in the AZBOSCO. For those counties with DV providers, they have worked with their local LCEHs to integrate DV processes for intake, assessment and referral into the local LCEH CE system. It should be noted that ADOH has invested over \$1.4 million in state funding to enhance LCEH capacity and compliance. This includes the aforementioned investment in training resources and curriculum. It also includes funding for an estimated 16 new FTE in all AZBOSCO counties to implement and perform the activities described here.

Subrecipients and partner agencies work together through the coordinated entry process to ensure the safety of all with specific emphasis on safety for survivors of domestic violence. Again training activities are managed primarily through the agency’s staff development requirements and through collaboration at the LCEH level. Training is accessed on an as needed basis. Training requirements are a part of the AZBOSCO and LCEH CE policies/protocols.

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. The AZBOSCOC CE policy and LCEHs lead agency contracts require implementation of safety planning protocols for persons experiencing DV, sexual violence and/or trafficking. To this end, where available, DV service providers participate in CE, case conferencing and assist in ensuring appropriate actions take place to protect households as part of the process consistent with DV confidentiality requirements. This includes taking referrals for emergency DV shelter or immediate assistance. The policy clearly states that the safety of all participants is paramount in the process. Plans are written in accordance with the Violence Against Women Act (VAWA). AZBOSCOC and ESG homeless assistance programs providing housing or rental assistance state that they must allow participants who are survivors of domestic violence, dating violence, sexual assault, human trafficking, or stalking to request an emergency transfer from the participant’s current unit to another unit. There is on-going written safety planning between the survivor and case manager/advocates. Safety plans include children and locations of areas that might be high risk(employment, childcare, school, etc. Emergency shelter is an undisclosed location to ensure safety and confidentiality. This practice is to ensure the confidentiality and safety of the survivor. Through contract with ACESDV, AZBOSCOC will be providing additional training for CE and subrecipients around safety planning, identifying and assessing DV situations and DV Awareness. AZBOSCOC is currently updating CE policies to incorporate additional requirements and training. The timeline for completion is June 2024.

2. AZBOSCOC CE and HMIS data policies include both general confidentiality policies as well as specific confidentiality policies pertaining to DV. This includes the requirement that DV providers are required to use comparable databases for DV service providers as well as deidentifying and locking files of any DV survivors in HMIS. Confidentiality for survivors ensures that their name, address and pertinent personal information are protected. LCEHs work with all local DV providers, to have DV housing referral processes and case conferencing to ensure maintenance of confidentiality for DV survivors participating in services and housing placement. CoC policy and programs also must have written Release of Information (ROI) signed by the survivor between the parties that wish to share the information.

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. The AZBOSCOC has three CoC DV bonus funded projects of which two meet the DV provider definition. Both of these agencies came under contract late in 2020 and both use comparable databases to provide de-identified aggregate data on survivors of domestic violence. Most DV providers in the AZBOSCOC use Osnium (a stand-alone comparable DV database). The HMIS administrator has also established a secure platform that conforms to comparable database standards for DV providers within our AZBOSCOC network that DV providers may elect to use as well. The AZBOSCOC continues to engage additional DV partners beyond those funded for participation in the CoC and who may utilize these tools in the event of future funding opportunities or coordination. At the current time, data for the HIC and PIT is collected from DV providers throughout the AZBOSCOC through a request for point in time data. With our new partnership with the ACESDV who sponsors Osnium, AZBOSCOC will work to secure additional aggregate data to inform planning at both the CoC and LCEH level.

2. There has been limited data available from our DV providers due to their late implementation. As the projects mature, data from these comparable databases will be used to assess how services for survivors of domestic violence can be enhanced. In addition, many of our long-time subrecipients provide services and housing to individuals and families that have experienced domestic violence--in these cases confidentiality and privacy are maintained in HMIS through specific protocols of locking/protecting the data and limiting access. We also send a survey to the DV shelters and other non-HMIS pocket shelters to provide aggregate data for inclusion in the HIC and Sheltered PIT. With limited availability of aggregate information, limited DV services across many AZBOSCOC counties, the AZBOSCOC has relied on partnership with the ACESDV and its DV provider participation in AZBOSCOC governance and LCEH activities to inform how to meet specialized needs.

**&nbsp;**

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. The AZBOSCOG updated its Emergency Transfer Plan policy in June of 2023 and training was held for all current subrecipients to ensure compliance with the policy and its requirements. Subrecipients were also provided with the HUD template for notification of Transfer Plan rights and VAWA protections to incorporate into all new client housing intake/lease up/recertification packets.
2. The updated policy requires, at intake into an AZBOSCOG housing program, program participants are presented with VAWA rights and transfer policies and sign an acknowledgement. Per the policy, individuals and families may request an emergency transfer by notifying program staff of the need for an emergency transfer. This request involves completing HUD Form 5382 and may include providing documentation or attestation of the DV, sexual assault or stalking incident.
3. Once notified, program staff work with the survivor family to ensure they feel safe in their current residence or if additional accommodation needs to be made such as placement in a temporary DV shelter or hotel voucher. Assuming the client is safe, the individual or family could be given an option of maintaining the current placement with the perpetrator removed or if not feeling safe in the current unit, request an emergency transfer. In a leasing program, the subrecipient has discretion to offer the individual/family a vacant alternate unit in their leasing program. In a voucher/TBRA program, the individual/family would be eligible to be reprioritized in the CE system for the next available voucher. Reprioritization would be based on their entry status into the original housing program and their stay in the housing program would not compromise or change their length of stay or homeless status qualification. Under LCEH lead agency contracts, local CE systems managed by the LCEHs are responsible for adhering to this policy in the administration of their CE processes including BNL management, case conferencing and referral prioritization. Through our planning contracts with the LCEHs, they are required to have Coordinated Entry protocols that reflect required procedures and are in alignment with the AZBOSCOG Policy including Emergency Transfer Plan processes.

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. When a homeless household is identified by CE to need domestic violence services, the household is referred to the DV agency in the geographic area or the hotline in absence of a DV agency. If the household does not wish to seek DV services, they still have full access to CE, in accordance with all protocols described in the P&P's. If the DV provider the client is referred to determines that the household is either not eligible for or cannot be accommodated by the DV-specific system, the client is referred to an Access Point for assessment. Emergency Case Conferencing meetings are held when needed. The DV providers review the case plans/discharge plans. This covers what supportive services are needed for the participants; safety planning, employment referrals, obtaining ID, mainstream benefits, needs of children, assisting with school registration/services, locating housing, legal services, childcare, transportation, working with landlords, acquiring basic furnishings and ensuring their confidentiality during these processes. All services are confidential following the LCEH's protocols/policies.

2. In working with DV and COC stakeholders to identify gaps, the biggest one identified was diversity of resources among BOS counties. In an area over 90K square miles, several counties have metro areas with traditional homeless services (DV shelters, ES, outreach) but the seven rural counties have few if any existing programs. AZBOSCOC has worked to maintain COC services and housing across all counties, but in the past year, ADOH dedicated specific funds to increase the homeless service capacity and resources to equalize the essential service components of a continuum of care. This includes 16 FTE for LCEH's to enhance outreach, CE, case conferencing and system access. Awarded Special NOFO projects furthered this initiative. ADOH and AZBOSCOC are looking to enhance ES and DV program emergency capacity across all counties with additional state funding. This will ensure persons fleeing DV, sexual violence or abuse have access to emergency services regardless of geography. We continue to work on CE process and prioritization policies since these too were identified as barriers to housing for persons experiencing DV. At least two LCEHs are piloting additional assessment questions to address this gap. Training and standardization of policies and practices around DV including awareness, trauma informed care and appropriate services is also being enhanced.

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)

1. At the GAB level, efforts are made to include persons with diverse lived experience through open and targeted recruitment of identified persons to improve GAB decision making. The AZBOSCOC does not require disclosure of lived experience, DV survivorship or other trauma experiences. Regardless, some GAB members do disclose and share their status. There is at least one DV survivor, formerly homeless individual on the GAB. Similarly, in GAB committees and workgroups, there are additional stakeholder representatives and participants with lived homeless and DV experience especially in programs focusing on peer provided services. At the LCEH level, many of the close to 400 individuals also have lived experience in the homeless and DV systems although we do not require disclosure. Additional strategies under consideration include starting a CoC DV workgroup and/or creating a lived experience workgroup to provide a formal forum for feedback and insight.

2. The LCEHs that have DV providers and resources, separate DV case conferencing is held to ensure safety and confidentiality plus addressing needs in navigating housing systems and processes. Other actions include:

- a. AZBOSCOC plans written in accordance with the Violence Against Women Act (VAWA) including ESG.
- b. The policy provides guidance that safety (emergency transfer) plans be developed for all participants. The LCEHs are familiar with their local domestic violence shelters and DV local and statewide crisis lines to ensure that participants have immediate access to the services they need and law enforcement if necessary.
- c. All agencies participating in CE, regardless of whether they use HMIS are required to sign a commitment to confidentiality/ethics, ensuring the privacy of individuals. In the two counties with COC funded DV projects, additional protocols provide for a separate non-identifiable by person list and separate case conferencing.
- d. All DV providers in the LCEHs ensure that survivors have their voices heard. The majority of survivors are reluctant to speak in person for fear of safety, judgement, and/or lack of confidence. The agencies share the survivor's voices, have them heard at CoC meetings. When survivors' experiences are discussed, people recognize how individualized survivors journeys are and that a cookie cutter approach to policy and programs is inappropriate. Additional state funds have been requested to ensure adequate emergency DV shelter across BOS counties.

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)?	No
	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)?	No

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. There are limited LGBTQ+ providers in BOS. AZBOSCOC work closely with HIV/AIDS organizations and HOPWA providers who, though are not specifically aligned with LGTBQ+ providers, often serve LGTBQ+ members within their larger programs. HOPWA providers have held seats on the GAB and participate in many of the LCEHs to inform policies around anti-discrimination, trauma informed care and equity in access. All AZBOSCOC sponsored meetings are open to all members and stakeholders. Disclosure of LGBTQ+ demographics is not required for participation. There are LBGTQ+ members participating in numerous capacities who opt not to disclose their sexuality or gender identity. The AZBOSCOC is working with the Tucson/Pima Coalition to End Homelessness(TPCH), to integrate their OTC training on LGTBQ+ awareness, trauma informed services and non-discrimination curriculum into the AZBOSCOC OTC that will go live before year's end.

2. The AZBOSCOC has a Non-Discrimination clause in the Coordinated Entry policy that incorporates the Equal Access to Housing in HUD Programs. Services are provided within a framework of social justice and racial/ethnic equity. AZBOSCOC reviews policies annually. The AZBOSCOC Justice, Equity, Diversity and Inclusion (JEDI) committee oversees policies and practices around nondiscrimination and the provision of appropriate services for all populations (e.g., DV, LGBTQ+)

3. The two processes for evaluation are: a)per AZBOSCOC policies, program participants may file a complaint related to their experience which is reviewed and adjudicated according to the policy. The household is informed of the option in writing at the assessment process. An appeal includes review by the LCEH and if not resolved, review by the GAB for final decision. The timeline is fourteen days. b) Annual monitoring of providers and CE is completed by ADOH Contract Specialists. Statewide annual training is conducted by SW Fair Housing Council.

4. Per existing policy, any non-compliance found in a complaint or in a monitoring begins with a written notification, requested corrective action and a timeline. If non-compliance is not resolved satisfactorily the issue may be escalated with additional processes and consequences up to suspension of funding, impact on NOFO renewal scoring or possible re-allocation of funds, depending on the severity of the non-compliance. Escalation policies and consequences are included in the ADOH Operating Manua, a part of subrecipient contracts.

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?
Housing Authority of the City of Yuma	7%	No	No
40City of Flagstaff Housing Authority	40%	No	No

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

Describe in the field below:

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

(limit 2,500 characters)

1. The AZBOSCOC includes more than 12 PHAs as well as multiple TDHE’s. The AZBOSCOC has worked through the LCEHs to recruit and increase participation with the PHAs. As a result of the EHV program, the AZBOSCOC, LCEHs and PHAs executed 9 MOUs in counties throughout the BOS geographic area last year in conjunction with the Special NOFO coordination and seven counties received additional vouchers through the HUD PHA awards for EHV. Collaboration with PHA’s has resulted in updates to LCEH coordinated entry policies related to the EHV’s and has opened discussions with the PHA’s that currently do not address homelessness and moving on preferences, to add them to their next plan. As an example: the Housing Authority of the City of Yuma (HACY) “has applied for 50 vouchers under the Stability Voucher Program for individuals and families experiencing or at risk of homelessness, fleeing or attempting to flee from domestic violence, human trafficking and other vulnerable populations.”

HACY has adopted a preference for admission of families that have been victims of domestic violence, dating violence, sexual assault, or stalking. They have Special Vouchers-21 EHV and 5 SV. HACY has units allocated for persons experiencing homelessness determined SMI. The two largest PHAs, HACY and the City of Flagstaff Housing Authority have been actively involved in their respective LCEHs prior to EHV and are active in coordinated entry in their communities. Mohave County Housing Authority has a stat that 53% of new admissions were experiencing homelessness and they have a homeless admission preference. Yavapai Housing Authority (administered via ADOH) has established limited preferences for HCV vouchers and has provided operational funding to support CE efforts for referrals and coordination; and in Mohave County the PHA wait list includes preferences for individuals experiencing homelessness who are immediately connected and assisted with applying for HCV’s as part of their overall case planning process. The CoC provides additional support for PHAs participating and coordinating with the AZBOSCOC CE including providing access to local by name lists for coordination and providing free HMIS licenses for coordination. The AZBOSCOC will continue to coordinate around the Housing Stability Vouchers as well as existing mainstream, HCV and EHV programs. This will include focused outreach to TDHE’s as well.

2. Not applicable. The CoC works with the PHAs in its geographic area.

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	Yes
	Other (limit 150 characters)	

5.	
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1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry. NOFO Section V.B.1.g.	
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In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	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.	
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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)?	No
		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.	Not Applicable

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.	
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	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	No
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program. Not Scored—For Information Only	
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Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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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
Flagstaff Housing...
Nogales Housing A...
Winslow, Navajo a...
Yuma City Housing...
Mohave County Aut...
Pinal County Hous...
Housing Authority...
Arizona Public Ho...
Gila County Housi...

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

**Name of PHA:** Flagstaff Housing Authority--City of Flagstaff

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

**Name of PHA:** Nogales Housing Authority--City of Nogales

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

**Name of PHA:** Winslow, Navajo and Apache County

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

**Name of PHA:** Yuma City Housing Authority--City of Yuma

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

**Name of PHA:** Mohave County Authority

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

**Name of PHA:** Pinal County Housing Authority

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

**Name of PHA:** Housing Authority of Cochise County

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

**Name of PHA:** Arizona Public Housing Authority (AZ Dept of Housing) Yavapai County

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

**Name of PHA:** Gila County Housing Department

## 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.	21
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.	21
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)

The ADOH Housing Manual and Contract SOW, states the commitment to Housing First principles. For evaluation, the following occurs:

1. a. As part of the NOFO ranking and review, subrecipients complete the HUD Housing First assessment tool that is reviewed and filed;
- b. As part of NOFO scoring, objective Housing First criteria are measured including how many persons with disabilities or barriers or CH are accepted into the program;
- c. ADOH Contract Specialists monitor Housing First fidelity as part of monthly desk and annual on-site audits. They review housing policies, eligibility documentation, interview program staff, review case files, and review HMIS/APR data.
  
2. Evaluation factors include: program participant demographics and characteristics documented in HMIS, APRs; percentage of persons served with possible barriers; review of terminations or denial of services to assure they were based on natural circumstances and that adequate services were provided to promote housing stability; length of time from assessment to housing to see if programs are working to expedite housing placement. ADOH Staff review agency policies and interview staff to ensure that agency policies, culture and practices do not include discriminatory language or base services on preexisting conditions, unemployment, disabilities or other non housing first appropriate characteristics.
  
3. At a system level, SPM, HMIS data and CE BNL data and dashboards are used to track placement of chronic and high needs priority populations in housing programs. At a project level, UFA and COC monitoring is conducted annually and includes assessment of Housing First performance and fidelity. This includes review of agency documents, desk audits of monthly performance measures and reports. Onsite monitoring includes review of provider policies, facilities, training materials, intake/referral programs, application packets, client visits and program documents to ensure no program violates Housing First principles. ADOH staff also reviews HMIS and case files to ensure that program participants entry status shows presence of individuals with potential barriers (i.e., disabilities, no income, criminal backgrounds) to ensure they are not being weeded out. The AZBOSCOC OTC will include training and materials on Housing First for providers. AZBOSCOC also coordinates with ADES/ESG to ensure consistency in programs receiving both COC and ESG funding.

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. Most street outreach (SO) is provided through PATH and ESG funded SO teams in 9 of the 13 BOS counties. The VA has limited outreach for eligible Veterans. AZBOSCO has a CE phone outreach line to provide coverage for communities without SO teams, bringing coverage to 100%. The ADOH \$1.4 million that enabled 16 FTE to be added across all LCEH's allowed addition of SO staff as well as expanded CE activities to enhance access for all persons experiencing homelessness. Beginning in November 2023, the new Medicaid 1115 Waiver allows Medicaid funding to be used to support homeless and housing related activities including SO to Medicaid members. Those eligible are estimated at over 80% of the homeless population. Medicaid funding will also bring more BH expertise in engaging chronic and hard to serve populations. Additional SO activities include a) Project Connect/ Stand Down events; b) during the annual PIT count engagement; c) at community based feeding events; d) drop-in or seasonal facilities; e) at food banks; f) outreach by other mainstream homeless providers (i.e. the VA); g) through coordination with local governments; h) ADOH Capacity Building grants funded outreach staff and access points in 10 BOS counties, i) sharing list with DES Outreach service providers to collaborate with local LCEH's, first responders and mainstream partners. HMIS data is available to assist with coordination between outreach and CE.

2. As of 2023, 100% of AZBOSCO's geographic area has SO capacity and access to CE services.

3. All counties now have regular weekly and daily SO, conducted generally during weekday business hours, but weekend or after-hours does occur based on need and available resources. The 211 Outreach Hotline is available 24/7.

4. PATH and ESG funded programs are trained in motivational interviewing, trauma informed care and other evidence-based strategies to engage. Peers with lived experience are used for engagement and to improve rapport. This year through a data sharing agreement AHCCCS, the AZ state Medicaid provider will combine HMIS data with its eligibility and SMI data (AHCCCS oversees integrated PH and BH services) to identify persons with high needs who may not be engaging in services. This info and BNL data on the length of homelessness will be shared with SO teams to better identify and engage people who are least likely to request assistance.

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

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

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

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	480	672

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

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

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

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. ADES oversees TANF, SNAPs and Employment Services holds bi-weekly homeless provider “Coffee Talks” covering mainstream program access, program changes and trainings. The AZBOSCOC, Arizona Housing Coalition and the state VA programs held trainings on coordination of AZ Long Term Care Benefits and Medicaid enrollment. The LCEHs’ membership include mainstream resource agency staff that provide training and updates. Arizona’s Managed Care Organizations (MCOs) participate in the GAB and the local LCEHs. The MCOs have benefit eligibility specialists who assist with applying for Medicaid and mainstream benefits. There are Community Assistors/Promotora(es) who assist people to apply for benefits and connect to healthcare.
2. The Governor’s Council to End Homelessness includes ADOH, DES, Medicaid (AHCCCS), Corrections (ADOC), and Veterans Services (AZDVS) meets biweekly to facilitate interagency coordination. Under the approved Medicaid 1115 waiver to be implemented by November 2024, Medicaid funds may be used for housing and homeless supports. AZBOSCOC is working to ensure integration and coordination with existing CoC programming. AZBOSCOC and AHCCCS have entered a data sharing MOU. AHCCCS will match HMIS BNL records of active homeless members/households with their enrollment records. This will provide aggregate information for coordination, but also AHCCCS will provide names of Medicaid members experiencing homelessness and last homeless contact information to its MCOs with a contractual requirement that the MCO and/or its providers contact their enrolled members within a set time period to assess and determine if additional Medicaid integrated care services including state funded SMI housing can be leveraged. AHCCCS policies now require the 7 MCO’s to participate in COC coordination efforts and LCEH meetings. The AZBOSCOC is also on the AZ Health Improvement Committee to coordinate efforts to integrate housing and supports into health care planning. AHCCCS has been given a standing seat on the AZBOSCOC GAB to further integrate health care and housing.
3. Arizona has a SOAR Implementation Committee and ADOH is a member. Promotional materials and literature have been updated and referrals made for ongoing training of new and existing SOAR staff. ADOH has included contractual requirements that subrecipients have SOAR trained staff. ADOH is working to identify additional funding to expand SOAR services.

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)**

Through COVID 19, ARPA (SLFRF) and newly available state Housing Trust Funds, ADOH has invested in additional emergency non-congregate shelter to increase capacity for AZBOSCOC communities. ADOH has made available over \$30 million in funding to acquire properties for non-congregate “bridge” or “transitional” shelter. These facilities primarily consist of purchased and converted hotel/motel properties that were originally leased or acquired by local municipalities to serve as isolation/safe distancing facilities during the COVID pandemic. With current grant opportunities, these facilities are being purchased and converted into ongoing non congregate shelter (and eventually PSH if the demand changes). While these programs are still being converted or rehabbed for longer term use, they will be incorporated into the AZBOSCOC HMIS so their efficacy can be reviewed going forward. One newly acquired site in northern Arizona provides more than 72,000 square feet, including 58 rooms, and is expected to serve more than 1,000 people annually with emergency shelter in addition to the comprehensive services clients of congregate shelter receive (meals, medical care, behavioral health, and rehousing services).

Additionally, the Department of Economic Security ESG programs have funded non-congregate shelters including hotel voucher programs through community action agencies, in communities without shelters.

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

**(limit 2,500 characters)**

1. During the initial COVID outbreak, AHCCCS, the State Medicaid provider, and the Arizona Department of Health Services, held regular calls of statewide homeless providers, local governments and public health departments, MCOs, and other stakeholders to develop statewide protocols, share resources and information, provided education and training, promoted vaccinations and developed immediate responses to address COVID and other infectious diseases within the homeless system. This resulted in the adoption of distancing policies, use and sharing of PPE resources, screening and notification processes and coordination with health care providers. While these protocols are in place locally and within COC shelters, AZBOSCOC is working to incorporate these into COC written policies and procedures. While the formal COVID meetings have been suspended, coordination between the state agencies has continued through development of the AZ Health Improvement Plan and other work groups to continue to implement preventative as well as post COVID strategies to continue improving the systems responsiveness to future issues.

2. As noted above, through the COVID outbreak, the AZBOSCOC and its LCEHs developed not only immediate policy and procedures to respond to outbreaks but to prevent future infectious disease outbreaks. Key strategies include notification processes, capacity to provide isolation facilities, use of PPE and other health informed practices. Again, while these practices are in place locally, AZBOSCOC is incorporating these into standard operating standards across the COC which become part of the Housing Manual and thus, contracts too. Cochise County’s Public Health Department is active in the LCEH and worked with the LCEH to distribute community information in regard to community health vaccinations, testing, and connecting to community healthcare providers. AZBOSCOC will be working with health care providers, LCEH and stakeholders to incorporate training and practices into the BOS OTC which will go live this calendar year.

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. Arizona state health agencies (AHCCCS and ADHS) held regular statewide meetings with CoCs, providers, local health care providers, managed care organizations and other stakeholders, issued public health announcements and CDC information, developed isolation facilities, coordinated PPE and other health emergency resources to educate and equip providers to address the public health emergency. A number of projects implemented as COVID/infectious disease response, have become system coordination projects to address future potential outbreaks. This includes data sharing on emergency shelter and unsheltered homeless population data between AHCCCS and the AZBOSCOC for care coordination, development of non congregate facilities, and development of an 1115 Medicaid waiver through AHCCCS to expand use of Medicaid funding to support homeless, housing and social determinants of health related solutions.

2. At the local level the AZBOSCOC Coordinator worked to get information out to the LCEH Leads regarding the public health departments, community assistants, and health plan care coordinators/housing specialists in the pandemic's early days. They in turn communicated with their membership using emails, flyers, and telephone contacts to update and exchange information. The LCEHs were communicating safety measures of social distancing, use of masks, hand sanitizing, and availability of vaccines when available to those experiencing homelessness as well as providers' staff. Virtual LCEH meetings were used to inform and educate. They compiled what services were needed, who could provide a particular service and how to execute the plan. The CoC's responsibility was to disseminate information, make sure programs were still operating and that staff and clients were following established protocols as well as could be managed given the distances and polarization of this crisis. The LCEHs continue working on partnerships with health departments and emergency preparedness for fire/floods as well as health related issues.

Transportation was/is provided if feasible. The LCEH meetings distribute health information for testing, prevention, vaccines, and quarantine using available motels or alternate shelter situations such as sleeping rooms. The homeless service providers mandated staff wear masks, keep physically distanced, use the telephone or text as much as possible and use gloves and gowns as appropriate.

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. CE access is available in all 13 counties (100% physical coverage) of the AZBOSCOC. This includes in person access points, outreach access as well as a rural CE access phone line. CE access strategies reflect the unique geographic and resource availability in each LCEH.

2. AZBOSCOC CE policies define standard requirements for LCEH operated CE systems. LCEHs are responsible for aligning these standard practices with local conditions, stakeholders and resources. Assessment is one standardized function. Standard practices include use of a standardized data gathering and assessment tool (currently VI SPDAT) supports local activities with standardized HMIS reporting including a sortable weekly BNL to create lists for each county/LCEH for use in local case conferencing. By Name Lists can also be sorted to identify local priorities based on available resources (i.e., veterans, families, single adults).

3. COC CE policies are reviewed and updated at least annually through a standing CE workgroup that includes providers and representatives from all LCEHs and their CE managing providers as well as other systems of care (i.e., VA, DV providers) including persons with lived experience. LCEHs are in the process of updating LCEH CE Policies including a review of prioritization, the standard assessment tool, and to update required policies around DV, LGBTQ+ and family and youth homelessness. These stakeholders and the HMIS Administrator provide feedback on local challenges, proposed changes to CE systems or policies, feedback from grievances, case conferencing meetings, and feedback from persons experiencing homelessness. ADOH has also invested state funds to expand local CE capacity and access based on information gathered through the work group.

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. To reach people who are least likely to apply for assistance:
  - a. LCEHs and live CE access points are present in all 13 BOS counties as well as the rural 211 CE multilingual hotline;
  - b. SO teams serve as access points for persons who may not be able or willing to access physical service sites;
  - c. ADOH's \$1.4 million to expand capacity of LCEH's and CE programs, which added 16 FTE to fill gaps in local systems: (i.e. access point staffing, outreach and engagement, staffing in case conferencing);
  - d. Providers from other systems of care engage persons experiencing homelessness in the CE system including veterans providers, and behavioral health care providers/health homes. AZBOSCOC is also coordinating data sharing with AHCCCS/Medicaid to ID persons with acute behavior or physical health needs for targeted outreach/engagement.
  
2. The CoC adopted HUD's CPD Notice 16-11 to prioritize PH and RRH for persons in most need of assistance beginning with persons identified as CH. Subsequent prioritization is based on presenting disabilities or needs, LOT homeless and higher acuity scores on CE assessment tool.
  
3. LCEHs prioritize county BNLs to focus coordination of resources. Case conferencing is also required to give the CM an opportunity to: 1. identify, prioritize, and coordinate services for persons with special needs; and match persons to available vacancies that meet their need. Through the BNL process, program participants have a choice in what county they would like to live. They may also be notified of openings in all housing interventions they may be eligible for. Refusal to accept does not change a person's waitlist status or priority but may affect wait time. While some PSH housing is site based, COC RRH and TBRA can be used by the member to select a unit that meets their self-identified needs subject to affordability.
  
4. CE case conferencing allows for service coordination to reduce burdens for people. A navigator may be assigned, and the household is outreached within 72 hours of the assessment. The CE Committee annually reviews prioritization, data and improvements to ensure system performance and effectiveness. The CoC tracks time from CE to housing lease up to identify system barriers. CE policies require access points to be physically accessible. One new BOS initiative has been to add AZ ID Project services to pay costs and expedite securing IDs and other documents for participants.

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. ADOHs website has roster of access points by county. The LCEHs in each county develop additional strategies tailored to their communities and resources. ADOH provided state LCEH capacity funding that LCEHs could use to promote their CE systems. Examples of local strategies include: LCEH’s have developed websites in the counties of Pinal, Coconino, Mohave; Yuma County is developing a website and has an active Facebook page; Southeastern Arizona is using flyers, advertisement on the bus/transportation for homeless/housing assistance services in Cochise, Santa Cruz, Graham and Greenlee Counties; and Gila County Community services posts meeting agenda and notes on their website. LCEHs research resources for available housing through internet, local realty associations, cold calling to units which are available for rent, working with PHAs, building on established relationships with Landlords and working with community service organizations.

2. Housing Providers/Housing Navigators educate program participants of their rights, review the Arizona Landlord Tenant act, Fair Housing and civil rights. The housing provider staff work with tenants and landlords to educate and resolve issues which may arise. The housing providers respond to property managers/landlords to address a concern in order to keep the housing placement. If necessary, tenants will be assisted in filing a Fair Housing complaint with the AZ AG’s office. ADOH uses state funding to contract with Southwest Fair Housing (SWFH) to provide statewide training to subrecipients and stakeholders. SWFH is also available to hear and investigate Fair Housing claims and assist in filing with appropriate jurisdictions (e.g., State Attorney General).

3. Sub recipients/housing providers receive annual training in Fair Housing and have resources to assist with Fair Housing complaints through SWFH sponsored by ADOH.

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?	No
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	

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. Since 2018, AZBOSCOC has reviewed HMIS/LSA including STELLA data to identify potential racial or ethnic disparities in the provision or outcomes of its homeless assistance programs. This data is shared annually with GAB and other committees to develop strategies to address the equity issues. To further focus on identifying and addressing disparities, in October 2020, the AZBOSCOC formed the Justice Equity Diversity Inclusion (JEDI) Committee. The Committee itself is diverse and their charter is to identify and address disparities across all aspects of the COC including CE, policy review, data and service delivery. Their initial activities have included developing guidance for the LCEHs to conduct thorough equity assessments at the local level and presentations to LCEHs. JEDI worked with the HMIS Administrator to use HMIS data to create live equity performance dashboards at the County level to assist LCEHs in identifying local equality issues. The LCEHs are charged with aligning their charters with the tenets and developing action items in their 2023 strategic action plan to address the identified issues.

Initial proposed strategies have included outreach and additional CE screening questions related to engaging indigenous persons. JEDI has also drafted an Equity Statement for adoption by the AZBOSCOC and GAB this year. The Equity Statement will encode the AZBOSCOC’s commitment to equity across the system.

2. The primary racial disparity within the AZBOSCOC is related to the PSH matriculation rates of the COC’s Native American members. Native Americans are the largest minority in most of our counties/LCEHs and are overrepresented in the emergency shelter systems compared to their county level demographic representation. In some counties they represent between 25 to 30% of the emergency shelter population. While shelter use is prevalent, their placement in PH and PSH is significantly lower and lower than their percentage of the overall population. In addition to reviewing CE policies and practices, the AZBOSCOC is developing strategies to better communicate and coordinate with tribal entities and resources as well as conducting more investigation into cultural and practical needs of the tribal population accessing homeless resources. The AZBOSCOC also recognizes that much work is needed to develop the relationships required with all tribal social work and healthcare entities to better serve this population both on and off the reservations.

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

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

1.	The CoC’s board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes

5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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

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

**(limit 2,500 characters)**

AZBOSCOG has implemented a number of strategies to address the specific disparities identified above in addition to the Justice, Equity, Diversity and Inclusion (JEDI) committee and other system wide equity strategies. At the LCEH level, LCEHs have worked to engage tribal representation into LCEH and CE work. There are 22 Federally recognized Native Nations in AZ each with its own governance, resources and engagement. LCEHs have been reaching out to the specific Native Nations in their geographic areas to develop customized strategies for engagement and partnership. LCEHs have also been given access to county level HMIS equity dashboards and data to empower local decision making. Second, the GAB recognized the lack of indigenous people’s representation in its membership and has actively been recruiting tribal members for participation in policy making. This year, the AZBOSCOG added its first tribal member, of the Gila River Indian Community, in at least five years. Finally, ADOH, the GAB and LCEH continue outreaching to Native Nations in Arizona to listen and learn more about the needs of their communities. This work has just begun. ADOH has also allocated state funds to expand tribal housing projects and other LCEH resources to develop solutions to address tribal equity issues.

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)**

AZBOSCOC HMIS administrator provides monthly updated LCEH/county level disparity reports/dashboards for local stakeholders to identify potential racial, ethnic or other disparities. This is critical since population demographics and potential disparities vary from county to county. LCEH leadership has undergone training in the use of these tools and the toolkit the HMIS team released to guide communities about how to look at equity data. It is the responsibility of the LCEH's to review this data and this responsibility is outlined in the contract they have with ADOH for the planning dollars they receive.

The HMIS disparity data has been presented to all AZBOSCOC work groups to develop solutions within those areas (e.g.; CE). The data is reviewed for trends, which is reported to the GAB LCEH and subrecipient meetings for further coordination. The LCEHs are implementing policies and procedures derived from their strategic plans. LCEHs and subrecipients continually provide training resources about achieving social justice and eliminating racial disparities. As an example, subrecipient Catholic Charities partners with agencies that are specifically trained to serve the diverse populations they encounter and serve. The HMIS committee has members who participate in the LAPP statewide data sharing workgroup to review the cause and effect of racial inequity and social inequality using analytic insights from the current project to develop a statewide data warehouse. The LCEHs are creating workgroups of persons with lived experience to incorporate ideas for improvement of engagement, service delivery, outreach and service provision. The AZBOSCOC is developing a coordinated strategy to engage tribal stakeholders to better understand issues around coordination of on and off reservation resources and identify culturally appropriate responses to address the needs of the Native American population. Finally, with implementation of the AZBOSCOC Online Training Center, AZBOSCOC is working with stakeholders and partners to develop materials on increasing awareness and addressing disparities. ADOH staff and key stakeholders also participated in two HUD TA workshops in the last year focused on system improvements in CE and shelter services that included a focus on addressing racial and ethnic disparities and systemic racism.

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)**

GAB membership, LCEHs, workgroups, ranking and review processes and meetings are open to all including those with lived experience. Through ADOH bulletins, web postings, and local LCEH’s, activities are advertised, and participants recruited. In all activities, participation of persons with lived experience is encouraged although disclosure of lived experience is not required to avoid any trauma or stigmatization an individual may feel if identified. In the GAB and other related workgroups, self- identified individuals with lived experience or organizations with peer programs are recruited and a minimum number of seats are held by persons with lived experience although there is no limit to the number of persons with lived experience who can participate. Examples of participation of persons with lived experience include: a) AZBOSCOC Sub- Recipient CPSA has a Housing Director with lived experience who also serves on the Board of Directors for all housing related entities in the ICHD (parent) Company; b) CPSA has 22 peer support staff with lived experience and pays for their licensed Peer Support Certification; c) US Vets has a grant to support clients with peer support training, as the client continues to engage, US Vets coordinates with the VA or Transitional Work Experience program to provide vocational opportunities; d) Against Abuse have participants who have transitioned to another stage. The participants do not readily disclose their experience however, they want to give back as they were “in their shoes” at one time, so they volunteer and apply to work. Catholic Charities employs several staff members with lived experience. Their experience informs service delivery and allows them the ability to create greater rapport with clients and perspective with their work team. The LCEH’s conduct outreach to service program providers and community organizations to recruit individuals with lived experience for job openings, volunteer positions, LCEH membership, committees and leadership roles within the LCEH’s. AZBOSCOC will be implementing stipends for persons with lived experience to reduce the burdens of participation. Travel expenses are already covered. Through state funds invested in LCEHs, numerous LCEH’s used the funds to develop recruiting materials and marketing campaigns (e.g., bus signs}, to promote the LCEH and participation in programs including for persons with lived experience.

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.	13	13
2.	Participate on CoC committees, subcommittees, or workgroups.	13	13
3.	Included in the development or revision of your CoC’s local competition rating factors.	2	0
4.	Included in the development or revision of your CoC’s coordinated entry process.	2	0

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)**

AZBOSCOG subrecipients are committed to providing services informed by the experiences of persons with lived experience of homelessness. Therefore, most subrecipients and BOS providers seek individuals with lived experience with homelessness, mental health or other barriers to be part of program structures and design. Many of these programs have designated evidence-based peer support programs to ensure those with lived experience have the service delivery training and skills in addition to their expertise. For example, veterans at US Vets can become part of a resident veteran’s council and peer support. Similarly, almost all of Community Bridges, Inc. programs are peer based from entry level positions through management and executive positions. Their experience informs service delivery and allows them the ability to create greater rapport with clients and perspective with their team members. This is based upon populations, as in the case of DV survivors who may not readily disclose their past experience. Most peer based subrecipients provide peer support training, pay for peer support certification, and volunteer opportunities. Catholic Charities has two staff positions for Peer Support Specialists and are in the process of hiring as the past Peer Support Specialist was promoted to a supervisory position within the agency. The Housing Director with CPSA, a subrecipient agency, who is primarily responsible for program development and delivery, is an individual with lived experience. He also serves on the Board of Directors for all housing related entities in the parent company, Intermountain Centers for Human Development (ICHD). Through AHCCCS, Medicaid licensed programs can secure "peer certification" for behavioral health peer staff that counts as a form of accreditation within AHCCCS. With the launch of the BOS Online Training Center, AZBOSCOG will begin working on training documentation and pathways to provide certification including for those who may be peers participating in the COC.

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. At the COC level, feedback from people with lived experience is provided by stakeholders with lived experience who participate and work with the COC, LCEH and subrecipients. This includes representation on the GAB, in LCEHs, BOS workgroups and committees and within subrecipient programs. In these roles they are directly involved in informing policy making.

2. In addition to direct participation described above, annually, ESG and COC subrecipients ask current residents to complete a one-page survey. It can be submitted anonymously if they want, and surveys are mailed to ADOH monthly. This feedback is aggregated and used to inform policies and practices. Subrecipients are encouraged and most have tenant councils or meetings while in program to provide feedback on services and homeless programs they have participated in. For example, US Vets has a resident Veteran Council for self-governance in the residential programs. This provides feedback to the program staff working in the programs. As with the GAB, multiple subrecipients have board members with lived experience who provide input to their policies/procedures and services. The GAB has discussed creation of a lived experience Committee but has not been able to work out logistics within the large geographic area of the AZBOSCOC.

3. The CoC recognizes the perspective of persons with lived experience to be part of the solutions and that the AZBOSCOC be intentional in utilizing this perspective in designing programs that are responsive to the needs of the persons served in the system. From participation in AZBOSCOC governance and policy making to feedback from program participants secured on a regular basis, AZBOSCOC has been working to implement the feedback received. As noted elsewhere, ADOH invested \$1.4 million in state funds to enhance BOS service capacity. In addition to filling gaps in the local LCEH service continua, funds have also gone to program participant recommendations including providing more various shelter settings beside congregate facilities, expanding diversion and flex fund pilots in LCEHs to meet self-identified participants need, and providing additional training opportunities to improve capacity of provider staff are examples of program participant inspired solutions.

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)**

As a state agency, ADOH as the lead agency of the AZBOSCOG is limited in its ability to conduct advocacy or impact local housing and land use policies. Nevertheless, ADOH educates and shares information on best practices on the impact of policies related to zoning, and other regulatory barriers to housing.

1. Between 2022 and 2023, under HB 2674, ADOH leadership and AZBOSCOG representation facilitated and participated in Arizona’s Legislative Housing Supply Study. The Study was created in response to Arizona’s housing crisis which impacted workforce, affordable and special needs housing programs. The Study gathered testimony from statewide communities, advocates, providers, developers, funders and other stakeholders to better understand both the housing needs of the state, but also the barriers that have limited housing development and contributed to housing shortage. The Study report included recommendations and policy considerations related to reforming local zoning and permitting processes. Similarly, many of the AZBOSCOG’s LCEH which include local policy makers are considering local zoning and land use policies to promote development of more affordable housing.

2. Similarly, ADOH, AZBOSCOG’s lead agency, also works to improve regulatory barriers to housing, primarily by constantly looking to improve its own housing policies and regulation. This is especially true of LIHTC program administered by ADOH. Over the last three years, they have critically reviewed application and program policies including their QAP processes to simplify and reduce barriers. These changes are based on community feedback directly solicited throughout the year. Key changes have been reducing the number of pages in applications by 50%, providing state funds to incentivize use of 4% subsidies for shovel ready projects, and provided scoring points for those projects that demonstrated their ability to work with local government to expedite zoning, permits, fee waivers or other strategies to reduce barriers. Feedback also resulted in set asides and priorities for projects in Balance of State or rural communities. In the past year, LIHTC received and funded a record number of BOS projects based on this partnership and feedback to reduce barriers. ADOH is also working to develop TA support for rural and BOS communities to expand their ability and capacity to develop LIHTC and other complex housing finance strategies.

## 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.	<b>Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice.</b>	
	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.	08/24/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	08/07/2023

1E-2.	<b>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.</b>	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	
	You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

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

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

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	19
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. HMIS data is used for three reasons: 1) Data quality is high at 95% accuracy; 2) HMIS data is standardized and has established benchmarks to allow inter-project and national standards comparison; and 3) providers can utilize existing data (e.g. APR) and they can use HMIS in real time to track progress through the year. These are incorporated into project reporting and the renewal scoring process. AZBOSCOC specifically used criteria around the SPM's for retaining (stayers) and moving to PSH (leavers) for each project. Full points were awarded to projects that exceeded 90% retention in PSH over six months or moved on to PSH. Partial points could be awarded based on performance. Programs that did not meet a minimum threshold of retention received zero points.

2. APR data on time to housing placement was also used in the scoring criteria for renewal projects. A scale was used in which maximum points were awarded for those programs that exceeded benchmarks, partial points for acceptable outcomes, and no points for programs that did not meet benchmarks. None of the programs scored zero.

3. For program evaluation, scoring evaluates the projects' ability to reduce barriers while serving the highest acuity and chronic populations prioritized by the AZBOSCOC and their success in doing so. The AZBOSCOC scores: 1) chronic status of persons placed in PSH; 2) # of presenting issues (i.e., disability, SUD) at intake; and # of persons referred, and case conferenced. Higher points are awarded for accepting these members with minimal barriers per the Housing First model. Since all subrecipients contractually agree to take the highest acuity candidates from local CE BNL, no special consideration is given to length of time to placement based on target population since it should be the same for all programs.

4. It is a goal to have full geographic coverage of COC funded PH or RRH in all 13 counties. Since all programs are contractually required to serve the hardest to serve, no special consideration is given based on the target population. AZBOSCOC will consider geography if performing programs with similar performance scores are all on the Tier 1/2 threshold. In these cases, if one of the programs is the only one serving a given geographical area/s, it may be recommended for Tier 1 by the GAB rank and review to ensure ongoing geographic coverage. Any exception to the score ranking such as this has to be approved by the GAB.

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. For the ranking and review tool process, the GAB gathered feedback from multiple sources including current providers, and LCEH participants. The tools as approved by the GAB were publicly posted for community feedback. AZBOSCOG will continue to improve this outreach through more direct contact and engagement with AZ’s tribal communities which represent the largest over-represented demographic in the COC homeless populations in almost every LCEH.

2. AZBOSCOG has worked to use more objective measurements to review project applications. We realize that even “objective” criteria may have unintended biases or disparate impact.

3. Ranking and review was conducted by the GAB. The GAB is comprised of a diverse range of stakeholders and organization representatives including persons of different races as well as persons with lived experience of homelessness. The AZBOSCOG continues to evaluate racial disparities and will continue to solicit and recruit additional representatives from groups overrepresented in the AZBOSCOG population. Addressing racial, ethnic or other disparities in the ranking and review process primarily focused on the bonus projects and how to determine where and for whom these projects would be best suited to meet unmet needs. To determine need, specific questions were asked in the application about the relation of the demographics in the community related to those served by the program. Agencies had to demonstrate how their outreach and collaboration ensured a broad reach to locations where persons experiencing homelessness gather. Two of the bonus projects propose to serve multiple counties which are vastly different in their demographic composition. These issues were also considered in ranking, specifically in determining whether bonus projects and goals should be scored or prioritized above renewal projects in determining tier 1 and 2. The ranking and review favored maintaining programs currently serving our target populations, geography and demographics rather than funding new programs that may leave certain identified populations or geographies with housing options which could potentially affect over represented groups already being supported or served.

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 AZBOSCOC implemented reallocation in 2013, 2015, 2016, and 2018. As a part of those reallocations, projects were eliminated, reduced, and reallocated from one project type to another to meet the community needs, transition funds away from low performing programs or programs that were not aligning with COC goals (particularly around serving chronically homeless persons), and to align with the types of households experiencing homelessness. The most recent reallocation policy, adopted by the Board in 2018 included criteria which was assessed through contract monitoring. Reallocation criteria includes financial viability, timely expenditure and full utilization of funds, data quality, coordinated entry participation, use of HMIS (if not an agency that meets the definition of DV Provider), operates programs in alignment with housing first. ADOH as grantee of all funds communicated in writing with the agencies about the criteria and subsequent potential for reallocation. If needed, technical assistance was provided to resolve the problems/issues that made the agency a potential candidate for reallocation. If issues were not resolved, funds for the project were reduced or projects were reallocated to a different type of housing to better serve the needs of the community.

2. No projects were identified to reallocate via the NOFO process. In 2022 a DV provider voluntarily requested to transfer their program to a new provider based on their concerns about their ability to maintain the housing portion of their DV project. A new provider was selected in coordination with the NOFO ranking and review process.

3. No reallocation has taken place since 2018. All projects are performing are necessary to maintain 100% geographic coverage.

4. There are no less needed projects or non-performing projects in the AZBOSCOC requiring re-allocation outside of the change in providers related to a DV project. Because of the pandemic, including rental moratoriums there has not been the movement of households as usual so there have been challenges with full expenditure of funds because of the lack of housing availability and the significant increases in rental costs. All projects are PSH, TH-RRH and RRH. While the AZBOSCOC will continue to utilize reallocation, as a new UFA, the AZBOSCOC is receiving HUD TA to implement evidence based UFA flexibilities to accomplish reallocation priorities and to maximize funding utilization.

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

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

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

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/08/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

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

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

You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.

	<b>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.</b>	09/25/2023
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## 2A. Homeless Management Information System (HMIS) Implementation

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

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

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

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

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

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

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

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

(limit 2,500 characters)

1. AZBOSCOCC's contracted data administrator, Solari, has worked to bring the AZBOSCOCC's two CoC funded DV programs into HMIS consistent with data standards for DV programs. Both currently use Osnium's comparable database. Solari and the LCEH have also worked with COC and non-COC funded DV providers to develop CE practices and data sharing to ensure confidentiality and compliance with DV data requirements and confidentiality requirements.
2. The AZBOSCOCC currently has two COC funded DV projects that were funded through the HUD NOFO 2019 DV-Bonus Funds. Both of the projects have comparable databases (Osnium) and are able to produce reports comparable to the APR. Most other non-COC funded DV programs that participate in the AZBOSCOCC also use Osnium's comparable database.
3. The AZBOSCOCC HMIS is compliant with FY 2022 HMIS Data Standards. The AZBOSCOCC will also begin in the 4th Quarter with training and preparation for implementation of the upcoming FY 2024 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	890	170	684	95.00%
2. Safe Haven (SH) beds	12	0	12	100.00%
3. Transitional Housing (TH) beds	249	86	125	76.69%
4. Rapid Re-Housing (RRH) beds	672	31	641	100.00%
5. Permanent Supportive Housing (PSH) beds	1,541	0	934	60.61%
6. Other Permanent Housing (OPH) beds	29	0	29	100.00%

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

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

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

**(limit 2,500 characters)**

1. TH and PH are the two areas HMIS coverage is less than 85%. For TH, we have two small pocket programs--both of which are privately funded --Right Turn for Veterans--operated by Child and Family Services in Yuma, and Agape House which was recently established by the Salvation Army in Prescott, Yavapai County. We will continue to work with these programs during the year and encourage their participation in HMIS. The biggest gap in coverage is PH beds. This coverage gap is almost exclusively due to the VASH beds. The three VA Hospital systems in BOS have either refused to enter data into HMIS or have pulled their participation in HMIS in the last two years. As a result PH data is not included even though VASH beds are included in the HIC.

2. For TH beds, the AZBOSCOC will work with the local LCEH and Salvation Army to solicit participation in the COC, LCEH and HMIS. The VA providers and VAHCS covering the AZBOSCOC geographies have a BOS sponsored work group to reduce Veteran homeless counts as part of their VA initiatives. AZBOSCOC has supported this effort with HMIS data, targeted veteran BNL and special veterans HMIS dashboards. The VA has recognized that their lack of HMIS data entry has compromised these reports and their overall coordination efforts. Beginning in October, the AZBOSCOC will have meetings with the three VAHCS programs to discuss strategies to again incorporate veteran data into HMIS. Options being reviewed include a migration of HOMES data via our HMIS implementation or restoring VAHCS data entry directly. It is the shared goal of the AZBOSCOC and the VAHCS to have this issue resolved prior to the 2024 PIT.

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?	No

## 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

<b>2B-1.</b>	<b>PIT Count Date.</b>	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2023 PIT count.	01/24/2023
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<b>2B-2.</b>	<b>PIT Count Data–HDX Submission Date.</b>	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/27/2023
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<b>2B-3.</b>	<b>PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.</b>	
	NOFO Section V.B.4.b.	

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

**(limit 2,500 characters)**



1. There are limited youth serving organizations in balance of state and only two programs that focus on the youth populations. For the purposes of the PIT, those agencies were engaged through their local LCEH work group who coordinated the local count. LCEHs also are responsible for engaging unaccompanied youth in developing their PIT strategies and geographic coverages or target areas. ADOH has invested state funding to strengthen the BOS youth network and coordination to be able to provide more coordination of youth efforts and service options.

2. While there may not be youth provider coverage or participation in all AZBOSCOC counties, LCEH PIT planning groups did work with local entities or stakeholders who engage unaccompanied youth in their communities. This includes local law enforcement including specialty engagement teams, homeless outreach programs, behavioral health or health care providers, and persons with lived experience with homelessness. These groups share reports of suspected camps, congregation areas or service facilities where youth have been identified. These sites are incorporated into PIT survey areas. Often times, outreach teams special engagement skills are assigned to these areas with special populations like youth.

3. The AZBOSCOC does not track demographics of counter/survey staff although generally we require surveyors to be at least 18 years of age. This may allow some 18 to 24 unaccompanied youth to participate but again we do not gather demographics.

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)

1. The AZBOSCOC did conduct a 2023 sheltered PIT count. There were no significant changes in implementation, methodology or data quality in 2023.
2. The AZBOSCOC did conduct a 2023 unsheltered PIT count. There were no significant changes in implementation, methodology or data quality in 2023.
3. While the AZBOSCOC utilized the same implementation and methodology, the overall PIT unsheltered and sheltered count were more thorough and comprehensive. First, the AZBOSCOC now has active LCEHs in all 13 BOS counties. Through their local coordination and recruitment efforts, the survey had more unsheltered PIT volunteers, especially in counties that had no or limited PIT coverage in prior years including rural counties Santa Cruz, Apache, Navajo, Graham, Gila, Greenlee and La Paz. Moreover, increased LCEH activity also increased unsheltered results by engaging new non ESG or local programs including emergency shelters that had not previously been identified or participated in sheltered counts or HIC. The only other environmental factor in the count this year was a blizzard that covered many of our northern and mountain communities. This physically limited access to some street count activities in forests or parks that were physically inaccessible.
4. Not Applicable for there were no changes.

## 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

<b>2C-1.</b>	<b>Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.</b>	
	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. Persons experiencing homelessness for the first time make up the majority of those served in the AZBOSCO. Therefore, identifying people at risk of homelessness, preventing homelessness, and moving persons out of homelessness quickly and efficiently are critical. Risk factors and data points analyzed in the AZBOSCO strategic plan and other efforts, include geographic and demographic overlays of economic issues, ethnic and racial impacts, eviction rates, and environmental housing factors. HMIS data shows approximately 10% of persons were in institutional settings prior to becoming homeless, so AZBOSCO is working with other state agencies to determine risk factors within those systems that may suggest housing instability or homelessness upon release and develop strategies to provide prerelease or transitional support or housing.

2. Strategies pursued: a. improving data collection. The AZ Housing Analytics Collaborative which includes AZBOSCO, is comparing HMIS and other available public data sources including AHCCCS, jails/prisons, and economic indicators to evaluate homeless and housing instability risks to develop predictive modeling. b. In July 2023, AZ reestablished a Governor’s Interagency Council on Housing and Homelessness including 6 state agencies and dozens of statewide stakeholders. AZBOSCO leadership is chairing the data subcommittee. We plan to look at recently terminated ARP and ERAP (\$250 million) prevention funding to identify patterns and trends in housing stability; c. release planning – with recent Medicaid 1115 Waiver for AHCCCS, ADOH will be working with AHCCCS and ADOC to identify homeless risks in institutional discharges and work for housing types to reduce homeless risk. A pilot BH bridge shelter operated by AHCCCS sub recipients and Medicaid supportive services is anticipated to open in 2024. d. ADOH received \$60 million in state funds in SFY 2023 and over \$150 million SFY2024 to address the homeless and housing crisis. These funds support ongoing prevention/eviction prevention and other initiatives. For example, AZBOSCO received capacity building funds for LCEHs to address services gaps. A number of counties are piloting prevention, eviction prevention and diversion funding pools to address at-risk and first-time homeless populations more effectively based on their local needs.

3. The Arizona Department of Housing, David Bridge, Special Needs Administrator.

<b>2C-1a.</b>	<b>Impact of Displaced Persons on Number of First Time Homeless.</b>	
	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

<b>2C-2.</b>	<b>Length of Time Homeless—CoC’s Strategy to Reduce.</b>	
	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 BOS median of LOT homeless increased in the past year. LCEH's report lack of available affordable rental housing is the biggest reason for the increase. AZBOSCOG implemented the following: a. Data review-using local BNL, LCEH CE systems will case review persons with long stays on BNL to confirm the person is still homeless and not missing a move in date or other changes in housing situation, and if still homeless, prioritize the individual for supportive services or additional supports.; b. Funding- as described throughout, AZBOSCOG invested over \$1.4 million to expand BOS and LCEH service capacity. This allowed for 16 new FTE in support of CE, outreach, and housing navigation services within LCEHs and flexible funding to expedite diversion and rapid placement; c. Pilots- a three county housing locator program to identify affordable housing opportunities to support CE referrals and expansion of the AZ Homeless ID Project to six BOS counties. This program pays for and assists persons to secure IDs, DLs or other legal documents necessary. It is hoped these actions reduce wait time related to housing and employment and/or benefits.; d. Service engagement –with expanded CE capacity, persons on the BNL with long stays will have increased service availability; e. Housing development- ADOH is working to increase affordable housing development in BOS and rural communities. Strategies include BOS set asides or prioritization for LIHTC programs and targeted investment of state housing funds for tiny homes and other affordable housing strategies.

2. LOT homeless is one of the characteristics upon which CE prioritization is based in addition to acuity of need and chronic status. LCEHs are tasked with reviewing BNL lists to identify those individuals with long LOT homeless. Actual LOT periods for prioritization may vary based on the communities BNL, housing options and average LOT. Those households identified with significant LOT are reviewed to ensure HMIS records related to housing placement or status are accurate and that the household is indeed still homeless. If still homeless, LCEH CE Case Conferencing teams can coordinate service intervention or engagement to reevaluate household needs/acuity and or expedite housing readiness or engagement to housing. Again, efforts in most BOS communities are extremely limited due to lack of housing across the BOS.

3. Arizona Department of Housing. David Bridge, Special Needs Administrator.

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

3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.
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**(limit 2,500 characters)**

1. Strategies to increase PH exits include: a. development of bridge shelter or non-congregate shelters, that are smaller and have lower service to resident ratios; b. Income–ADOH has invested state funds to pilot low barrier employment programs, a housing locator program, a Homeless ID project, and expand SOAR benefit navigator coverage; c. PHA Engagement--The AZBOSCOC thru the LCEH's continue to work to develop homeless preferences or to secure additional vouchers with the 14 PHA's in the BOS; d. LCEH Capacity Building- Addition of new 16 FTE to support CE conferencing, housing navigation and outreach; e. Medicaid Partnerships–AHCCCS, (AZ's Medicaid) received an 1115 waiver to allow Medicaid funding of homeless outreach, housing navigation and up to six months of shelter. It will be fully implemented by November 2024; f. AZBOSCOC and AHCCCS have entered a data sharing MOU. Beginning in October 2023, AHCCCS will match HMIS BNL records of homeless members/households with their enrollment records. This will provide aggregate information for coordination, and AHCCCS will provide names of Medicaid members experiencing homelessness and homeless contact information to its MCOs with a contractual requirement that the MCO and/or its providers contact their members within a set time period to assess and determine if Medicaid integrated care supportive services and state funded SMI housing can be leveraged.

2. Housing First and PH models in the AZBOSCOC rely upon supportive services to ensure PH stability or transition to community-based housing. The AZBOSCOC rate of retention and/or move to other PH is over 95%. Strategies continue to be implemented to strengthen housing supportive services. This year efforts are execution of the Online Training Center for training, partnerships with AHCCCS to increase BH and health supports for housed members, continuing support for SOAR and other income strategies, and leveraging partnerships with mainstream services and natural supports to assist clients to remain housed. The AZBOSCOC also uses HMIS data to evaluate service delivery in PH programs. Contract Specialists review termination documentation including case file information to ensure that adequate supportive services were provided and that efforts were made to support the tenancy. Retention rate/move to PH is also a scoring factor for NOFO renewal competitions.

3. Arizona Department of Housing. David Bridge, Special Needs Administrator.

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. If households return to homelessness, immediate outreach and engagement takes place to try to rehouse them quickly. HMIS assists in identifying if households have been homeless multiple times and this information is included in BNL reports for LCEH CE programs. LCEHs look at the data and will communicate with a provider who has high negative exits to see how services will differ to increase chances of stability and ask if the agency needs technical assistance to improve their skill set. The addition of new staffing capacity with LCEHs and CEs for navigation and coordination around case conferencing will increase their ability to address special cases. Chronic homelessness is also the primary priority population for housing placement so those with frequent or multiple homeless incidents will increase likelihood of housing prioritization especially if there are other presenting conditions or disabilities.

2. Households are identified through outreach, case management and check-ins so that trauma and issues that may result in a return to homelessness are identified early. Our sub-recipients and partners communicate regularly so that households can be assisted in maintaining their housing. As with PH retention, effective supportive services are critical for reducing housing instability or conditions that may contribute to recidivism. Key strategies mentioned here to improve service delivery, especially for high risk or recidivist program participants include partnerships with AHCCCS to enhance access and coordination with BH,SUD and other Medicaid funded supportive services. Also the addition of training for PH supportive service providers through a new Online Training Center to improve and standardize housing service delivery. Third, investment in State funding for new housing affordable housing options and program types to meet the needs of persons with acute needs that may lead to recidivism.

3. Arizona Department of Housing. David Bridge, Special Needs Administrator.

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. Our subrecipients and the LCEHs have strong collaborations with training programs and the AZ@Work program has offices in all the counties. Participants are assisted with accessing employment training, skill building for employment search, assistance with clothing and tools needed for employment, developing and maintaining employment retention. In the past year, ADOH piloted a local homeless employment initiative funding pool for local communities and agencies of government. The goal of the pilot is to demonstrate low barrier strategies to engage persons experiencing homelessness into employment. Piloted strategies including partnerships with local workforce development job training and search programs and subsidized day labor programs. All projects combined the employment or incentives with access to homeless supportive services and resources including shelter, counseling, basic needs and other engagement opportunities. Two of these programs are operating in BOS communities. Increasing employment income will be a priority in the coming year since the current positive job market and increasing wages provide new work opportunities and the AZBOSCOO employment rates have declined in the past year.

2. Employment agencies, Goodwill, community colleges, trade programs, and AZ@Work representatives all participate in the LCEHs either as regular participants or by conducting a presentation to ensure that all agencies are familiar with available training and employment resources available to participants throughout the services system. Each CoC provider is required by contract to have at least one SOAR trained staff to assist with SSI applications for clients experiencing homelessness. ADES offices are in each county and clients are provided transportation if necessary or helped with online applications for food stamps and TANF. The LCEHs have broad community support and are the hubs for networking and providing information to a network of local service agencies. This facilitates coordination around employment, job fairs that are occurring, and availability of employment. AZ@Work, a part of ADES has offices throughout the BOS geographic area and are key partners in assisting participants in finding and retaining employment.

3. Arizona Department of Housing, David Bridge, Special Needs Administrator.

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. All subrecipients and many partner agencies have established relationships and protocols to assist participants in enrolling in a variety of benefit programs. Subrecipients either have a SOAR expert on staff or collaborates with an agency that assists participants in applying for SSI/SSDI. Other programs that are a part of the standard non-employment assistance include TANF, SNAPs-Food Stamps, and childcare. All clients in all program types are assisted to apply for any and all resources through subrecipient supportive services .

2. Arizona Department of Housing, David Bridge, Special Needs Administrator.

### 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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
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<b>3A-2.</b>	<b>New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.</b>	
	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
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<b>3A-3.</b>	<b>Leveraging Housing/Healthcare Resources–List of Projects.</b>	
	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
This list contains no items			

### 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

<b>3B-1.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	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
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<b>3B-2.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	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)**  
 Not Applicable

### 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
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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)

Not Applicable

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

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

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

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

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

## 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	09/24/2023
1C. Coordination and Engagement	09/24/2023
1D. Coordination and Engagement Cont'd	09/24/2023
1E. Project Review/Ranking	09/24/2023
2A. HMIS Implementation	09/24/2023
2B. Point-in-Time (PIT) Count	09/24/2023
2C. System Performance	09/24/2023
3A. Coordination with Housing and Healthcare	09/24/2023
3B. Rehabilitation/New Construction Costs	09/24/2023
3C. Serving Homeless Under Other Federal Statutes	09/24/2023
4A. DV Bonus Project Applicants	09/24/2023

  

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**Submission Summary**

No Input Required