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 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
 2. The FY 2022 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 2022 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

1A-1. CoC Name and Number: LA-509 - Louisiana Balance of State CoC

1A-2. Collaborative Applicant Name: Louisiana Housing Corporation

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Louisiana Housing Corporation

1B. Coordination and Engagement–Inclusive Structure and Participation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
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  - Section 3 Resources;
  - PHA Crosswalk; and
  - Frequently Asked Questions

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

	In the chart below for the period from May 1, 2021 to April 30, 2022:	
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	No
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	Disability Advocates	Yes	Yes	No
5.	Disability Service Organizations	Yes	Yes	Yes
6.	EMS/Crisis Response Team(s)	Yes	Yes	No
7.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
8.	Hospital(s)	Yes	Yes	Yes
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes	No	No
10.	Law Enforcement	Yes	Yes	No
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	No
12.	LGBTQ+ Service Organizations	Yes	Yes	Yes
13.	Local Government Staff/Officials	Yes	Yes	No
14.	Local Jail(s)	Yes	Yes	No
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	No

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

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

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.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 with individuals with disabilities, including the availability of accessible electronic formats;
	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. The CoC solicits new members via an open website invitation including CoC contact information and meeting schedules, annual invitations sent to its email list & partner email lists, outreach from CoC members to nonparticipating organizations, and by CoC staff to statewide organizations (LA Coalition Against Domestic Violence, LA Foundation Against Sexual Assault, Governor's Council on Disabilities, Governor's Office of Indian Affairs Native American Comission, Governor's Council on Homelessness) and local coalitions (affordable housing, charitable giving, prison re-entry) with overlapping interests. The new member invitation process includes outreach through in-person meetings, emails, website postings of membership process and meeting minutes. Anyone can join the CoC by attending a CoC meeting or emailing CoC staff and requesting to join with no dues or barriers to membership. CoC staff are responsible for recruiting new members, sending annual invitations, and responding to new inquiries. The membership process is in the Governance Charter.
2. The CoC ensures effective communication with individuals with disabilities by distributing invitations across multiple channels (email/website with screen reader accessible file formats, conference call, in-person meetings), by maintaining virtual attendance options for in-person meetings, by participating on the Governor's Advisory Council on Disability Affairs, and by inviting new members during their formal meetings.
3. The CoC has invited organizations representing culturally specific communities to join the CoC. Organizations that represent LGBTQ+communities include Louisiana Trans* Advocates and Capital Area Reentry Program, the sponsor of Out of the Box LGBTQ Center. The Baton Rouge Area Youth Network and Metromorphosis offer programming that primarily serves Black youth and Presenting Resources Effectively Applying Christlike Humbleness, PREACH, advocates for decarceration and has a predominantly Black consumer population. The CoC has also invited state recognized tribes and tribal entities to participate in the CoC, including the Four Winds Cherokee Tribe in rural Allen parish, Pointe-au-Chien Indian Tribe in Terrebonne Parish, and other tribes who participate in the Governor's Office of Indian Affairs Native American Commission.

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

	Describe in the field below how your CoC:
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information; and
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. The CoC solicits and considers opinions from a broad array of organizations and people that have knowledge of homelessness or an interest in preventing and ending homelessness in the following ways. The CoC Board has seats for the statewide domestic violence coalition; State Departments of Education, Health, Children and Family Services, and Corrections; elected seats from each of the CoC's five regions; and 1 seat filled by someone with lived unsheltered experience. People with lived experience engage in the CoC including at the committee chair level. The CoC collaborates with local & state stakeholders including local governments, Indian Tribes, the governor's advisory bodies on homelessness and disabilities, the CoC's Consolidated Plan jurisdictions, and recipients of PATH, SSVF, GPD, RHY, and other partner sources.
2. The CoC communicates and solicits information by direct communication with stakeholders, surveys, as well as during monthly and quarterly public meetings by presenting, distributing materials, and requesting feedback during and after these meetings. Meeting agendas are regularly available via the email list and CoC's website so people are aware of topics and can plan attendance accordingly. All public information is distributed by CoC email list and published to the CoC website and contact information is provided if anyone would like to give feedback on distributed material.
3. The CoC takes into consideration information gathered in public meetings, stakeholder conversations, interactions with people with lived expertise and other avenues to address improvements and new approaches to preventing and ending homelessness by bringing that information to its Board, committees, membership, and staff to inform decisions about policy and funding priorities. Improvements made based on feedback include the reestablishment of an HMIS Steering Committee to strengthen HMIS Policies and Procedures, piloting case conferencing and other collaboration strategies within regional street outreach networks, providing additional structure and support to regional outreach networks, increasing diversion activities due to significant successes (20%-50% returned to PH without subsidy), and increasing transparency of CoC level processes to encourage additional stakeholder engagement.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section VII.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.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,500 characters)

1. The CoC notifies the public of its Request for Proposals (RFP) on its public website, email list, LHC's media outlets, each Region's CoC member organizations, monthly meetings, and CoC-wide partner stakeholders including Louisiana Coalition Against Domestic Violence (LCADV) and the Governor's Council on Homelessness that it was accepting FY22 project application proposals.The CoC publicly announced it was open to proposals on 8/10. The RFP includes the following, the Collaborative Applicant "welcomes and encourages entities that have not previously received CoC Program funds to apply."

2. The RFP and related documents detail the application submission process for new and renewal project applications, include method (via email to the Collaborative Applicant) provides contact information, and timeline.

3. The CoC's process to determine whether a project application would be included in the FY 2022 CoC Program Competition was communicated through RFP including funding priorities and eligible project types, RFP webinar presentation and slides, Project Scoring, Rating and Ranking document with project metrics and associated point values, thresholds for housing projects, and ranking instructions for all projects types. All documents were announced through CoC's listserv and were posted to CoC's public website. The RFP and scoring documents included submission deadlines, threshold criteria including Housing First design and eligible activities. The Scoring Committee, whose members have no direct interest in funding awards,used the CoC-approved Project Scoring, Rating, and Ranking document to determine final project applications to be submitted to HUD.

4. The CoC ensures effective communication with individuals with disabilities by distributing invitations across multiple channels (email/website with screen reader accessible file formats), video call, and by engaging with the Governor's Advisory Council on Disability Affairs to understand barriers.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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  - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
  - Frequently Asked Questions

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

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

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

(limit 2,500 characters)

1. CoC Staff, Louisiana Housing Corporation (LHC), which is also the collaborative applicant, and the CoC Board provided input to the LHC statewide ESG planning/allocation process during CoC Board meetings, the Governor's Council on Homelessness, monthly collaboration meetings between LHC and all CoCs in the state, and meetings with LHC ESG staff. The CoC participates in performance measures review for statewide ESG, including # of people served by project and length of stay. The CoC consulted with the City of Baton Rouge (BR)-Parish of East BR ESG planning/allocation process by providing feedback on eligible costs/activities to meet CoC's needs and by identifying organizations with capacity to implement ESG in an effective, cost-efficient way.

2. The CoC participated in evaluating and reporting performance of state ESG recipients by reviewing project evaluation standards and doing annual joint monitoring. CoC staff help develop project evaluation standards from system performance measures. LHC's joint monitoring process ensures that agencies receiving homeless funding from multiple sources, including CoC Program, state ESG, and CDBG, are monitored at least annually by all relevant LHC staff to improve collaboration and reduce recipients' monitoring burden. LHC CoC staff provide HMIS data and analysis to LHC ESG staff at least annually, as requested, and during the monitoring process.

3. The CoC provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the consolidated Plan Jurisdictions within its geographic area via public postings of the most recent complete PIT Count and IDIS reporting. The Louisiana Office of Community Development used PIT data to determine ESG-CV and ARP funding allocations for various statewide regions.

4. The CoC ensured local homelessness information was continuously collected and communicated to state ESG through LHC's Director of Housing and Homeless Services, who both chairs the CoC Board and writes the Consolidated Plan updates. The CoC provided information about data collection and communication needs to local ESG jurisdictions through scheduled meetings.

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

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported 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 AAQs or requesting technical assistance to resolve noncompliance of service providers.	Yes
6.	Other. (limit 150 characters)	

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

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

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

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

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

(limit 2,500 characters)

The CoC has a formal partnership with the State Education Agency (SEA), the Louisiana Department of Education (DOE), via a designated seat on the CoC Board. This formal partnership with the SEA has influenced CoC policy and implementation of PH projects and Coordinated Entry and Street Outreach projects. The CoC, with the input of SEA staff, developed policies and procedures for all projects serving youth so that they will collaborate with local school districts through Homeless Liaisons to identify children and youth experiencing homelessness. This partnership has facilitated direct communication between Homeless Liaisons and Coordinated Entry staff regarding households with youth experiencing housing instability and sheltered and unsheltered homelessness to connect households with DOE resources to stabilize households and ensure access to education for children and youth. Homeless Liaisons receive education from the CoC on how to connect households experiencing homelessness with their local Coordinated Entry Access Point, including Coordinated Entry Access Points of other CoCs within the state. The partnership has increased the visibility and coverage of the CoC, especially in rural areas areas in which the SEA or local school districts are frequently the primary public service/ resource linker for low income and marginalized populations, households most at risk of experiencing homelessness or housing instability. The DOE board member participates in the Youth Working Group, a CoC committee that evaluates and develops policy and practice recommendations for the CoC to ensure that the CoC improves access to services and resources for Youth and families experiencing homelessness.

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

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

(limit 2,500 characters)

The CoC, with the guidance of the State Education Agency (SEA) staff in designated CoC board seat, has collaborated with local school districts to identify children & youth experiencing homelessness and worked with projects to adopt the following policies and procedures to inform individuals and families who become homeless of their eligibility for educational services. Projects must establish policies and practices consistent with education laws including McKinney-Vento, Head Start, the Individuals with Disabilities Education Act, & the Higher Education Act. Projects must assist participants in meeting the educational needs of children & youth through individual service plans, linkages to community resources like local school systems, Head Start, and Hi-Set equivalency and tutoring programs, and designating specific staff to facilitate educational services for participants with extensive or significant unmet educational needs. Designated staff at each project connect participants with Local Education Agency (LEA) resources including Homeless Liaisons, transportation, and registration and enrollment assistance. Projects must inform participants of their McKinney-Vento education services eligibility at intake; not require children to change schools as a condition of intake or prohibiting children from remaining in their school of origin; forming relationships with colleges to connect youth with homeless-specific higher education services; ensuring children are enrolled in school and connected to mainstream educational services (e.g. Head Start, Part C of the Individuals with Disabilities Education Act). This information is in the CoC's Written Standards so all current and future projects understand the resources and requirements to link people with educational services.

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

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

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	No
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	No	No
4.	Early Head Start	No	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	No	No
7.	Healthy Start	No	No
8.	Public Pre-K	No	Yes
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–Collaborating with Victim Service Providers.	
		NOFO Section VII.B.1.e.	

		Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:	
	1.	update CoC-wide policies; and	
	2.	ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors.	

(limit 2,500 characters)

1. The LA BOSCOC regularly collaborates with the Louisiana Coalition Against Domestic Violence (LCADV) for consultation on creating and updating policies to ensure survivors of domestic violence are equitably represented in the CoC. Additionally, the CoC maintains a domestic violence working group which consists of DV providers and advocates within our geography that meets at least quarterly to discuss policy, access to resources, and planning. LCADV and the CoC's DV Working Group cooperated to create the LA BOSCOC's de-identified referral form for coordinated entry. This form is filled in by DV CE access points in order to ensure survivors have equal opportunities to be selected for housing programs through our CE prioritization list. It is sent to CoC staff to be put into HMIS as an anonymous participant for CE referrals. This form is regularly reviewed and updated by the CoC's DV working group and CE committee.
2. The CoC offers Trauma Informed Care (TIC) training to funded and non-funded housing and other providers throughout the CoC through continuing education facilitated by Start Corporation and through external partners like the Louisiana Department of Health and national best practices leaders. The CoC's largest street outreach and coordinated entry provider utilizes a TIC approach when engaging people experiencing homelessness, increasing rapport with participants and effectiveness of diversion activities.

	1C-5a.	Annual Training on Safety and Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
		NOFO Section VII.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. The CoC provides training on an annual basis for CoC regional project staff through the Louisiana Coalition Against Domestic Violence (LCADV), the federally-designated statewide coalition of victim service providers. LCADV provides in-person and virtual training open to all project staff on implementing trauma-informed and victim-centered best practices in serving survivors of domestic violence. Topics include trauma-informed care, coordinated community responses to domestic violence, advocacy services designed for children and parents together and for survivors who use drugs, opioid overdose prevention, federal confidentiality requirements, shelter services, legal advocacy, and standards of service. LCADV also provides online training on an ongoing basis open to all CoC area project staff for assisting survivors with disabilities, legislative advocacy, domestic violence dynamics, technology safety, domestic violence offender programming, and danger assessment. The in-person, virtual and online training options review safety concerns, as noted in topic areas above about confidentiality and danger assessment, for people fleeing and provide sample methods and procedures for projects to consider implementing to keep people safe.

2. The CoC provides training on an annual basis through LCADV for Coordinated Entry staff. Training is in-person or virtual and focuses on implementing trauma-informed and victim-centered best practices. Topics include coordinated community responses to domestic violence, crisis call screening, and intake procedures including confidentiality protocols. The CoC's Coordinated Entry safety planning protocols training includes background on why referrals to DV providers (which have internal safety protocols in place) are appropriate and review of policy for VSPs to not record DV survivor data in HMIS. The CoC requires all DV service providers to select a comparable database software to create their HMIS alternative. This uniform requirement enables the CoC to effectively monitor and provide technical assistance for DV providers, ensuring data protections/confidentiality for DV survivors apply CoC-wide.

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

	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC uses 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 CoC uses de-identified aggregate data from HMIS-comparable databases operated by VSPs to assess the community and special needs related to domestic violence, dating violence, sexual assault, and stalking. This is derived from APRs, CAPERs, and ESG-CV QRPs.Through Louisiana Coalition Against Domestic Violence (LCADV), the CoC also engages data from the Louisiana Domestic Violence Prevention Commission, the Louisiana Commission on Law Enforcement, the Louisiana Department of Children and Family Services' Family Violence Prevention and Services Act (FVPSA) annual report, and LCADV's annual statewide needs assessment, which specifically inform the CoC's funding, training, and Coordinated Entry processes for people fleeing DV and human trafficking.

2. Aggregate data is used to inform CoC policy development, the CoC NOFO application process, the statewide ESG funding process, and CoC requests for project staff training from LCADV and human trafficking service providers, which ensure that each of the CoC's communities have their DV needs identified and receive funding and training as available to address those needs. The CoC also cross-references aggregate data and conclusions with LCADV's data and annual needs assessment process, which includes anonymous survivor surveys, survivor listening sessions, surveys of culturally specific service providers, and surveys of law enforcement and criminal justice entities. The CoC uses de-identified aggregate data from comparable databases, including participant demographics (family size, gender identity, geographic location), to determine where DV populations are concentrated, each DV subpopulation's special housing and services needs, the level of housing and services they require, and, via the CoC's diversion and rapid resolution outcome data, which diversion/rapid resolution practices are most effective for each subpopulation.

| | 1C-5c. | Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. | |
| | | NOFO Section VII.B.1.e. | |

		Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:
	1.	the emergency transfer plan policies and procedures; and
	2.	the process for individuals and families to request an emergency transfer.

(limit 2,500 characters)

1. The CoC's Emergency Transfer Policy (ETP), implemented in accordance with VAWA requirements, outlines the process for project participants who have experienced domestic violence (DV). The ETP is based on a model published by the HUD. Upon admission into a permanent housing (PH) program, all participants are notified of the ETP regardless of their DV status or if they're entering a DV-specific program during the project intake process – all PH program participants are eligible for emergency transfer. The participants may request a written version of the policy as well for their records. Participants are informed at intake that if they experience DV at their housing unit location, they can request a transfer to another housing unit within 90 days of the DV event without penalty. The housing provider will identify a housing unit for transfer or connect the participant to a housing provider who would be able to accommodate the transfer request. The participant will assist in determining the safety of the transfer unit.
2. Projects notify PH participants during intake through intake interview and a VAWA compliant lease addendum about the process to request ET. People are reminded that if they need to change units due to threats of imminent harm or if the participant has been harmed in their unit as a result of domestic violence or sexual assault, they must inform their housing provider and then follow-up in writing (when possible) in order to begin the Emergency Transfer process. It is explained that their written request is self-certification and the housing provider cannot require or request further documentation from the victim and must honor ETP requests from participants without discrimination. Staff also review with participants that domestic violence and other providers are required to offer reasonable accommodations to participants with disabilities. The participant does not have to accept a transfer unit that they have determined to be unsafe. If possible, the participant will remain in the same project, however a provider will connect the participant to an appropriate provider if unable to accommodate the ETP.

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

Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area.

(limit 2,500 characters)

Survivors of domestic violence are integrated into the housing and services of the CoC through its Coordinated Entry system. When any person initially presents for housing at a Coordinated Entry Access Point (CES Access Point) or to an outreach worker, that CES Access Point or outreach worker shall ask questions to determine whether that person is fleeing domestic violence (these questions shall be determined by the Coordinated Entry Committee). If that person is determined to be fleeing domestic violence, the initial CES Access Point or outreach worker offers that person the opportunity to connect with a service provider explicitly dedicated to serving people fleeing domestic violence ("DV service provider") and receive CES services through that provider instead of the initial CES Access Point or outreach worker, in addition to emergency shelter, advocacy, safety planning, and/or peer counseling. If the person fleeing domestic violence chooses to be connected with a DV service provider, the initial CES Access Point or outreach worker shall, within 1 business day, connect that person with a DV service provider. If the person fleeing domestic violence does not choose to be connected with a DV service provider, the initial CES Access Point or outreach worker, within 1 business day, connects that person to immediate transportation and safety needs resources.

There are also DV service providers in the CoC who operate as a CES Access Point. They receive access to the same priority tool as survivors engaging with providers who are not focused on domestic violence. Since these survivors are going through a comparable database rather than HMIS, DV CES Access Points complete a de-identified form that contains only the essential information necessary for prioritization on the CES priority ranking for participants. This form is sent to a CoC team member who enters this data into the CES program in HMIS with an anonymous naming convention. The de-IDed form was created through the CoC's domestic violence working group and approved by the Louisiana Coalition Against Domestic Violence, a statewide agency on domestic violence. Once added to the list, survivors of DV are prioritized and referred in accordance with all other persons. DV survivors are not prioritized above other subpopulations except for housing programs specifically for survivors.

1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

	Describe in the field below how your CoC's coordinated entry includes:
1.	safety protocols,
2.	planning protocols, and
3.	confidentiality protocols.

(limit 2,500 characters)

1. The CoC has DV Coordinated Entry (CE) sites to ensure experts are available to people who are fleeing have safe access to temporary housing while waiting for CE services and referral. At CE referral and project intake, participants may decline a specific housing provider/unit without being removed from the CE prioritization list, which promotes client choice and safety. CE prioritization list does not include PII to ensure anonymity to maintain safety. CoC Program projects serving survivors prioritize safety and report on participants' self-reported safety. The CoC has trauma-informed care (TIC) experts review current practices, the assessment process has victim-centered practices, and the CoC offers annual training to non-DV providers on TIC via the LA Coalition Against DV (LCADV).
2. The CoC's planning protocols prioritize safety and utilize TIC and victim-centered services with an emergency transfer plan (ETP) and lease/occupancy agreement (OA) requirements in accordance with VAWA. The ETP ensures survivors of domestic violence, dating violence, sexual assault, and stalking (DV) can be transferred to another housing unit if there is a threat of imminent harm from further violence if they remain or, for survivors of sexual assault (SA), if the SA occurred on the current premises in the last 180 days. Housing providers cannot refuse an ETP request from an eligible participant.The CoC has a DV Working Group that advises on policy and strategy to ensure equitable access for people fleeing DV. The ED of LCADV serves on the CoC Board. DV survivors serve in all areas of CoC leadership, including committees and working groups not focused on DV, allowing for all policy creation to have been influenced by people with lived experience of DV
3. The CoC maximizes client choice for housing and services and ensures confidentiality as follows. Per policies and procedures, CE assessors are required to evaluate whether it's safe to ask specific questions if they are with a potential abuser. The CE Access protocol includes the assessor confirming DV status once the participant is safe and immediately providing a referral to a VSP if the participant states they are fleeing DV/and would prefer to be served by a VSP. Confidentiality is protected by having the DV providers record information in an HMIS-comparable database, and at participant referral, participants sign a release and their information is shared directly between the DV and housing providers.

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

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

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

	Describe in the field below:
1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1. The CoC updates its CoC wide antidiscrimination policy as necessary as evidenced by the CoC's decision to codify the Equal Access Rule in its policies that govern permanent housing and emergency shelter in response to stakeholder concerns that a change in HUD leadership could result in a retraction of the rule, endangering access to services for vulnerable families and LGBTQ+ households experiencing homelessness.
2. Providers are assisted in developing project level anti-discrimination policies consistent with CoC policy by providing assistance and feedback during CoC monitoring and throughout the year as questions arise regarding best practices in serving vulnerable LGBTQ+ households. CoC monitoring activities include unstructured time for projects to utilize CoC staff for troubleshooting existing issues and to develop strategies to incorporate best practices regarding culturally competent care. Annual training is provided about working with trans and gender diverse participants led by a member of Lousiana Trans Advocates to assist providers in minimizing the opportunity for additional traumatization of trans and gender diverse participants while seeking services. The CoC also incentivizes providers to establish LGBTQ equity strategies through the local competition scoring tools.
3. The CoC engages in annual monitoring activities with funded providers in which adherence to the CoC level anti-discrimination policy is monitored by a review of the project's accepted/rejected referrals and project level policies. The CoC investigates formal and informal reports of violations of the CoC level antidiscrimination policy, ensuring that participants are not deprived of access to services due to their sexual orientation or gender identity.
4. Addressing noncompliance with the CoC's antidiscrimination policy is as follows: If noncompliance is discovered during an annual monitoring, the CoC issues findings and concerns in an interim letter with an associated timeframe for resolution. The CoC provides providers assistance as requested in resolving issues. If the provider does not sufficiently work to resolve findings during this process, the CoC will recommend to the board that the provider be put on probation. If the provider does not resolve items as a condition of probation, the project may be barred from competing in the next CoC Program local competition.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.	
	NOFO Section VII.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 FY 2021 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 2021 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?
Louisiana Housing Authority	22%	Yes-HCV	Yes
East Baton Rouge Public Housing Authority	5%	Yes-HCV	No

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

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

(limit 2,500 characters)

1. The CoC has taken the following steps to encourage the Louisiana Housing Authority (LHA) and East Baton Rouge Parish Housing Authority (EBRPHA) to adopt a homeless admission preference. LHA has a limited homeless preference already and the following steps were taken to encourage expansion of the preference. Through the Louisiana Housing Corporation (LHC), which is the CoC's Collaborative Applicant and the statewide ESG recipient, the CoC staff met in person and by phone multiple times during the year with HA representatives to encourage them to adopt a homeless admission preference. The CoC advocated directly to the EBRP Mayor-President's office for the EBRP HA to adopt a homeless preference. Persons experiencing homelessness had access to Section 8 applications while the waiting list was open. We also discussed with EBRPHA future plans to pull referrals from Coordinated Entry for other Homeless focused housing. CoC staff has directly assisted with registrations for participants to sign up for Section 8 openings in 2021 and the CoC provided support to people experiencing homelessness in submitting applications during waitlist open enrollment events in 2022. Additionally, the CoC works closely with the LHA and EBRPHA to ensure Emergency Housing Vouchers (EHV) are assigned and distributed quickly and completely without HMIS interaction on the side of the PHA for Move On participants initially. After Move On participants had been referred, additional EHVs were offered based on the CoC's coordinated entry priority list.
2. N/A - Our CoC has worked with PHAs to adopt homeless preference.

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	No
4.	Local low-income housing programs	No
	Other (limit 150 characters)	
5.		

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

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

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	Yes
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 VII.B.1.g.	

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	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.	

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

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

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

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
	If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	

PHA
Louisiana Housing...
East Baton Rouge ...
Sabine Parish Hou...
St. Bernard Paris...

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

Name of PHA: Louisiana Housing Authority

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

Name of PHA: East Baton Rouge Parish Housing Authority

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

Name of PHA: Sabine Parish Housing Authority

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

Name of PHA: St. Bernard Parish Government

1D. Coordination and Engagement Cont'd

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

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

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

1D-2.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

	1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition.	31
	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 2022 CoC Program Competition that have adopted the Housing First approach.	22
	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 2022 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	71%

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

		Describe in the field below:	
	1.	how your CoC evaluates every recipient–that checks Housing First on their Project Application–to determine if they are actually 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 the competition to ensure the projects are using a Housing First approach.	

(limit 2,500 characters)

1. The CoC monitors all CoC Program projects annually and provides formal and informal assistance throughout the year. All projects who formally committed to a Housing First approach are reviewed to ensure practices are being followed. Annual monitoring activities include evaluating whether or not PH project policies use a Housing First approach. This is determined by reviewing policies, talking with staff about their understanding of the policies and reviewing with staff how policies are implemented for current participants. This conversation leads to providing resources for projects to continue to improve their implementation of Housing First principles when needed.
2. The factors and performance indicators used during evaluation are as follows based on Housing First Principles, LA BOSCOC Written Standards requirements and HMIS and APR data review: rate of rapid placement into housing (intake to move-in) evaluated through APR review; review of admission requirements policy and practice to ensure 'no requirement of specific identification documents as a condition of project intake'; and that people are not rejecting referrals based on a participant's criminal history (with some statutory exceptions), current or past substance use, credit history, or participation in supportive services programs. Termination policies, rates, and reasons are also reviewed. Requirements that must be present include: All CoC Program funded projects offering supportive services are required to provide participants with supportive services on a voluntary basis that are flexible and tailored to meet the needs of the participant and outlining that lack of participation in supportive services is an invalid reason for participant termination barring other legitimate causes for termination.
3. The CoC regularly evaluates projects' adherence to Housing First practices outside of the local competition by annual project monitoring and monitoring Coordinated Entry referral outcomes, addressing participant reports of Housing First violations with projects and providing ongoing assistance throughout the year regarding Housing First strategies centered on making services attractive and accessible to participants rather than mandatory.

1D-3.	Street Outreach–Scope.	
	NOFO Section VII.B.1.j.	

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

(limit 2,500 characters)

1. The CoC's outreach efforts are local to each of its 5 Regions where there is an outreach network, including street outreach teams familiar with known locations where people experiencing unsheltered homelessness congregate. Outreach staff visit those locations to identify and engage these people in services and offer connections to mainstream services and the coordinated entry system (CES) to be prioritized for housing resources. The CoC ensures identification of all persons experiencing unsheltered homelessness through partnerships with local law enforcement, library systems, and utilization of a public facing street outreach portal, where community members can notify staff about people living unsheltered to allow outreach staff to engage people and avoid unnecessary arrests or delays in access to services.

2. The CoC Street Outreach covers 100 percent of the CoC's geographic area with regional outreach teams.

3. The CoC conducts street outreach at least weekly and on an on-going basis. In 2 of our 5 regions street outreach is conducted daily.

4. The CoC tailored street outreach to persons experiencing homelessness who are least likely to request assistance via dedicated outreach teams for specific subpopulations, drop-in centers open to all, and public facing street outreach portal. Street outreach teams through two agencies serve youth experiencing unsheltered homelessness via in person and youth accesible social media communication; tailor services for LGBTQ youth and Human Trafficking Program. SSVF and PATH projects use outreach teams to serve Veterans and people with mental illness and/or co-occurring substance use disorders. The CoC's drop-in centers offer food, transportation, and access to housing and supportive services and through these services builds relationships with people so they can help if they are currently living unsheltered.The CoC's urban street outreach team has staff that is fluent in American Sign Language. Our website and communications for CE access points are screen reader compatible for people with visual impairments. Outreach services are available to people experiencing homelessness regardless of the demographics or immutable characteristics of people served.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section VII.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:

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

| 1D-5. | Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC). | |
| | NOFO Section VII.B.1.l. | |

		2021	2022
	Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of "Current."	379	495

| 1D-6. | Mainstream Benefits–CoC Annual Training of Project Staff. | |
| | NOFO Section VII.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: | |

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	TANF–Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	

| 1D-6a. | Information and Training on Mainstream Benefits and Other Assistance. | |
| | NOFO Section VII.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, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1. The CoC systematically keeps program staff up to date regarding mainstream resource availability as follows. State agencies such as the Departments of Children and Family Services (state SSI/SSDI, TANF, SNAP, Extended Foster Care, and Family Support), Health (Medicaid, waiver programs, SOAR, PATH, substance use treatment, and behavioral health), Education (McKinney-Vento and early childhood education), and Medicaid Insurers and job service providers including Employ BR and Christian Outreach attend monthly, quarterly, and annual CoC meetings, present about resource availability, eligibility guidelines, and distribute resource availability notices via the CoC's email list. Resources are communicated as they become available and recapped during quarterly/semi annual meetings.

2. The CoC works with projects to collaborate with healthcare organizations to assist participants with enrolling in health insurance as follows. Medicaid insurers Healthy Blue, Humana, and Amerihealth Caritas attend CoC meetings and work directly with projects in assisting participants in enrolling in and accessing resources through their health insurance. CoC member Open Health Care Clinic offers philanthropy-based health insurance. The CoC is implementing a data sharing agreement with the Louisiana Department of Health to quickly identify people who are eligible for but not currently receiving Medicaid. SSO, ES, and PH projects work with participants to identify any available health resources and eliminate barriers to access by providing access to transportation, assistance in scheduling appointments and following up on treatment plans as appropriate in order to increase participants' ability to access/retain stable housing.

3. The CoC works with projects to promote SOAR certification of program staff by providing information about SOAR efficacy, opportunities for free SOAR training through SAMSHA and the LA Dept of Health, and access to other SOAR trained service providers. The CoC successfully advocated to the state depts of Housing and Health for the largest expansion of SOAR case management in the state, stationing 9 SOAR trained case managers throughout the state to not only provide SOAR services in those locations, but also serve as SOAR training hubs to increase access to SOAR case management, and therefore SSI/SSDI in rural underserved areas.

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

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

(limit 2,500 characters)

The CoC is increasing its capacity to provide non-congregate sheltering (NCS) by advocating for additional NCS funding through state and local HOME American Rescue Plan (ARP) planning process, especially for rural and underserved areas without existing emergency shelter (ES) like Lake Charles and Natchitoches, and engaging with the ESG entitlement jurisdictions like the City-Parish of Baton Rouge to fund NCS as both regular ES and flexible surge capacity ES. The CoC's largest ES provider is pursuing additional opportunities to create more permanent NCS beds to allow for greater flexibility in sheltering individuals and families as the population demographics fluctuate. The CoC has engaged with local municipalities around pairing funding sources to support both development and ongoing operations of stable NCS activities to replace what has been primarily a hotel/motel voucher method of NCS delivery. The CoC has distributed information to stakeholders about NCS funding opportunities through the state Office of Community Development that aim to support acquisition or rehabilitation of existing structures for the specific purpose of NCS operations in several disaster impacted regions, including 2 of this CoC's 5 regions.

The CoC's advocacy for additional NCS capacity is bolstered by its successes in utilizing NCS during the first 2 years of the Covid-19 pandemic to decrease the possibilities of Covid-19 infections and outbreaks among unsheltered populations (encampments), traditional congregate ES, and people experiencing homelessness due to disaster impacts. The NCS model has been adopted by the state's disaster management and response body as the primary model for medium to long term disaster sheltering. Local municipalities have recognized the value of and supported NCS development as a quick and flexible way to increase ES capacity to meet varying shelter needs of populations over time.

	ID-8.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
		NOFO Section VII.B.1.o.	

		Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:
	1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and
	2.	prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)

1. The CoC collaborates with state and local public health agencies to develop CoC wide policies and procedures to respond to infectious disease outbreaks with LA Dept of Health (LDH) and local public health officials, data sharing agreements, and participation in CoC meetings. In response to the Covid-19 pandemic, the CoC worked with LDH to create a quarantine/isolation resource for people who were Covid-19 positive and unable to safely quarantine in their current living situation from March 2020-March 2022. The CoC created and implemented referral and discharge processes with LDH that allowed for congregate emergency shelters to keep participants safe by mitigating transmission, while providing shelter and isolation to participants in need of both and ensured that all participants discharged from the isolation site were provided diversion and were not discharged into unsheltered homelessness. This collaboration resulted in new practices that will be used in future infectious disease outbreaks and informed the CoC's work with ESG/ESG-CV recipients in developing CoC wide NonCongregate Sheltering (NCS) processes to provide emergency shelters with surge capacity isolation resources for shelter participants, as funding is available, now and in the future. The CoC adopted a meeting attendance policy that mandates a virtual attendance option for meetings that contribute to a CoC member's ability to vote or apply for funding, per LDH guidance. The CoC distributes public health information and connects providers with local public health offices to access PPE and other health resources.
2. The CoC collaborates with public health agencies to prevent infectious disease outbreaks among people experiencing homelessness through data matching that allows for coordination with providers to target vaccine access initiatives to under vaccines populations. The CoC, in consultation with public health agencies, distributes informational materials to providers to assist in mitigating the spread of infectious disease like Covid-19 and MonkeyPox. The CoC has partnered with LDH in a pilot wastewater monitoring project in which Emergency Shelters will be monitored for disease outbreaks by LDH through a nonintrusive and nonstigmatizing method that does not require participants to undergo testing as individuals to identify the presence of an infectious disease at a shelter. The collaboration between the CoC and public health agencies will continue to deepen as the work continues.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section VII.B.1.o.	

	Describe in the field below how your CoC effectively equipped providers to prevent or limit infectious disease outbreaks among program participants by:
1.	sharing information related to public health measures and homelessness, and
2.	facilitating communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.

(limit 2,500 characters)

1.The CoC shares information related to public health measures and homelessness with stakeholders through biweekly, monthly, and quarterly CoC membership and task group meetings, CoC listserv emails, and frequent direct communication with emergency shelter, street outreach, and coordinated entry projects. This is now and going forward a regular part of our meeting agendas as information needs to be distributed.

2.The CoC has facilitated communication between public health agencies and homeless service providers by deepening partnerships with state and local public health agencies and increasing interaction between those entities and providers. Public Health agencies coordinated with providers to ensure access to sufficient personal protective equipment for use and distribution to participants. The state Epidemiologist has attended multiple CoC membership and task group meetings to provide education and guidance to providers regarding participant health and disease mitigation. The CoC partnered with the State Health Dept on a data sharing initiative regarding Covid 19 vaccination access to homeless populations, allowing the CoC and public health agencies to target vaccine access events to underserved areas. CoC partnership with the State Health Dept Vaccine Equity team provided mobile COVID 19, HIV, Hepatitis, and other testing as well as vaccine and limited treatment services access to underserved populations including those who live in medical deserts. Mobile team coordinated with street outreach, coordinated entry, and other CoC providers to strategically locate health events to allow providers to assist housed, sheltered and unsheltered participants with transportation/access to infectious disease prevention and mitigation resources. The CoC connected emergency shelters with State Epidemiologist led wastewater testing pilot project, allowing for early detection of infectious disease spread in congregate settings through noninvasive and stigma neutral monitoring of sewage. These partnerships are ongoing so that providers and public health agencies can continue to stay equipped for infectious disease response.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section VII.B.1.p.	

	Describe in the field below how your CoC's coordinated entry system:
1.	covers 100 percent of your CoC's geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

1. The CoC's Coordinated Entry (CES) covers 100% of the CoC's geography.The CoC is divided into 5 Regions, each with at least one static access point and funded street outreach. The CoC's 24-hour phone and website connects people with their local access point. The CES reaches people who are least likely to apply for assistance through specialized outreach teams, population-specific stationary access points, and accommodations in each for disabilities, language needs, and culturally competent responses for marginalized groups. Outreach teams deliver all elements of CES in the field and utilize information submitted through the public facing street outreach portal to connect with participants not known to the system.

2. The CoC's standardized assessment process is implemented by all CES access sites. All staff supporting CES utilize a phased assessment process that progressively engages households to help resolve housing crises with the lightest touch possible to ensure we can serve as many people as possible throughout the year. All people who request services receive housing problem-solving (diversion/rapid exit) assessment to help them return them to housing without subsidy. If problem-solving is unsuccessful, the locally developed Participation Triage Tool (PTT), which assesses acuity factors including LOT homeless, physical and mental health, justice system interactions, and disaster impacts is completed with the household. The PTT results are entered into the CES and are used to prioritize resources. Participants on the CES Priority List are referred to community resources while they work on housing plans through continued case management.

3. The CoC receives regular feedback from projects and participant households who are served by CES and incorporates that feedback into CES revisions and updates. Participant feedback is received through direct communication via phone and email as well as filtered through projects serving participants, while project feedback is received directly from providers during committee and working group meetings, CoC meetings, and survey responses. In the last year, this feedback has informed CES revisions including reducing the length of time youth headed households are in CES prior to assessment and prioritization for housing to accommodate the homlessness experience trends of that population.

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

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

(limit 2,500 characters)

1. The CES reaches people least likely to apply for assistance through specialized outreach teams, population-specific access points, and accommodations for disabilities, language needs, and culturally competent responses for marginalized groups. Outreach teams deliver all elements of CES in the field and are informed by a street outreach portal to report locations of people experiencing unsheltered homelessness. The CoC identified youth and transgender people as least likely to apply for assistance;and the CoC created multiple youth-specific access points and outreach teams, provided access points trans service training, and connected with LGBTQ+ organizations to improve equitable access for trans people.

2. The CoC's CES prioritizes people most in need on a centralized list that projects pull referrals from, by utilizing phased assessment and progressive engagement information that looks at risk factors and length of time homeless, and available resources. All people who request services receive housing problem-solving (diversion/rapid exit) to return them to housing without subsidy (current success rate:20%). If problem-solving is unsuccessful, need determined by the locally developed Participation Triage Tool (PTT), which assesses housing barriers including LOT homeless, physical and mental health, justice system interactions, and disaster impacts informs prioritization of resources as they become available. Participants on the CES Priority List are referred to community resources while they work on housing plans through continued case management.

3. Projects are required to serve people in order of greatest need. They submit referral requests to CES that are processed within 72 hours; once they receive a referral, they are required to make multiple contact attempts using all available contact methods, including checking with local 'one stop' centers and shelters, across multiple business days. CoC staff follow up on all referrals open for longer than 30 days. Participants indicate geographic preference in CES and can decline several referrals without losing CES priority.

4. The CoC has worked to reduce participant burden for CES participation by: revising the assessment tool to be shorter and less intrusive and a designated CES staff works with people who are most likely to be referred to PH in obtaining documentation and assisting with transportation and connection to PH staff to reduce the amount of time between referral and project intake.

1D-10.	Promoting Racial Equity in Homelessness–Conducing Assessment.	
	NOFO Section VII.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	06/07/2020

1D-10a.	Process for Analyzing Racial Disparities–Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section VII.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. On June 7, 2020, the HMIS system administrators for the CoC at Capital Area Alliance for the Homeless (CAAH) conducted a racial equity assessment. The HUD-provided CoC Racial Equity Analysis Tool was used for the assessment. This assessment took the most recent US census for the regions covered by the CoC as well as looked at the persons surveyed in the Point-in-Time count and those served by non-congregate shelters (NCS), emergency shelters (ES), PSH programs, RRH programs, and persons who accessed coordinated entry (CE) between April 2019 and June of 2020 using HMIS data. All persons were placed into one of two larger categories: those who identified as white and those who identified as black, indigenous, or other persons of color (BIPOC). BIPOC includes black, Native American/Alaskan Native, Pacific Islanders, Asian, and others. Housing referrals from CE were also assessed. Additionally, ethnicity was also part of the assessment, with two categories: Hispanic and Non-Hispanic. Outcomes were not analyzed as part of this racial equity assessment.
2. The CoC's overall census – 1,101,068 persons – showed that the regions had 61% persons who identified as white and 39% who identified as BIPOC. However, BIPOC made up the majority of persons surveyed in the PIT and served by NCS, ES, RRH, PSH, and CE. In the 2017 PIT count, there was a 40/60 split between persons identifying as white and BIPOC respectively. For NCS, 42% white and 58% BIPOC; for ES, 31% white and 69% BIPOC; PSH programs had 24% white and 76% BIPOC; for RRH programs had 16% white and 84% BIPOC. Of those referred to housing programs from CE, 63% identified as BIPOC. For ethnicity, 4% of the CoC's population identified as Hispanic in the most recent US census and 96% identified as Non-Hispanic. Persons identifying as Hispanic had lower representation in homelessness services: ES (2%), CE (2%), PSH (1%), and RRH (2%). While BIPOC persons are slightly overrepresented in the NCS and ES system, PSH and RRH projects are showing that BIPOC households who have been unable to self-resolve homelessness are prioritized for those projects and referrals from CE are fairly proportional to demographics seen in ES and NCS.

1D-10b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.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.	No

6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	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.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

> Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC has taken several steps to improve racial equity in the provision and outcomes of assistance including: updating the Coordinated Entry System (CES), partnering with health service providers to increase access to medical care, and increasing the scope and reach of street outreach services. The CoC revised its CES to give more equitable access to people experiencing homelessness who face additional barriers in returning to stable housing by replacing the VI-SPDAT as the standardized assessment tool with the Participant Triage Tool (PTT), which captures information about a household's spoken language, credit history, legal history, etc… barriers to housing stability that disproportionately affect BIPOC populations. The CoC responded to the COVID-19 pandemic by advocating to public health officials for equitable access to vaccines for people experiencing homeslessness and partnering with medical providers to arrange mobile vaccination clinics at shelters, drop-in centers, multi-family housing units in which formerly homeless people reside, and unsheltered locations. The CoC has deepened its partnership with Medicaid Managed Care Organizations (MCOs) to identify people experiencing homelessness who are eligible for, but not enrolled in, Medicaid and connect those participants with assistance in securing Medicaid services. The CoC, in 2021, significantly increased the availability of street outreach services in both urban and rural areas, providing underserved BIPOC who are unlikely to present in person for services with access to CES and its associated diversion and referrals services. A housing solutions meeting occurs bi-weekly to discuss outreach to these vulnerable populations and coordinate supportive services.

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

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC relies on HMIS data to track the progress on eliminating/preventing racial disparities in homelessness assistance. Some providers have compliance departments that analyze APR outcomes (example, 19a1 and 19a2 for income changes and 23c for exit destinations) and derive a plan to improve. Housing teams implement a plan to improve outcomes and prevent disparity.

The most recent racial equity test was conducted in June of 2020 by the CoC. BIPOC populations make up ~ 39% of the population of the CoC and are slightly overrepresented in the NCS and ES system, PSH and RRH projects are showing that BIPOC households who have been unable to self-resolve homelessness are prioritized for those projects and referrals from CE are fairly proportional to demographics seen in ES and NCS.The HMIS system administrators regularly conduct race equity analyses, funded/unfunded housing reports, No Positive Outcome analyses, and training on current living situation (CLS) data to address partiality to recent clients, year by year System Performance and Longitudinal System Analysis comparisons are also conducted regularly and track disparities in access and provision of services.

To ameliorate disparity, street outreach coverage has greatly expanded throughout the regions of the CoC. This includes daily street outreach in urban areas with larger populations of minority/BIPOC persons experiencing homelessness. Street outreach has increased its coverage and cadence in rural areas of the CoC. The Houma and Natchitoches/Sabine rural regions receive daily street outreach and the Lake Charles and Plaquemines/St. Bernard rural regions have weekly street outreach teams connecting vulnerable populations with provisions and services. According to the racial equity analysis, over 60% of services within our CoC are provided to these minority and BIPOC populations.

The CoC has increased its engagement with State-recognized Indian tribes in the Lake Charles and Houma regions to incorporate their experience into the planning process for the CoC. McKinney-Vento liaisons in public school districts that are designated to ensure families experiencing homelessness maintain access to education and services, and in rural areas often serve as the most accessible homelessness resource for families experiencing homelessness, are also increasing engagement with the CoC and both refer families to Coordinated Entry when appropriate and accept referrals from projects for services.

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

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

(limit 2,500 characters)

The CoC has implemented the following outreach efforts to engage those with lived experience of homelessness in leadership roles and decision making processes: soliciting engagement from people with lived experience through email and web postings, recruiting for a designated Board seat for person with homeless experience, and a structure for a Youth Action Board (YAB) designed to provide youth with homeless experience the opportunity for direct input into CoC policy and decision making. The CoC has engaged with Tribal leadership of several state recognized Indian Tribes and solicited input and offered further opportunities for engagement with tribal members with lived experience. The CoC has within its leadership team a person with lived experience whose input into policy development, strategy, and implementation is routinely solicited and incorporated into decision making, resulting in an increase in collaboration and transparency in CoC governance activities. The CoC encouraged providers at membership meetings to proactively seek out engagement with and offer meaningful employment opportunities to people with lived experience.

The CoC, with the input of people with lived experience, has developed the following strategies to further engage people with lived experience in leadership and decision making: targeted engagement and capacity building. The CoC will consistently work with youth providers to provide participants with opportunities to build capacity, like engaging with the True Colors United Youth Action Society membership meetings for participants and adult facilitators. The CoC is also co-developing an IRB approved Youth Needs Assessment tool with a local university's School of Social Work research team with content and distribution strategy that was developed with input from people with lived experience. The CoC will have planning staff and leadership attend community meetings of participants at day shelters and drop in centers, building rapport and relationships, listening to feedback and incorporating into policy and implementation revisions while providing education about CoC governance and developing paths to leadership and decision making in partnership with participants. A survey to assist in identifying members with lived experience and persons with lived experience who may be interested in becoming members has been developed by the CoC membership committee and will be sent in October 2022.

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

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	15	2
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	28	14

3.	Participate on CoC committees, subcommittees, or workgroups.	0	0
4.	Included in the decisionmaking processes related to addressing homelessness.	27	14
5.	Included in the development or revision of your CoC's local competition rating factors.	0	0

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

The CoC and its membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness in the following ways. At the CoC's largest Drop in Center/ day shelter in its most populated region, START Corporation and Capital Area Alliance for the Homeless employ people with lived experience in both direct service peer positions and high level management positions and provide opportunities for professional development through direct supervision, inservice trainings, and continuing education on national best practices. Louisiana Housing Corporation, the CoC's collaborative applicant, provides capacity building, leadership, and soft skill development to people with lived experience in CoC leadership and decision making positions and encourages people with lived experience to apply for open positions through job postings. The CoC encourages providers and stakeholders at regional meetings to proactively solicit engagement with and offer meaningful employment opportunities to participants and others with lived experience of homelessness. CoC member agency Christian Outreach Center provides multiple employment readiness, life skill development, and transitional employment programs to people recently housed or released from incarceration. Providers connect participants with mainstream employment resources like the Louisiana Workforce Commission and Employ BR to provide resources to build resumes, practice interview skills and receive job placement assistance.

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

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

(limit 2,500 characters)

1. The CoC routinely gathers feedback from people experiencing homelessness and people who have received assistance through the CoC and other homelesness programs through direct feedback from households receiving services at the CoC's Drop in Centers, several projects' monthly surveys of project participants, exit interviews, and direct communication with participant and households seeking services. Several CoC projects employ people with lived experience who have received services from the CoC; input from these staff is actively sought and feedback about service delivery and strategy is incorporated into project implementation. Several projects conduct accessibility studies that examine challenges that people experiencing homelessness have in accessing services and information from those studies is used for planning.
2. The CoC has taken steps to address challenges raised by people with lived experience of homelessness including implementing case management practices that are flexible, assertive, and client centered, reducing barriers to engagement by coordinating with street outreach teams to connect with hard to reach unsheltered participants and maintaining unconditional positive regard when interacting with participants engaged in street economies like sex work and illegal drug use or distribution. Feedback from people with lived expertise has further informed CoC activities surrounding landlord engagement and advocacy efforts regarding increasing affordable housing availability. Feedback from people in unsheltered situations has been used to increase efficacy of street outreach and housing project coordination.

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

	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that 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)

The CoC has taken steps to engage local governments around reforming zoning and land use policies to permit more housing development and reducing regulatory barriers to housing development in the last 12 months including: Providing education to stakeholders including CoC members, state agencies, local governments, advocacy organizations, and elected officials about the need for additional affordable housing. We also supported the Housing 1st Alliance of the Capital Area in providing education through in person and virtual meetings to city government officials about the affordable housing crisis in Baton Rouge and engaging around rezoning (1) residential areas to allow for higher density development and multifamily housing in areas that have exclusively allowed single family detached housing, and (2) rezoning commercial areas with a surplus of unused office space and converting to housing units.

The geography of the CoC is made up of communities with high flood risk for both tropical weather systems and localized street flooding, exacerbated by aging infrastructure and years of housing development that did not plan for the effects of an increase in tropical storm activity (Katrina, Laura, Ida, etc) and rising sea levels. The CoC has advocated to the State Housing Finance Agency and local city/parish governments to support local initiatives to pair blight reduction activities with funds for development and construction, allowing for new, safe, energy efficient housing to be developed on existing housing sites, reducing the impact of new housing development on floodplains and watershed areas. These initiatives also serve to keep local communities intact, by replacing aging housing with similar units instead of repurposing land, thereby decreasing rates of original resident displacement. The CoC has further advocated for an increase in homeownership assistance resources targeted to provide residents of the communities described above with opportunities to begin building home equity and generational wealth, increasing the likelihood that families and communities will maintain affordable housing stability in the future.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

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

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC's local competition.	08/10/2022

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

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 VII.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?	32
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 VII.B.2.d.	

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

(limit 2,500 characters)

1. The CoC collected and analyzed data regarding project success in permanently housing participants using FY21 HMIS data and Annual Performance Report (APR). Data points 5a.8, Maintaining housing, and 23.C, exit to housing, related to positive outcomes when people exit projects informed project ranking.

2. The CoC collected and analyzed data regarding length of time between project intake and permanent housing on a quarterly basis and during project scoring and ranking by using the CoC APR question 22.C to answer a specific question on the project scoring tool regarding length of time between project intake and housing move in. Projects are given feedback on their performance in an effort to reduce the timeframe between intake and housing.

3. The CoC considered the following specific severities of needs and vulnerabilities when rating and ranking projects: belonging to a vulnerable populations (youth 24 and under, veterans, experiencing chronic homelessness); experiencing homelessness in an underserved rural area; and Housing First elements: having low or no income, current or past substance abuse, history of victimization/abuse/domestic violence (DV), criminal histories with exceptions for state-mandated restrictions, and if a project is one of a kind for geographic areas for a special homeless population/subpopulation.

4. Projects targeting hardest to serve populations are not penalized but incentivized to serve people with high severity of need and vulnerabilities via high value scoring elements for hardest to serve population characteristics to offset points that may be lost on performance questions, e.g. # of people employed. All projects were incentivized to implement the Housing First model, not screening out based on: having low/no income, active or history of substance abuse, a criminal record with exceptions for state-mandated restrictions, a history of victimization, e.g. DV, SA, or childhood abuse. Points were available for: serving a vulnerable population (youth 24 and under, veterans, experiencing chronic homelessness); serving exclusively people experiencing chronic homelessness; serving primarily/exclusively DV; and operating exclusively in an underserved rural area. Points were awarded to projects that have identified barriers for inclusion of BIPOC and LGBTQ people.

1E-3.	Promoting Racial Equity in the Local Competition Review and Ranking Process.	
	NOFO Section VII.B.2.e.	

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

(limit 2,500 characters)

1. The CoC developed scoring tools with the input of the CoC membership and the Board of Directors (BoD). The CoC's participant population from 6/30/21-6/30/22 was 70.5% BIPOC (68.4% Black or African-American) and 28.6% White. The CoC BoD has a multiracial composition with 4 of 11 members being BIPOC. The scoring and ranking criteria were approved at a BoD meeting where input was solicited from both BoD members and members of the public.
2. The CoC incorporated input from stakeholders, notably BIPOC providers and project staff, in the determination of rating factors for project applications, specifically that the inclusion of scoring incentives that promote staff sustainability ($15/hr minimum pay for staff, provisions for health insurance, and a minimum of 120hrs of annual paid leave) is important to assist projects in advocating and securing resources for staff sustainability, and hiring and retention rates. The multiracial BoD contributed to and approved the scoring and rating metrics.
3. The CoC's Scoring committee is composed of members and designees of the Governor's Council on Homelessness, a multiracial committee appointed by the Governor that includes people with lived experience of homelessness. Voting members of the Scoring Committee were 33% BIPOC. The CoC BoD (36% BIPOC) provided input and approved the Scoring Tools and Rating, Ranking, and Selection process.
4. The CoC developed scoring tools intended to encourage applicants to incorporate racial equity work into their project evaluation/assessment, strategic planning, and implementation. The new and renewal project scoring tools award bonus points for actions applicants have taken to a) identify barriers to services faced by BIPOC participants in their projects and b)taking action or committing to take action to address those disparities and remove barriers faced by BIPOC participants.

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

	Describe in the field below:
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any projects through this process during your local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; 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 CoC's written reallocation process is: Voluntary: CoC staff contacts all projects prior to CoC Program NOFO release to see if a project is fully or partially reallocating funds. Projects voluntarily reallocating get bonus points for new viable projects submitted in local competition. Involuntary: Each project is monitored annually and gets verbal and written project feedback about performance & compliance with program rules. If a project has unresolved deficits after one year with no improvement and no viable plan for improvement, they will be recommended for reallocation to the Board, which votes on all reallocations. Projects being reallocated are informed in writing in advance of the project submission deadline and have an opportunity to appeal.

2. The CoC identified underperforming projects via its annual monitoring and performance review process and provided written feedback and technical assistance to help address challenges. The review process looks at project outcomes, policies and grant management practices.

3. The CoC did not need to fully or partially reallocate any lower performing or projects during this year's local competition because no projects met the standards outlined above in our reallocation process. Projects with identified areas of improvement were working on solutions and CoC staff continue to assist where appropriate.

4. The CoC did not reallocate any identified low performing projects during the local competition. All projects with identified areas of improvement were working on solutions to areas identified during monitoring and CoC staff continue to assist where appropriate. These projects also provide services that fill a resource gap that would not be able to be filled otherwise, either due to specific service type or geographic coverage area.

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	No

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

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/07/2022

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section VII.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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/15/2022

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

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes

1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

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

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

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

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

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

2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
  - FY 2022 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

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

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

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

	Enter the date your CoC submitted its 2022 HIC data into HDX.	04/28/2022

2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section VII.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 databases that meet HUD's comparable database requirements; and	
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.	

(limit 2,500 characters)

1. The LA BOSCOC identified a single software for all DV housing and service providers that meets all of HUD's comparable database requirements to use so agencies could receive support from CoC and HMIS staff to implement quality data collection and entry practices. The single comparable database software across its entire geography is Vela Direct, a change from EmpowerDB in 2021. The software specializes in reporting for victim service providers and services VSPs almost exclusively. All funded VSPs have either adopted Vela or are transitioning from EmpowerDB to Vela. The vendor for Vela is committed to supporting our VSPs to meet all data requirements. The HMIS specialist on the CoC team will provide guidance and support for quality assurance and timeliness.

2. All data elements established by the 2022 HMIS Data Standards required for the CAPER and APR are supported by our comparable database implementation. Reports can be produced in a de-identified, aggregate manner with all necessary fields for HUD reporting. These reports can be set to specific date ranges such as those under a program's grant term. The APR, CE APR, and CAPER can be successfully uploaded to SageHMIS.info without issue. Additionally, Vela Direct supports the ESG-CV quarterly CAPER upload as well. The CoC and HMIS staff support DV providers to complete and submit these responses and review aggregate performance measures.

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

	Enter 2022 HIC and HMIS data in the chart below by project type:	

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	4,232	140	230	5.62%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	156	0	129	82.69%
4. Rapid Re-Housing (RRH) beds	495	10	485	100.00%
5. Permanent Supportive Housing	704	29	675	100.00%
6. Other Permanent Housing (OPH)	174	0	32	18.39%

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

	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:	
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and	
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.	

(limit 2,500 characters)

1. In the LA BOSCOC, most providers which are non-HMIS participating are so almostly exclusively as a result of their capacity. Since these providers are not funded to participate in HMIS, they lack the resources to meaningfully and accurately engage with the database. In FY21, the LA BOSCOC applied for and received a $77,000 expansion to its annual HMIS grant. The purpose of this expansion is to hire a data entry specialist or "super user" whose primary role as part of the HMIS system administration will be to engage with and assist providers who are either non-funded or who lack the capacity to dedicate staff to HMIS. The super user will provide guided instruction or manual data entry for these programs to increase the quality and quantity of data in HMIS. By removing or lessening the burden of data entry from these providers, HMIS coverage should increase significantly with non-participating agencies.

2. In September of 2022, the grant cycle including the $77,000 expansion will begin. This same month, the HMIS system administrators at Capital Area Alliance for the Homeless (CAAH) will begin searching for a candidate to fill the role of HMIS data specialist. This search is expected to take a maximum of 90 days. Once onboarding is complete, the data specialist will start engaging with non-participating agencies to enter their data into HMIS. It is expected that this super user will be fully ready to begin independently operating and assisting these agencies by the end of 2023, specifically before the 2023 LSA submission process begins. A large ES provider which previously received ESG funding no longer uses HMIS after not renewing its funding. This program constitutes 90 of the 354 non-FEMA beds in the 2022 ES HIC – 25.4% of the total shelter inventory. Three new TH programs were included in the 2022 HIC, but all 3 have issues with verifying homelessness status or dedicating inventory to persons experiencing homelessness and will not be included in PIT counts going forward. EHV programs are included in the 2022 HIC which are not formally required to enter data into HMIS. EHV beds make up 142 of the 174 OPH beds – 81.6%. CoC and HMIS staff will continue to encourage PHAs to utilize its database. 3681 of the ES beds in the 2022 HIC are from FEMA TSA. These are not required to be entered in HMIS and are not expected to use HMIS.

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

Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?	Yes

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	02/21/2022

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	04/28/2022

2B-3.	PIT Count–Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	

	Describe in the field below how during the planning process for the 2022 PIT count your CoC:
1.	engaged stakeholders that serve homeless youth;
2.	involved homeless youth in the actual count; and
3.	worked with stakeholders to select locations where homeless youth are most likely to be identified.

(limit 2,500 characters)

1. Multiple providers who specialized in serving youth experiencing homelessness were involved in planning the 2022 Point-in-Time (PIT) count. In the Baton Rouge region, Empower 225 and Youth Oasis had staff members, including the executive director for Youth Oasis, engaged with planning and training for the unsheltered count. The Educational-Treatment Council had staff involved in planning for the PIT count in the Lake Charles region. Planning activities for the PIT count include recruiting volunteers for the unsheltered count, selecting hot spots for unsheltered count routes, participating in training activities on data entry into the mobile app used for unsheltered counts, and engaging with shelters to ensure sheltered data is accurately collected on the night of the PIT.
2. No homeless youth participated in the count on the night of the 2022 PIT count.
3. Youth Oasis, Empower 225, and the Education-Treatment Council all participated in planning and developing routes for the unsheltered count. 3-5 additional hot spots were identified for youth homeless as a result of this participation. Additionally, all providers, including those specialized in youth services, participated in a Known Location Survey created by CoC staff to help create randomly selected low probability routes to survey as part of the first geosampling initiative.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section VII.B.5.a and VII.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 2021 and 2022, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, 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 2022.

(limit 2,500 characters)

1. Louisiana suffers from frequent severe weather events almost every year, particularly in summer. These events leave many residents displaced and without shelter or home. This year was the first time the CoC engaged with FEMA to acquire numbers of participants in our region who were housed in transitional sheltering assistance (TSA) on the night of the PIT count. This added a total of 250 persons to our Baton Rouge region, 3313 persons to the Terrebonne region, and 118 persons to the St. Bernard region for a total of 3681 people displaced in shelter on the night of the PIT who would have otherwise been uncounted. The large number of persons using TSA is due to Hurricane Ida severely affecting these regions, Terrebonne in particular, in August 2021.

2. There was no unsheltered PIT count in the LA BOSCOC in 2021 due to concerns around the COVID-19 pandemic. However, new methodologies were developed between the 2020 and 2022 unsheltered counts. Specifically, the CoC engaged with the vendor for our mobile PIT app – Simtech – to conduct a geographic sampling of our regions to facilitate hot spots. A known locations survey was sent to PIT captains for each region who identified which census tracts were likely to have high and low probability of PEH. From there, the Counting Us staff created a heat map that included tracts the survey teams would canvas in person (all high probability tracts and randomly selected low probability tracts). The number of low probability tracts to survey in person was determined by calculating the total areas (315) with a 95% confidence level and 10% confidence interval. Once the PIT was completed, the HUD PIT report from Simtech calculated the sampling data.

3. The 2022 PIT count resulted in the largest amount of PEH counted in the LA BOSCOC. 582 unsheltered persons were counted (23 additional persons from the sampling described above), 4035 persons in shelter, and 114 in TH for a total of 4731. Even excluding the 3681 TSA participants, the 2022 PIT was still the largest count due to the increased functionality of the mobile app used in unsheltered counts (582 in 2022 vs. 283 in 2020).

4. N/A

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
    - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section VII.B.5.b.	

	In the field below:
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;
2.	describe your CoC's strategies to address individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time

(limit 2,500 characters)

1. The process the CoC has developed to identify risk factors the CoC uses to identify persons becoming homeless for the first time is requesting annual information from CoC member providers, ESG-funded emergency shelters and homeless prevention (HP) providers; quarterly reports from the CoC's Coordinated Entry Committee and weekly reports from the HMIS System Administrator and street outreach staff; the Louisiana Department of Children and Family Services (DCFS)'s staff for youth aging out of foster care, the Louisiana Department of Education's (DOE) Homeless Liaisons, the Louisiana Department of Veterans Affairs (LVA), and the Louisiana Department of Corrections (DOC). Risk factors include having no or extremely low income, youth head of household, belonging to a household with only 1 parent, and belonging to a household with 3+ children.
2. The CoC's strategy to address individuals and families at risk of first time homelessness focuses on HP and diversion. The CoC funds HP through ESG, ESG-CV, TANF, and SSVF to pay rent arrears and legal representation to prevent evictions and through youth specific HP services for eligible households. Coordinated Entry access points provide diversion case management, referrals to mainstream resources, and in the most urban region, private funds to reconnect participants with their existing support networks. The CoC works with representatives of DCFS and DOC to prevent people from exiting foster care and DOC into homelessness and with DOE and LVA to identify families, youth and veterans at risk of experiencing homelessness.The CoC has also developed a formal partnership with DCFS, DOC, DOE, and LVA to create a structure for referring people at risk of experiencing homelessness directly to the CoC's CES.
3. The CoC Manager is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.

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

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

(limit 2,500 characters)

1. The CoC's strategy to reduce the length of time (LOT) individuals and persons in families experience homelessness has multiple elements. CoC-Program-funded projects are incentivized to adopt a Housing First program model to reduce the project entry barriers. People experiencing homelessness are quickly referred to housing & services through the COC's Coordinated Entry System (CES) to exit homelessness quickly through rapid-exit case management and prioritization. A CES Navigator assists households most likely to be referred next to housing with obtaining resources to reduce barriers to housing and decrease the amount of time between project intake and permanent housing.CoC Program, ESG, and some VA projects get referrals through CES, which prioritizes based on the participant's need (determined by the Participant Triage Tool), disability status, and the longest LOT homeless. The CoC coordinates with Legal Services and the Louisiana Department of Children and Family Services to increase access to SSI/SSDI, reducing a barrier to housing by increasing income. Louisiana Housing Corporation (LHC), provides a free online platform, LAHousingSearch.org, where landlords can make units publicly available to a wide audience, including people experiencing homelessness. With the addition of EHV from the ARP, Move On strategies are implemented to free up existing PSH beds for new clients with high levels of need. The CoC has funded new Rapid Re-housing projects through both CoC Program and statewide ESG and will continue doing so through 2022.
2. The CoC identifies people with the longest LOT homeless through record review and participant interviews that ask how long people have been experiencing homelessness. These interviews are documented in HMIS and are updated when participants present for services or are contacted through street outreach. The CES quickly refers participants for housing assistance by prioritizing households with the highest need and longest LOT homeless.
3. The CoC Manager at LHC is responsible for overseeing the CoC's strategy to reduce individuals and families' LOT homeless.

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

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

(limit 2,500 characters)

1. The CoCs strategy to increase the emergency shelter (ES), safe havens, transitional housing (TH) and rapid rehousing (RRH) exit rate to permanent housing (PH) is ES, TH, and RRH projects help participants locate/secure housing, build housing skills and reduce evictions through landlord mediation while identifying/eliminating barriers to securing PH. Projects help participants increase income through job training, job search assistance, connection to SOAR or SSI/SSDI application assistance, and education services. ES projects are engaging in capacity building to better participate in Coordinated Entry, decreasing the amount of time participants are in shelter without connection to housing resources. RRH projects provide security and utility deposits to remove financial barriers and supportive services for up to 6 months after rent support ends to ensure PH maintenance. The CoC works with projects to ensure participants are terminated only after all other options have been exhausted. TH and RRH projects with low exits to PH receive guidance to look at supportive service options and ways to find and resolve housing barriers.
2. The CoC's strategy to increase the rate at which people in PH projects other than RRH retain their PH or exit to PH has multiple elements. All new PSH projects and most existing PSH projects follow Housing First principles, terminating participants only after all other options have been exhausted. Project staff help participants locate/secure housing and work with landlords to reduce evictions. Participants receive materials on mediation/legal services to reduce evictions. Projects eliminate barriers to self-sufficiency by linking participants to supportive services, including SSI/SSDI application assistance and job training/job search. We have a majority of tenant-based PSH allows people to move units to better meet their location and service needs and maintain housing.
3. The CoC Manager at Louisiana Housing Corporation is responsible for overseeing the CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

2C-4.	Returns to Homelessness–CoC's Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	

	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1. The strategy the CoC has implemented to identify individuals and persons in families who return to homelessness is analyzing CoC data annually, including system performance measures and de-identified HMIS data. When the CoC analyzes the System Performance Measures, staff is able to pull client level data. Additionally, the Coordinated Entry (CE) staff attempt contact with all participants not yet referred to housing or self-resolved, who pass through the CES monthly. Regional Street Outreach Networks allow for CE and Street Outreach staff from different projects to communicate regularly regarding participants, allowing for quick reconnection with services. Communication between CE staff and participants allows for identification of persons who returned to homelessness.
2. The CoC's strategy to reduce the rate of additional returns to homelessness has multiple elements. Coordinated Entry (CE) access points and CoC Program and ESG projects connect people with mainstream benefits to help increase financial resources to maintain housing. CoC Program and ESG projects educate participants about fair housing including tenant rights and responsibilities and budgeting for core expenses. Many RRH projects have policies that provide extended services for 6 months after their participants' rent support ends to reduce returns to homelessness, including case manager assistance in negotiating with landlords and in locating short-term assistance to resolve housing crises, reducing returns to homelessness. CoC Program permanent supportive housing projects allows people to move units and be rehoused to prevent re-entry into homelessness and provide supportive services to help participants navigate moving so they do not end up in homelessness. The CE System provides a path for RRH participants to be "bridged" to PSH should they be eligible and in danger of exiting at risk of homelessness. SWLA Law Center and Southeast Louisiana Legal Services provide legal services to prevent evictions. Statewide ESG also funds homeless prevention services (eviction prevention assistance, security and utility deposits, first month rent funding) to stabilize or quickly rehouse people before they re-enter homelessness.
3. The CoC Manager at the Louisiana Housing Corporation is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

| 2C-5. | Increasing Employment Cash Income–CoC's Strategy. | |
| | NOFO Section VII.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 cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

(limit 2,500 characters)

1. The CoC's strategy to increase employment income includes incentivizing projects to adopt a Housing First model to ensure participants with employment income growth needs are neither screened out nor terminated on the basis of not increasing their income. CoC and ESG projects are assessed annually on their percentage of stayers/leavers who increased employment income. Throughout the year, the CoC provides training on increasing participant employment from WIOA-funded programs like EmployBR.
2. The CoC's strategy to increase access to employment includes working with municipalities, WIOA-funded employment programs, and business associations to publicize employment opportunities to projects. The CoC encourages projects to connect participants with job readiness, job training, and educational programs and also connects participants with agencies including Baton Rouge's One Stop Homeless Services Center (One Stop) and Lake Charles' Southwest Legal Aid to assist in securing basic ID documents and mailing addresses as required to access employment. Also, Christian Outreach has a 10-week employment program that occurs annually and trains 40+ participants a year. Participants from Section 8 are incentivized with $100/wk utility assistance for attending. The CoC works with mainstream employment organizations (EOs) to help households increase income by referring participants to job search assistance through regional Career Solutions Centers, Ticket to Work programs, the One Stop, WIOA-funded employment programs (EmployBR), and SNAP Employment and Training through the Department of Children and Family Services. Mainstream EOs present at CoC meetings to projects. Project staff facilitate connections by directly providing or referring to transportation assistance and by developing income and budgeting plans with participants.
3. Louisiana Housing Corporation's CoC Manager is responsible for overseeing the CoC's strategy to increase job and income growth from employment.

2C-5a.	Increasing Non-employment Cash Income–CoC's Strategy	
	NOFO Section VII.B.5.f.	

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

(limit 2,500 characters)

1. The CoC's strategy to increase access to non-employment cash sources is as follows. Annually, the CoC connects projects with SOAR training through the Office of Behavioral Health, which attends CoC meetings to present on application process and eligibility. Project staff assist participants in applying for cash benefits to help with financial stability. The CoC is working with the Department of Children and Family Services and with Humana, one of the state's Managed Care Organizations, to fund SOAR case management through TANF and private funding, respectively. This case management will be available to both housed participants and people experiencing sheltered/unsheltered homelessness. The CoC also works with the Departments of Health and of Children and Family Services to reduce administrative barriers to accessing SSI/SSDI to help increase awards to those that are eligible.

2. The Continuum of Care Manager at the Louisiana Housing Corporation is responsible for overseeing the CoC's strategy to increase income from non-employment sources.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
    - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

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

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

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

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

3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.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
BOS PSH 1 Expansion	PH-PSH	32	Healthcare
Starting Over Exp...	PH-PSH	33	Healthcare

3A-3. List of Projects.

1. What is the name of the new project?   BOS PSH 1 Expansion

2. Enter the Unique Entity Identifier (UEI):   XVN8RDTTL8Z4

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 32

5. Select the type of leverage: Healthcare

3A-3. List of Projects.

1. What is the name of the new project?   Starting Over Expansion

2. Enter the Unique Entity Identifier (UEI):   XVN8RDTTL8Z4

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 33

5. Select the type of leverage: Healthcare

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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   - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
   - Frequently Asked Questions

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

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

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

	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and	
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.	

(limit 2,500 characters)

N/A-- Answered "NO" to 3B-1

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
   - FY 2022 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 VII.C.	

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

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

	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.	
	If you answered yes to question 3C-1, describe in the field below:	
1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.	

(limit 2,500 characters)

N/A -- Answered "NO" to 3C-1

4A. DV Bonus Project Applicants

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
  - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
  - Frequently Asked Questions

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

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

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

	Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2022 Priority Listing.

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

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

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section II.B.11.(e)(1)(c)	

1.	Enter the number of survivors that need housing or services:	9,181
2.	Enter the number of survivors your CoC is currently serving:	122
3.	Unmet Need:	9,059

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

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

(limit 2,500 characters)

1. LCADV calculated the number of domestic violence (DV) survivors needing housing or services utilizing state-level data about households impacted by DV and of those impacted the percentage that needed housing assistance to get to safety. We used US Census data to find the LA BOSCOC's population is 1,466,455. The NISVS found 35.9% of women and 15.9% of men in Louisiana have experienced DV, which equates to 382,541 DV survivors in the CoC parishes. Of these, the NISVS further found that 2.4% of DV survivors report needing housing assistance. 2.4% of 382,541 is 9,181 of survivors in the CoC who need housing and/or housing services.
Using HMIS and comparable database data, the CoC is currently serving 122 survivors with housing services.
2. Data sources were HMIS and comparable database data for currently being served, census and state-level data from the National Intimate Partner and Sexual Violence Survey (NISVS) [Smith, S.G., Chen, J., Basile, K.C., Gilbert, L.K., Merrick, M.T., Patel, N., Walling, M., & Jain, A. (2017). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010-2012 State Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.]
3.There are various reasons that the CoC is currently unable to meet the full needs of all survivors in its territory. Barriers include an overall lack of vouchers to house all survivors requesting housing and a lack of affordable housing across various regions of Louisiana. The lack of affordable housing stock has been exacerbated in recent years due to Hurricanes Laura (2020), Delta (2020), and Ida (2021) which caused extensive physical damage. An additional barrier to serving all DV survivors has been a historical lack of collaboration between domestic violence providers and housing providers. This collaboration has improved significantly in recent years with several DV providers now participating in CES. This collaborative relationship will continue to deepen with this project.

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

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

Applicant Name
Louisiana Coaliti...

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2022 Priority Listing:

1.	Applicant Name	Louisiana Coalition Against Domestic Violence (LCADV)
2.	Project Name	DV RRH Expansion
3.	Project Rank on the Priority Listing	37
4.	Unique Entity Identifier (UEI)	MNFDFN4K51K3
5.	Amount Requested	$537,728
6.	Rate of Housing Placement of DV Survivors–Percentage	90%
7.	Rate of Housing Retention of DV Survivors–Percentage	81%

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

	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below
1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1. Housing placement and retention rates were calculated by reviewing current project data for flexible funding housing assistance and Emergency Housing Voucher (EHV) permanent housing. From January 2021 to December 2021, the housing placement rates for flexible funding housing assistance projects was 100% and the retention rate was 81% six months after the end of assistance. From July 2021 through July 2022, the housing placement rates for EHVs was 79%. Because the EHV data is still recent, retention rates for EHV opportunities cannot yet be calculated. For the rate of housing placement, we used the average of the two projects.
2. The rates account for exits to safe housing destinations. Project subrecipients track returns to abusive partners within their comparable database. These housing placements are considered not safe and therefore, removed as a successful housing placement for the purpose of calculating this rate.
3. The data sources for the housing placement and retention rates include subrecipients' comparable databases and administrative data from current agency projects providing housing assistance.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

(limit 2,500 characters)

1. LCADV RRH Project subrecipients successfully ensured domestic violence survivors experiencing homelessness were assisted to quickly move into safe affordable housing through their flexible funding housing assistance and Emergency Housing Vouchers (EHVs) by providing housing search assistance and service support to connect to community resources.

2. Subrecipients are agencies with a survivor-centered mission. They utilize a first come, first served approach for flexible funding housing assistance projects. For EHV, the CoC created a streamlined & confidential referral process through Coordinated Entry centralized with LCADV. Proposed subrecipients were educated about the EHVs, and case managers relayed information to survivors accessing their services. Survivors self-selected if they were interested. Proposed subrecipients shared non-personally identifying information (PII) with LCADV and LCADV provided non-PII to the CoC to match to EHV in a first come, first served process due to the limited # of EHVs. Subrecipients have assisted participants with requesting emergency transfers (ET) through the CoC when needed. Subrecipients have experience with utilizing their agency's resources to provide the highest level of safety to participants while ETs are pending.

3. Subrecipients determine which supportive services are needed along with the participant. They use a survivor-led, empowerment-based model to inform survivors of services available. The survivor decides which services they need. After identified, the participant and the staff complete a mutually agreed upon service plan together. This plan can change at any time based on the needs of the participant.

4. Subrecipients connected survivors to support services by making supported referrals, providing participants with transportation, telephone, and childcare services as needed, and ongoing case management to assess survivor needs. Support services survivors were connected to include mainstream benefits, legal advocacy, employment, education, credit counseling/repair, and health care (including mental, medical and dental).

5.Flexible funding is often a one-time stabilization expense; proposed subrecipients successfully supported program participants move into permanent housing or stabilized safe housing with that funding source. Subrecipients provided ongoing advocacy and case management with survivors as needed to address housing stability after the financial assistance ended

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentially policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

1. All in-person intakes are completed in private offices to ensure confidentiality. Proposed subrecipients are trained in the dynamics of domestic violence and incorporate best practice models into their organizational spaces, starting with the intake process. They use a survivor centered, trauma informed approach, which is applied to intake that is conducted by phone via hotline, and in a physical intake location. While proposed subrecipients will serve families, most often an adult and children, staff are trained to ensure if a couple does come in together or reach out together, conversations are always conducted separately, and safety is the top priority.
2. Proposed subrecipients work from a trauma-informed empowerment model which emphasizes survivor choice in all aspects of decision making, including participation in a safe housing program and the subsequent housing location.
3. Proposed subrecipients keep their safe housing, emergency shelter and transitional housing program locations confidential. This includes restrictions on publication of physical addresses. The location of survivor housing units is also kept out of shared databases to protect confidentiality of these locations.
4. In-depth safety planning training and confidentiality are included as part of each advocate's required training prior to interacting with survivors. Proposed RRH Project subrecipients are all victim service providers and they receive extensive initial and ongoing training on safety planning and confidentiality. These topics are at the core of domestic violence organization missions.
5. Proposed subrecipients are experienced in making physical adjustments to congregate living facilities to ensure survivor safety. This includes safety fencing, secure access codes on doors, appropriate lighting in common areas, and monitored security systems. Subrecipients also have experience assisting survivors with modifications or additions to their chosen unit as needed to increase the participant's safety level. These may include installing security cameras, additional locks or security alarms.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

(limit 2,500 characters)

LCADV proposed RRH Project subrecipients evaluate and update their policies around confidentiality, emergency procedures and operating practices based on their impact to the safety of program participants annually at a minimum; however, policies are reviewed and updated as needed when new information is brought to management's attention. In addition, all policies and procedures utilized by member programs are reviewed by LCADV during annual monitoring visits. Feedback and guidance are given by LCADV to each subrecipient to ensure the highest level of safety for people experiencing domestic violence while interacting with LCADV member programs. Additional monitoring visits may happen in between annual visits if information is brought to project staff that indicates a concern is present and additional follow-up is needed.

In addition, as LCADV member programs, proposed RRH Project subrecipients evaluate survivor safety using the following participant-based methods:
1. Actual outcomes: Subrecipients evaluate the number of program participants that have experienced a subsequent incident of violence while receiving services.
2.Survivor feedback: Each program participant is given a feedback survey. The first question on the survey is "I know more ways to plan for my safety." Participants answer yes or no to this question and can also leave comments and suggestions for improvement. A successful outcome for this question is the percentage of yes answers to this question equaling over 90%. Percentage of yes answers are monitored monthly and this percentage is used to identify areas within the program where additional safety planning training is needed. Participant feedback and suggestions are utilized to strengthen current practices to maximize survivor safety.

As survivor safety is our most important goal, when areas identified for improvement show through safety evaluations, LCADV will provide immediate, intensive TA and support to subrecipients to ensure that any identified safety improvements are made quickly and efficiently.

As an example, safety evaluations in our Flexible Housing Assistance Program found a need for resources to improve the safety of survivors' homes. LCADV responded to this need by adding a safety enhancement category to eligible program expenses. This allowed program staff to assist survivors with enhancing the safety of their units including installing security cameras or extra locks.

	4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
		NOFO Section II.B.11.e.(1)(d)	

		Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:
	1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
	2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
	3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;

	4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
	5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
	6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
	7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. LCADV RRH Project subrecipients are domestic violence (DV) service providers with years of experience working with survivors. The subrecipients have an emergency shelter component to their services. Through shelter, subrecipients have a vast array of experience in assisting survivors with housing location and stabilization and they use a trauma informed-empowerment model which emphasizes survivor choice in all aspects of decision making, including housing location.

2. LCADV believes that all survivors of DV have the right and capability of making decisions for themselves and the right to establish a nonviolent living situation. Survivors are offered the opportunity to regain control over their lives through finding safety, emotional support, and advocacy. Proposed RRH Project subrecipients currently provide supportive services in an environment of agency and mutual respect and always work to minimize power differentials. Recognizing imbalances in power as the core behind abusive behaviors is central to our work and a core component of our service delivery model is providing a participant with an opportunity to be heard and understood. This is critical to developing a trusting relationship. When participants are heard, understood and respected and when they are treated as individuals capable of making informed choices about their own well-being, they are likely to engage in an open, trusting relationship with sub-recipient program staff. Subrecipients do not use punitive measures.

3. Trauma information is routinely given to program participants including defining trauma, information on the physiological responses to trauma and how it affects one's long-term health and memory, recognizing the effects of trauma in themselves and their children, as well as creating a trauma plan for triggering events. Subrecipient program staff receive training on trauma informed service provision and engaging with survivors about trauma as part of their initial 40-hour training upon hire. Program staff receive subsequent training on trauma annually through online, on-demand modules and in-person trainings.

4. Subrecipients use a variety of strengths-based approaches including recognizing the inherent resources people can use to counteract difficult situations, promoting the use of informal support networks, and building a strong relationship between the participant and program staff. Subrecipients currently assess strengths in an individualized manner that fits each survivor's unique needs using these tenets. All case plans include identification of survivor-defined goals, action steps to achieve those goals, the person responsible and a timeframe for completion. Staff track progress toward those goals, which is updated weekly or monthly depending on case plans.

5. Subrecipients complete training on cultural competencies including the recognition of program participant language, customs, beliefs, values, and racial, ethnic, religious, or social institutions. The training encompasses the awareness, knowledge and skills in order to effectively work with participants as whole people, made up of their cultural background and life experiences. LCADV and its proposed subrecipients recognize other forms of oppression, such as racism, classism, and homophobia as contributing to DV in our society. Proposed subrecipients are routinely monitored for compliance with state Quality Assurance Standards that include compliance with all federal and state laws regarding equal access and non-discriminatory practices.

6. Proposed subrecipients are currently providing weekly peer-to-peer support groups to survivors of DV and their children- for many years. Groups are facilitated by program staff and topics covered include DV dynamics, safety planning, and the effects of trauma. Advocates provide individual, supportive services using a peer-to-peer model. Survivors who request assistance with spiritual needs are referred to appropriate, local resources to meet that survivor-

defined need. Special care is given to make referrals that are in alignment with the survivor's specified religion and/or religious beliefs.

7. Proposed subrecipients provide parenting education, support, and access to resources, as well as access to childcare options for residential families while parents are receiving individual or group services and while the parent is looking for housing or employment. Parent education and support focuses on the effects of DV on children, parenting after abuse, non-violent discipline methods, and safety planning with children. Staff offer support to parents who need assistance with a plan for discussing the abuse with their children in an age-appropriate way. Many children stay silent about what they have seen or heard and carry guilt and other negative feelings about their experience. Assisting survivors with support to foster these tough conversations with their children encourages families to work on healing together

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

(limit 5,000 characters)

1. Louisiana Coalition Against Domestic Violence's (LCADV) proposed RRH Project subrecipients have extensive expertise providing crisis DV services. During FY2021, all subrecipients employed advocates that staffed a 27/7 DV crisis helpline, emergency shelter and provided trauma-informed, survivor directed support. This support included safety planning, individual peer counseling, support groups and civil legal assistance including navigating the restraining order process.

2. Advocates also provided direct case management services to households in conjunction with their long-term housing stability safety plans. These plans were survivor directed and included help with housing search, identifying barriers to housing stability, and connection to financial resources. They also provided safety planning specific to the identified housing unit including tangible safety resources such as security cameras, lock changing, etc.

To support this goal, they provided access and support to the following resources either directly through their own agency or by warm referrals to other agencies: employment, education, health care (including mental, medical, and dental), childcare and transportation. Subrecipients ensured that program participants had access to phones, computer, internet, or other needed methods to complete applications, communicate with benefit program staff, and to make and keep phone and online appointments. They provided access to transportation to make all in-person appointments with any health, social service, and employment resources available, and assisted participants with obtaining any needed documentation such as IDs or social security cards needed for benefit eligibility.

Proposed subrecipient staff assisted participants with applications for mainstream benefits for which they are eligible including FITAP, SNAP, Kinship Care, Medicaid, and Child Care Assistance. Child advocates working in subrecipient programs regularly assisted parents with applying for Childcare Assistance and locating appropriate childcare centers, and worked with the School Board McKinney-Vento Homeless Liaison to link eligible children to early childhood education.

3. To assist survivors with civil legal representation for protection orders and child custody, LCADV operated a civil legal project, the Legal Access Network. LCADV recruited, trained, and utilized contract attorneys across the state, including in the CoC's territory, to provide survivors with free legal representation for civil legal matters related to their safety and stability. In the past 12 months, this network has provided direct legal services to over 70 survivors.

4. Many of the proposed sub-recipients of this project participated in LCADV's Allstate Moving Ahead Financial Empowerment program in FY2021. Through this program, participants had access to financial empowerment education, including credit repair. Advocates from participating programs were trained on strategies to assist survivors with improving their credit score. Programs partnered with the National Network to End Domestic Violence (NNEDV)'s Independence Project to link participants to microloans which significantly improve survivors credit scores. Over the past 12 months, 76 survivors reported an improvement in their credit score (64 improved by 1-25 points, 7 improved by 26-50 points, 5 improved 50+ points). In addition, 156 survivors created a financial plan and 96 met a personal financial goal.

5. Subrecipients work with survivors on securing and maintaining employment. This is done through referrals and connections to the local workforce development programs and job readiness efforts. Subrecipients assist survivors with creating resumes, obtaining needed interview clothing and required certifications, securing transportation to interviews, and other employment resources.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(e)	

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

(limit 5,000 characters)

1. Louisiana Coalition Against Domestic Violence's (LCADV) proposed RRH Project subrecipients will create a landlord portfolio to support survivors with housing navigation. The units will use Fair Market Rent and HQS inspection. The program participant will determine which unit they would like to move forward with. There are no other conditions for approval. Housing Advocates (HAs) will work with each household to create plans to address any concerns that could affect housing stability. Using a Housing First approach, we will be moving program participants rapidly into permanent housing once their immediate safety needs have been addressed. Supportive services will be voluntary and offered to maximize housing stability and prevent returns to homelessness and include offering, at a minimum, monthly case management to focus on housing stabilization, safety planning and addressing any participant needs. The trauma-informed principles utilized will include addressing any continued safety needs for the household, survivor-led collaboration on housing location and housing stability goals, and transparency of HAs with survivors regarding program participant responsibilities.

2. Proposed subrecipients will provide supportive services in an environment of agency and mutual respect and will always work to minimize power differentials. Recognizing imbalances in power as the core behind abusive behaviors is central to our work and a core component of our service delivery model will be to provide participants opportunities to be heard and understood so we develop a trusting relationship. When participants are heard, understood and respected and when they are treated as individuals capable of making informed choices about their own well-being, they are likely to engage in an open, trusting relationship with sub-recipient program staff. Participants will have no barriers to entry or preconditions and will not be terminated from the project for lack of participation. Supportive services will be voluntary and offered to maximize housing stability and prevent returns to homelessness. Punitive interventions will not be used.

3. Trauma information will be routinely given to program participants, including defining trauma, physiological responses to trauma, impact on long-term health and memory, and recognizing the effects of trauma in themselves and their children. All agency staff will have access to unlimited training and technical assistance provided by LCADV who has extensive training in trauma, and many have experience working directly with survivors of trauma.

Moving into permanent housing will likely be the first time a survivor will be in a home alone after fleeing an abusive relationship. For this reason, physical and emotional safety are of the utmost importance as triggering events are common in this stage. HAs will create safety plans with each program participant in the RRH Project. These safety plans will include physical safety and emotional safety and will focus on a plan specific to their chosen home. These plans will include locating the safest area to shelter in place within the home, identifying all exit routes from the home, addressing unexpected situations, dealing with trauma triggers, and contact attempts from the abusive party.

4. Proposed subrecipients will assess strengths in an individualized manner that fits each survivor's unique needs. Once a trusting relationship is formed and inherent strengths and informal support networks are identified, the creation of realistic, attainable, survivor-led goals will be developed. Using trauma informed care principles, HAs will ensure that goals are small and have a reasonable timeframe for completion. The completion of these goals will be highly celebrated to build resiliency in program participants.

5. Proposed subrecipients will work with participants as whole people, made up of their cultural background and life experiences. HAs are trained on and recognize cultural aspects of participants including the recognition of language,

customs, beliefs, values, and racial, ethnic, religious, or social institutions. Procedures will be in place for the provision of services to people with visual, hearing, or cognitive disabilities. Materials and translators will be available for survivors with Limited English Proficiency.

6. Participants will have access to weekly support groups. HAs will provide individual, supportive services using a peer-to-peer model. Participants will be connected to appropriate local spiritual guidance as requested.

7. Participants will have access to parenting support and childcare through direct and referred services with one to one assistance, written materials and group options provided by proposed subrecipients. This support will be provided using the trauma-informed principles of promoting empowerment to parents, building resilience and collaboration within families, and understanding trauma and its impacts on the family

4A-3h.	Plan for Involving Survivors in Policy and Program Development of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(f)	

Describe in the field below how the new project(s) will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.

(limit 2,500 characters)

LCADV and project subrecipients will seek feedback from project participants with a broad range of lived experiences and will use that feedback to inform program development throughout the project's operation. Initially we will utilize our current structure detailed below to inform project development activities, and once project is active we will create feedback mechanisms to ensure survivors have a voice in identifying any improvements and changes needed to better help people to safe housing stability and connections with resources.

LCADV has current structures in place to ensure survivors in Louisiana are consulted and able to participate in identifying needs and defining policy and program solutions to help survivors. We routinely involve survivors with a range of lived expertise in policy and program development for all initiatives and projects. LCADV is a membership organization, with individual survivor memberships being a core membership group. Survivors of various backgrounds throughout the state are members of LCADV and provide us with expert guidance as we plan programs and initiatives. We also connect with survivors through our Formerly Battered Women's Roundtable, which is a caucus group in our bylaws that ensures representation of survivors in LCADV's program development. We also are connected to independent survivor groups around the state.

LCADV routinely conducts Needs Assessments throughout the state of Louisiana. In these assessments, LCADV uses a variety of means to communicate with survivors with a range of lived expertise. Outreach efforts for this initiative include online surveys, survivor listening groups, connection with churches and organizations serving underserved communities and surveys of organizations currently serving survivors. LCADV will specifically include information about this project in our feedback requests and will use the information compiled to inform our policy and program development for this project.

In addition, LCADV has board members and staff who identify as survivors of domestic violence, bringing additional voices of survivors into the policy development conversation.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/22/2022
1C-7. PHA Moving On Preference	No	PHA Move On Prefe...	09/22/2022
1E-1. Local Competition Deadline	Yes	Local Competition...	09/22/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/22/2022
1E-2a. Scored Renewal Project Application	Yes	Scored Forms for ...	09/22/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/22/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/23/2022
1E-5b. Final Project Scores for All Projects	Yes	Final Project Sco...	09/23/2022
1E-5c. Web Posting–CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		

3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/22/2022
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Move On Preference

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores for All Projects

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/14/2022
1B. Inclusive Structure	09/15/2022
1C. Coordination and Engagement	09/22/2022
1D. Coordination and Engagement Cont'd	09/22/2022
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/17/2022
2B. Point-in-Time (PIT) Count	09/14/2022
2C. System Performance	09/21/2022
3A. Coordination with Housing and Healthcare	09/15/2022
3B. Rehabilitation/New Construction Costs	09/14/2022
3C. Serving Homeless Under Other Federal Statutes	09/14/2022

4A. DV Bonus Project Applicants	09/20/2022
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

PHA Homeless Preference (1C-7)

Attachment Coversheet

JOHN BEL EDWARDS
GOVERNOR

JOSHUA G. HOLLINS
EXECUTIVE DIRECTOR

Louisiana Housing Corporation

September 2, 2022

Mr. Clay Boykin
Louisiana Housing Corporation
2415 Quail Drive
Baton Rouge, LA 70808

Dear Mr. Boykin,

The Louisiana Housing Authority has both general and limited housing preferences for Housing Choice Vouchers and those preferences are:

Preference	Points
1. Applicants in Tax Credit or other units designated for PSH under the Road Home Program.	15 - Absolute preference
2. Applicants with incomes not exceeding 30% AMI, or exceeding 30% of AMI only because two persons in the household receive Supplemental Security Income	15 - preference
3. Chronically Homeless Persons	15
4. Persons inappropriately institutionalized	10
5. Permanent Supportive Housing Service Participant	9
6. Homeless persons age 18-24	8
7. Veterans	7
8. Persons displaced by Hurricanes Katrina or Rita or Other Disaster Displacees	5
9. Persons at risk of homelessness or living in transitional housing for persons who are homeless	2
10. Persons at risk of institutionalization	2
11. Homeless persons	1
12. Non-preference or standard applicant (none of the above)	0

All households must be PSH-eligible.

If you have any questions, please feel free to contact me at tjackson@lhc.la.gov.

Thank you,

Tonika Jackson-Smart
Administrative Program Manager
Louisiana Housing Authority

2415 Quail Drive • Baton Rouge, Louisiana 70808 • (225) 763-8700 • Fax (225) 763-8710 • TYY/TDD (225) 763-8762 • www.lhc.la.gov

An Equal Opportunity Employer

4-III.C. SELECTION METHOD

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

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

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

> PHA Policy
>
> Preferences for the HCV waiting list for East Baton Rouge Parish only:
>
> > Equal weight will be given to both the listed preferences:
> >
> > The PHA will give elderly (62 years of age or older) head-of-household and/or disabled families preference.
> >
> > The PHA will give homeless veterans preference. Written verification of both veteran and homeless status will be required from the Department of Veteran's Affairs Southeast Louisiana Veterans Health Care System (VA). Determination of homelessness and veteran status will be made by the VA through their local office and/or the One Stop Homeless Services Center in coordination with the VA.
>
> Preferences for the HCV waiting list for the City of Plaquemine only:
>
> > The PHA will give a residency preference for head-of-household applicants who reside within the City of Plaquemine, Louisiana. Applicants will need to provide current proof of residency. The use of a residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family.

Local preferences and set asides are outlined in the PHA's Annual Plan which is updated annually. The PHA must inform all applicants about all available preferences and give all applicants an opportunity to qualify for the preferences.

Preference information on applications will be updated as applicants are selected from the waiting list. At that time, the PHA will mail a written notice to the applicant requesting verification of the family's preference claim.

If the PHA denies a preference, the PHA will notify the applicant in writing of the reasons why the preference was denied and offer the applicant an opportunity for an informal review. If the preference denial is upheld as a result of the review, or the applicant does not request such a review, the applicant will remain on the waiting list without benefit of the preference. Applicants may exercise other rights if they believe they have been discriminated against.

If an applicant falsifies documents or makes false statements in order to qualify for any preference, they will be removed from the waiting list.

PHA Moving On Preference (1C-7)

Attachment Coversheet

Louisiana Housing Corporation

September 2, 2022

Mr. Clay Boykin
Louisiana Housing Corporation
2415 Quail Drive
Baton Rouge, LA 70808

Dear Mr. Boykin,

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10. Persons at risk of institutionalization	2
11. Homeless persons	1
12. Non-preference or standard applicant (none of the above)	0

All households must be PSH-eligible.

If you have any questions, please feel free to contact me at tjackson@lhc.la.gov.

Thank you,

Tonika Jackson-Smart
Administrative Program Manager
Louisiana Housing Authority

Local Competition Announcement (1E-1)

Attachment Coversheet

-Local Competition Deadline Screenshots CoC Website (Pg. 1)
-Timeline and Critical Dates Documents (Pg. 3)

Funding

FY 2022 CoC Program Local Competition Documents Now Available

August 10, 2022

Overview

The Louisiana Housing Corporation (LHC), on behalf of the Louisiana Balance of State Continuum of Care (LA BOSCOC), opens its local competition for funding available under the Funding Year (FY) 2022 Continuum of Care (CoC) Program Notice of Funding Opportunity (NOFO) on August 10, 2022.

The U.S. Department of Housing and Urban Development (HUD) released its FY 2022 CoC Program NOFO on August 1, 2022. The CoC Program funds eligible organizations to provide housing and supportive services to people experiencing homelessness, including people fleeing domestic violence.

Through its local competition, the LA BOSCOC expects to make approximately $23 million available, including approximately $1 million for new projects.

The LA BOSCOC welcomes and encourages applicants that have not previously received CoC Program funding to apply.

The LA BOSCOC will publish all information about its local competition on its website and via its email distribution list. Click here to subscribe to the LA BOSCOC's email distribution list.

The LA BOSCOC will publish all information about its local competition on its website and via its email distribution list. Click here to subscribe to the LA BOSCOC's email distribution list.

Local Competition documents

Today, the LA BOSCOC published several key documents for its local competition. These documents may be updated as a result of HUD publications. They are:

- Request for Proposals (RFP)
- Timeline and Critical Dates
- Project Rating and Ranking
- Renewal Projects Eligible to Apply
- Renewal Project Scoring Tool
- New Project Scoring Tool
- DV Bonus RFP
- DV Bonus Project Proposal Form

Reminder: FY 2022 CoC Program local competition webinar

LHC will host an informational webinar for its FY 2022 CoC Program local competition on Tuesday, August 16th. This webinar will provide both an overview of the FY 2022 CoC Program NOFO and critical information for potential project applicants.

Information about how to join the webinar will be posted on this website.

Funding Year 2022 Continuum of Care Program Local Competition

HUD released the Funding Year (FY) 2022 Continuum of Care (CoC) Program Notice of Funding Opportunity (NOFO) in August 2022.

The LA BOSCOC's CoC Program local competition opened August 10, 2022.

FOR ALL PROJECTS

Request for Proposals - information about how to apply for new/renewal projects

- Original Release

***

Timeline and Deadlines - projected timeline and deadlines for the CoC Program Local Competition

Annual Changelog - list of changes to the CoC Program local competition by year

***

Project Rating, Ranking, and Selection - procedure for and details about rating, ranking, and scoring for

FOR NEW PROJECTS

New Project Scoring Tool - tool used by the LA BOSCOC Scoring Committee to score and rank new projects; *includes detailed instructions for receiving points under each element*

***

Louisiana Coalition Against Domestic Violence (LCADV) - DV Bonus Request for Proposals - information about how to apply for new project funding to serve domestic violence survivors through LCADV

- Original Release

- Project Proposal Form

FOR RENEWAL PROJECTS

Existing Projects Eligible for Renewal - list of all existing projects eligible to apply for renewal funding

***

Renewal Project Scoring Tool - tool used by the LA BOSCOC Scoring Committee to score and rank renewal projects

Louisiana Balance of State Continuum of Care

Timeline and Critical Dates
Continuum of Care (CoC) Program Local Competition
Funding Year 2022

Document may be updated as a result of HUD publications.

Table of Contents

I. Introduction

The Louisiana Balance of State Continuum of Care (LA BOSCOC) is Louisiana's largest coalition to end homelessness. This document is part of a series related to the LA BOSCOC's local competition for funding under the Continuum of Care (CoC) Program's Notice of Funding Opportunity (NOFO) for Funding Year (FY) 2022. For more information, including other documents in this series, please visit the LA BOSCOC's website at https://laboscoc.org/fy22-coc-program-competition.

The following timeline and critical dates apply to the LA BOSCOC's local competition for funding under the FY 2022 CoC Program NOFO.

Specific dates are subject to change at the LA BOSCOC's discretion. Changes will be published to the LA BOSCOC's website at https://laboscoc.org/fy22-coc-program-competition and via the LA BOSCOC's email distribution list. Click here to subscribe to the LA BOSCOC's email distribution list.

II. Timeline and Critical Dates

Date	Description
August 10, 2022	The LA BOSCOC publishes its FY 2022 CoC Program local competition Request for Proposals (RFP) and associated documents at https://laboscoc.org/fy22-coc-program-competition and via its email distribution list
August 10, 2022	All available supplemental documents related to the FY 2022 CoC Program local competition will be released by this date, including the Renewal Project Scoring Tool and New Project Scoring Tool (estimated)
August 16, 2022	The LA BOSCOC hosts an informational webinar about the CoC Program and applying to the local competition's RFP; registration details will be published to the LA BOSCOC's website and via the LA BOSCOC's email distribution list
August 29, 2022	**PROJECT APPLICATIONS DUE: all new and renewal project applications must be submitted to LHC via email to cpatterson@lhc.la.gov by 4 PM CST**
September 9, 2022	The LA BOSCOC notifies all new and renewal project applications whether their projects were conditionally funded as written, conditionally funded at a reduced rate, or rejected

Date	Description
September 13, 2022	Deadline for project applicants to submit appeals to the LA BOSCOC Board. Appeals must be received by 4 PM CST.
September 15, 2022	The LA BOSCOC Board responds to all appeals and notifies all new and renewal project applications whether their projects will be submitted as part of the consolidated application as written, submitted at a reduced rate, or not submitted
September 18, 2022	**PROJECT APPLICATIONS MUST BE FINALIZED IN E-SNAPS: all new and renewal project applications conditionally approved for funding must be submitted to HUD in e-snaps by 4 PM CST**
No later than September 26, 2022	The LA BOSCOC publishes the draft consolidated application and project priority listing for public comment at www.laboscoc.org
September 28, 2022	The LA BOSCOC publishes the finalized consolidated application and project priority listing and submits them to HUD (estimated)
September 30, 2022	Final date on which the LA BOSCOC can submit the finalized consolidated application and project priority listing to HUD

Local Competition Scoring Tool (1E-2)

Attachment Coversheet

(1) New Scoring Tool and Detailed Instructions (starts p1)
(2) Renewal Scoring Tool and Detailed Instructions (starts p 18)
a. Objective criteria - 100%
b. System Performance criteria - 38% 38/100 points
(3) Final project scores for ranked new and renewal projects (starts p 34)

Louisiana Balance of State Continuum of Care

New Project Scoring Tool and Detailed Instructions Continuum of Care (CoC) Program Local Competition Funding Year 2022

Published August 10, 2022
Document will be updated as a result of HUD publications including references to question numbers

Table of Contents

I. Introduction

The Louisiana Balance of State Continuum of Care (LA BOSCOC) is Louisiana's largest coalition to end homelessness. This document is part of a series related to the LA BOSCOC's local competition for funding under the Continuum of Care (CoC) Program's Notice of Funding Opportunity (NOFO) for Funding Year (FY) 2022. For more information, including other documents in this series, please visit the LA BOSCOC's website at https://laboscoc.org/fy22-coc-program-competition.

The LA BOSCOC uses standardized scoring tools and procedures to rate, rank, and select projects submitted for inclusion in its consolidated application to the FY 2022 CoC Program NOFO. This document contains three elements of that process:

- **The New Project Scoring Tool,** which defines the metrics against which renewal projects are assessed;
- **Additional documentation,** which describes additional documents that project applicants must submit to earn points under certain scoring criteria;
- **Detailed instructions** regarding each metric.

The LA BOSCOC scores projects according to this document and therefore encourages applicants to incorporate this document into their project design and application creation processes.

All information about the LA BOSCOC's local competition, including the scoring tools, will be published to its website at https://laboscoc.org/fy22-coc-program-competition and via its email distribution list. Click here to subscribe to the LA BOSCOC's email distribution list.

II. Scoring Tool

Q#	Section	Element Name	Points Possible
1	Project Design	Prioritized Target Population	4
2	Project Design	Chronic Homelessness/DedicatedPLUS	4
3	Project Narratives	Community Need	12
4	Project Narratives	Permanent Housing and Self-Sufficiency	11
5	Project Narratives	Income and Mainstream Benefits	11
6	Project Narratives	Implementation Timeline	4
7	Project Data	Project Budget	10
8	Project Data	Cost Effectiveness	6
9	Organization Information	Homeless Services Experience	12
10	Organization Information	Fund Leveraging Experience	4
11	Organization Information	Organization Structure and Financial Accountability	4
12	Organization Information	Monitoring Outcomes	4
13	CoC Participation	Point in Time Count	2
14	CoC Participation	Housing Inventory Chart	2
15	Leveraging Resources	Leveraging Housing Resources	5
16	Leveraging Resources	Leveraging Healthcare Resources	5
		BASE POINTS POSSIBLE	**100**
a	Bonus Points	Rural Service Area	4
b	Bonus Points	Reallocation	10
c	Bonus Points	Staff Sustainability	4
d	Bonus Points	Equity	4
		BONUS POINTS POSSIBLE	**22**

III. Additional Documentation

All projects are required to submit their most recently completed Annual Performance Report (APR) if applicable to cpatterson@lhc.la.gov along with their project applications.

Certain scoring elements require projects to submit "additional evidence or attestations." To fulfill this requirement for a given scoring element, projects should submit either of the following to cpatterson@lhc.la.gov along with their project application:

- Evidence that the requirement was met, with relevant passages highlighted or specified; or,
- A signed letter from an authorized signatory for the organization attesting that the requirement was met.

The following scoring elements require this additional documentation:

Q#	Section	Element Name	Requirement
c	Bonus Points	Staff Sustainability	Refer to question for more information
d	Bonus Points	Equity	Refer to question for more information
15	Leveraging Resources	Leveraging Housing Resources	Formal written agreement that includes, at minimum, (1) the value of the commitment and (2) the amount of housing resources and the timeframe in which they will be provided, as well as any additional documentation needed to establish that the project meets all listed criteria
16	Leveraging Resources	Leveraging Healthcare Resources	Formal written agreement that includes, at minimum, (1) the value of the commitment and (2) the dates the healthcare resources will be provided, as well as any additional documentation needed to establish that the project meets all listed criteria

IV. Detailed Instructions

A. Threshold Criteria

The New Project Scoring Tool includes seven threshold criteria. Projects must meet or fulfill each element of all threshold criteria to be considered for funding.

1.   Recipient and Subrecipient Eligibility

Criterion Element	Description
Eligible Organization(s)	The recipient and, as applicable, all subrecipients must be eligible organizations, which are limited to: ● Non-profit organizations ● Local governments and instrumentalities of local government ● Indian tribes and tribally designated housing entities ● Public housing authorities
Eligible Service Area	The project must propose to serve exclusively parishes within the LA BOSCOC's geography. For a list of parishes, refer to the RFP.

2.   Population Eligibility

Each project type is limited to serving certain populations. Those populations are below.

Population Availability/Restriction	PSH	RRH	TH-RRH
Must serve one of the following: (1) People who were eligible for assistance under the project's FY 2022 grant agreement; (2) 100% people who meet the DedicatedPLUS definition; or, (3) 100% people experiencing chronic homelessness.	X		
May serve people who qualify as homeless under paragraphs (1) or (4) of the homeless definition in 24 CFR 578.3, i.e. people experiencing literal homelessness or fleeing domestic violence		X	X

May serve people who qualify as homeless under paragraph (2) of the homeless definition in 24 CFR 578.3, i.e. people at risk of homelessness		X[1]	X[2]
If serving exclusively single person households: may choose to restrict participant intake to a single gender	X	X	X
If serving any multi-person households: must intake participants regardless of their gender	X	X	X

---

[1] Restrictions apply. For more information, contact cpatterson@lhc.la.gov.
[2] Restrictions apply. For more information, contact contact cpatterson@lhc.la.gov

3.   Eligible Activities

Each project type is limited to certain activity categories as listed in 24 CFR Part 578, Subpart D. Those activities are listed below.

Eligible Activity	PSH	RRH	TH-RRH
Leasing	X		X
Rental Assistance	X	X	X
Operating Costs	X		X
Supportive Services	X	X	X
HMIS	X	X	X
Administration	X	X	X

4.   Matching Requirement

Projects must provide at least 25% match for all CoC Program funds (excluding funds provided under the Leasing activity). Match may be either cash or in-kind. Eligible sources of match are defined in 24 CFR 578.73(b).

5.   HMIS

Organization Type	Description
Homeless Services Provider	Project must record and maintain participant data in the LA BOSCOC's Homeless Management Information System (HMIS) database, ServicePoint.
Domestic Violence Services Provider	Project must record and maintain participant data in an HMIS-comparable database.

6.   Coordinated Entry

Each project type is required to engage the LA BOSCOC's Coordinated Entry System (CES) in certain ways. Those ways are listed below.

CES Requirement	PSH	TH	TH-RRH
Must intake participants exclusively through CES	X	X	X
If the project is funded to conduct outreach: must provide the Access, Assessment, Diversion, and Rapid Exit elements of CES to project participants	X	X	X

7.   Housing First

Under Section 3B, the project must:

- Answer "yes" to Section 3B-5a;
- Check all of the boxes except "none of the above" under Section 3B-5b;
- Check all of the boxes except "none of the above" under Section 3B-5c;
- Answer "yes" to Section 3B-5d.

B. Scoring Elements

Projects receive points for each of the following scoring elements. Scoring elements may have one or multiple measures under which points are awarded.

1.   Project Design

Scoring Element	Total Points	Points Breakdown
1. Prioritized Target Population	4	Under Section 3B-3, the project application: **4 Points:** proposes to serve at least one of the following target populations: ● People experiencing chronic homelessness ● Veterans ● Youth (aged 18-24)
2. Chronic Homelessness/ DedicatedPLUS	4	Percentage of project beds that are dedicated to people who are experiencing chronic homelessness and/or who meet the edicatedPLUS Definition: **4 Points:** 100% **2 Points:** 50%+

2.   Project Narratives

Scoring Element	Total Points	Points Breakdown
3. Community Need	12	Under Section 3B-1, the project application: **Up to 5 Points:** identifies and describes specific, significant community need(s). **Up to 5 Points:** outlines a comprehensive strategy to address those community need(s). **Up to 2 Points:** identifies specific project outcomes tied to those community need(s).

4. Permanent Housing and Self-Sufficiency	11	In the applicable Sections (the narrative in 4A-1, the housing chart in 4B, and the yes/no responses in 4A-4, 4A-5, and 4A-6, the project application:
		Up to 6 Points: the project's plan to help participants move into and sustain permanent housing includes (1) the specific needs of the target population, (2) plans to address those needs through case management, and (3) information about the accessibility of supportive services such as housing search, primary health care, mental health services, educational services, employment services, etc. **Up to 3 Points:** proposes that participants will be EITHER housed in units owned and operated by the project applicant OR describes how the project will (1) identify units and (2) engage landlords through new or existing relationships. **Up to 2 Points:** provides regular or as-needed transportation to attend mainstream benefits appointments, employment training, or jobs.
5. Income and Mainstream Benefits	11	In the applicable Sections (the narrative in 4A1, the narrative in 4A-2, and the chart in 4A-3), the project application: **Up to 5 Points:** describes how (1) the project will help participants increase their employment income, (2) the project will help participants increase their non-employment income (e.g. accessing SSI/SSDI), and (3) the project's supportive services offerings will lead to participants increasing their income. **Up to 4 Points:** commits to assisting participants in becoming more independent by coordinating and integrating with other mainstream health and social services providers and benefits. **Up to 2 Points:** offers an appropriate suite of supportive services that neither over-commits the applicant nor over-relies on external partners or entities.
6. Implementation Timeline	4	In Section 3B-2, the project: **Up to 4 Points:** has a specific and realistic implementation timeline.

3. Project Data

Scoring Element	Total Points	Points Breakdown
7. Project Budget	10	In Part 6 - Budget Information, the project application: **Up to 6 Points:** has a specific and realistic budget that proposes adequate services that take into consideration the needs of the target population. **Up to 2 Points:** is requesting sufficient HMIS funding to successfully maintain participant data in HMIS (or, for domestic violence service providers, in an HMIS-comparable database). **Up to 2 Points:** is requesting sufficient outreach funding to successfully connect with participants referred to the project. *Note that projects are not required to fund dedicated HMIS or outreach staff (although they may choose to do so). HMIS and outreach can be part of a larger suite of duties assigned to one or more case managers or other staff.*
8. Cost Effectiveness	6	Cost effectiveness is a function of how much the project costs per positive outcome. "Positive outcomes" are defined here as participants projected to be served. Each project's cost effectiveness value (CEV) is equal to (Total CoC Program Funds Budgeted - Administrative Costs Budget Line) ÷ (Total Participants anticipated to be served). **6 Points:** CEV <= $8,500 **4 Points:** CEV <= $9,000 **2 Points:** CEV <= $9,500

4.   Organization Information

Scoring Element	Total Points	Points Breakdown
9. Homeless Services Experience	12	In Section 2B-1, the project application: **Up to 9 Points:** describes the project applicant's (and subrecipients', if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application, including (1) working with and addressing the project's target populations' identified housing and supportive services needs and (2) developing and implementing relevant project systems and services. **Up to 3 Points:** describes key staff at the organization level (e.g. project directors, executive staff) with relevant experience developing similar projects.
10. Fund Leveraging Experience	4	In Section 2B-2, the project application: **Up to 4 Points:** describes the project applicant's (and subrecipients', if applicable) experience in leveraging Federal, State, local, and private sector funds.
11. Organization Structure and Financial Accountability	4	In Section 2B-3, the project application: **Up to 4 Points:** describes the project applicant's (and subrecipients', if applicable) financial management structure.
12. Monitoring Outcomes	4	Based on Section 2B-4 and the LA BOSCOC's records: **4 Points:** the project applicant has no unresolved HUD monitoring, OIG audit, or LA BOSCOC monitoring findings.

5. CoC Participation

Scoring Element	Total Points	Points Breakdown
13. Point in Time Count	2	Based on the LA BOSCOC's records: **2 Points:** one of the following must be true: ● The project applicant participated in the 2022 Point in Time (PIT) Count by submitting emergency shelter or transitional housing data; or, ● The project applicant was not operating any emergency shelter or transitional housing projects in the LA BOSCOC during the 2022 PIT Count.
14. Housing Inventory Chart	2	Based on the LA BOSCOC's records: **2 Points:** one of the following must be true: ● The project applicant contributed in the calendar year 2022 Housing Inventory Chart (HIC) by submitting data for any of its emergency shelter, transitional housing, or permanent housing projects; or, ● The project applicant was not operating any emergency shelter, transitional housing, or permanent housing projects in the LA BOSCOC in February 2022.

6.   Leveraging Resources

Scoring Element	Total Points	Points Breakdown

15. Leveraging Healthcare Resources	5	**5 Points:**
		
		These points are available for RRH and PSH projects that leverage healthcare resources to help people experiencing homelessness.
		
		To receive points under this element, projects must submit evidence or an attestation that satisfies all of the below criteria, including the formal written agreement specified in criteria (3).
		
		To be eligible for these points, projects must meet ALL of the following criteria:
		    (1) Project type is RRH or PSH;
		    (2) Project is EITHER:
		        (a) A substance abuse treatment or recovery provider that will provide access to treatment or recovery services for all project participants who qualify and choose those services; or,
		        (b) Receiving funding for eligible activities from a healthcare organization equivalent to 25% of CoC Program funds being requested;
		    (3) Project must have a commitment in the form of a formal written agreement that must include, at minimum, (1) the value of the commitment and (2) the dates the healthcare resources will be provided.
		
		Note: in-kind resources must be valued at the local rates consistent with the amount paid for services not supported by grant funds.
		
		Note: eligible sources of health care resources include but are not limited to direct contributions from a public or private health insurance provider to the project and provision of health care services by a private or public organization tailored to the participants of the project.
		
		Note: eligibility for the project must comply with HUD program and fair housing requirements. Eligibility criteria cannot be restricted by the eligibility requirements of the health care service provider.

| 16. Leveraging Housing Resources | 5 | **5 Points:**

These points are available for RRH and PSH projects that leverage housing resources to help people experiencing homelessness.

To receive points under this element, projects must submit evidence or an attestation that satisfies all of the below criteria, including the formal written agreement specified in criteria (3).

To be eligible for these points, projects must meet ALL of the following criteria:
    (4) Project type is RRH or PSH;
    (5) Project pairs housing resources (vouchers, site based housing units, etc) from non CoC or ESG funded sources with Supportive Services funded through CoC Program funds;
    (6) Project must have a commitment in the form of a formal written agreement that must include, at minimum, (1) the value of the commitment and (2) the dates the healthcare resources will be provided. |

7. Bonus Points

Scoring Element	Total Points	Points Breakdown
a. Rural Service Area	4	For the purposes of this scoring element, all parishes are considered rural except Calcasieu, East Baton Rouge, and Houma. **4 Points:** 100% of project's beds are located in rural parishes **2 Points:** 50%+ of project's beds are located in rural parishes
b. Reallocation	10	**10 Points:** the project applicant has voluntarily reallocated at least one renewal project during the FY 2022 CoC Program Competition. *Note that only one project per applicant can benefit from these bonus points. If an applicant submits more than one new project that could receive these points, the applicant must specify which project will benefit from these points on or before the deadline for new project application submissions.*
c. Staff Sustainability	4	To receive points under this element, projects must submit evidence or an attestation that satisfies the scoring element criteria. For the purposes of this scoring element, "all staff" refers to all staff whose costs are paid for in any portion by the project. Projects receive **2 points** if all proposed staff will be paid at least $15/hour. Projects receive **1 point** if all staff will either receive health insurance through their employer or receive payments intended to defray the cost of purchasing health insurance. Projects receive **1 point** if all staff will receive at least 120 hours of paid leave per year (combined personal leave and sick leave excluding holidays) prorated to each staff person's Full Time Equivalents (FTEs).
d. Equity	4	To receive points under this element, projects must submit evidence or an attestation that satisfies the scoring element criteria. To qualify, the actions below must have been taken within the last three years.

| | | Projects receive **1 point** if the project applicant assessed whether black, indigenous, and other people of color (BIPOC) face barriers to equitably accessing or receiving services from their organization.

Projects receive **1 point** if the project applicant has addressed or made a written commitment to addressing BIPOC barriers identified above, OR no barriers were identified in the assessment above.

Projects receive **1 point** if the project applicant assessed whether lesbian, gay, bisexual, transgender, queer, and other people whose genders or sexualities are heteronormative (LGBTQ+) people face barriers to equitably accessing or receiving services from their organization.

Projects receive **1 point** if the project applicant has addressed or made a written commitment to addressing LGBTQ+ barriers identified above, OR no barriers were identified in the assessment above. |
| --- | --- | --- |

Louisiana Balance of State Continuum of Care

Renewal Project Scoring Tool and Detailed Instructions Continuum of Care (CoC) Program Local Competition Funding Year 2021

Published August 10, 2022

Document may be updated as a result of HUD Publications.

Table of Contents

I.   Introduction

The Louisiana Balance of State Continuum of Care (LA BOSCOC) is Louisiana's largest coalition to end homelessness. This document is part of a series related to the LA BOSCOC's local competition for funding under the Continuum of Care (CoC) Program's Notice of Funding Opportunity (NOFO) for Funding Year (FY) 2022. For more information, including other documents in this series, please visit the LA BOSCOC's website at https://laboscoc.org/fy22-coc-program-competition.

The LA BOSCOC uses standardized scoring tools and procedures to rate, rank, and select projects submitted for inclusion in its consolidated application to the FY 2022 CoC Program NOFO. This document contains three elements of that process:

- **The Renewal Project Scoring Tool,** which defines the metrics against which renewal projects are assessed;
- **Additional documentation,** which describes additional documents that project applicants must submit to earn points under certain scoring criteria;
- **Detailed instructions** regarding each metric.

The LA BOSCOC scores projects according to this document and therefore encourages applicants to incorporate this document into their project design and application creation processes.

All information about the LA BOSCOC's local competition, including the scoring tools, will be published to its website at https://laboscoc.org/fy22-coc-program-competition and via its email distribution list. Click here to subscribe to the LA BOSCOC's email distribution list.

II. Scoring Tool

Q#	Section	Element Name	Points
1	Project Design	Prioritized Target Population	4
2	Project Outcomes	Intake to Leasing	2
3	Project Outcomes	Exiting to/Maintaining Permanent Housing	12
4	Project Outcomes	Exiting to Shelter/Streets/Unknown	8
5	Project Outcomes	Increased Income	8
6	Project Outcomes	Increased Non-Cash Benefits	8
7	Project Outcomes	Projected Households Served	8
8	Project Outcomes	Bed Utilization Rate	8
9	Project Outcomes	HMIS Data Quality %	10
10	Project Outcomes	Cost Effectiveness	4
11a	Project Type Specific Scoring	Domestic Violence	8
11b	Project Type Specific Scoring	Permanent Supportive Housing	8
11c	Project Type Specific Scoring	Rapid Re-Housing	8
11d	Project Type Specific Scoring	TH-RRH Joint Component	8
11e	Project Type Specific Scoring	Transitional Housing	8
11f	Project Type Specific Scoring	Supportive Services Only	8
12	CoC Participation and Compliance	Funds Utilization	6
13	CoC Participation and Compliance	APR Timeliness	4
14	CoC Participation and Compliance	Funding Draw Timeliness	2
15	CoC Participation and Compliance	Monitoring	4
16	CoC Participation and Compliance	Financial Stability	4
		BASE POINTS POSSIBLE	**100**
a	Bonus Points	Rural Service Area	4
b	Bonus Points	Domestic Violence	4
c	Bonus Points	Staff Sustainability	4
d	Bonus Points	Equity	4
		BONUS POINTS POSSIBLE	**16**

III. Additional Documentation

All projects are required to submit their most recently completed Annual Performance Report (APR) to cpatterson@lhc.la.gov along with their project applications.

Certain scoring elements require projects to submit "additional evidence or attestations." To fulfill this requirement for a given scoring element, projects should submit either of the following to cpatterson@lhc.la.gov along with their project application:

● Evidence that the requirement was met, with relevant passages highlighted or specified; or,

● A signed letter from an authorized signatory for the organization attesting that the requirement was met.

The following scoring elements require this additional documentation:

Q#	Section	Element Name	Requirement
n/a	Threshold Criteria	HMIS	*DV service providers only:* the project records and maintains participant data in an HMIS comparable database
11a	Project Type Specific Scoring	Domestic Violence	Participant safety assessment
11b	Project Type Specific Scoring	Permanent Supportive Housing	Percentage of participant households receiving SSI/SSDI, being served by a SOAR case manager, or ineligible to receive SSI/SSDI
11d	Project Type Specific Scoring	TH-RRH Joint Component	Written policies and procedures
11f	Project Type Specific Scoring	Supportive Services Only	Written policies and procedures
14	CoC Participation and Compliance	Funding Draw Timeliness	Funds drawn at least quarterly from LOCCS
16	CoC Participation and Compliance	Financial Stability	Project had no issues or concerns during its most recent audit OR did not meet the single audit requirement threshold
c	Bonus Points	Staff Sustainability	Refer to question for more information
d	Bonus Points	Equity	Refer to question for more information

IV. Detailed Instructions

A. Threshold Criteria

The Renewal Project Scoring Tool includes seven threshold criteria. Projects must meet or fulfill each element of all threshold criteria to be considered for funding.

1. Recipient and Subrecipient Eligibility

Criterion Element	Description
Eligible Organization(s)	The recipient and, as applicable, all subrecipients must be eligible organizations, which are limited to: ● Non-profit organizations ● Local governments and instrumentalities of local government ● Indian tribes and tribally designated housing entities ● Public housing authorities
Eligible Service Area	The project must propose to serve exclusively parishes within the LA BOSCOC's geography. For a list of parishes, refer to the RFP.

2.   Population Eligibility

Each project type is limited to serving certain populations. Those populations are below.

Population Availability/Restriction	PSH	RRH, TH, and TH-RRH	SSO, SSO-CES
Must serve one of the following: (1) People who were eligible for assistance under the project's FY 2022 grant agreement; (2) 100% people who meet the DedicatedPLUS definition; or, (3) 100% people experiencing chronic homelessness.	X		
May serve people who qualify as homeless under paragraphs (1) or (4) of the homeless definition in 24 CFR 578.3, i.e. people experiencing literal homelessness or fleeing domestic violence		X	X
May serve people who qualify as homeless under paragraph (2) of the homeless definition in 24 CFR 578.3, i.e. people at risk of homelessness		X[1]	X
If serving exclusively single person households: may choose to restrict participant intake to a single gender	X	X	X
If serving any multi-person households: must intake participants regardless of their gender	X	X	X

[1] Restrictions apply. For more information, contact cpatterson@lhc.la.gov.

3.   Eligible Activities

Each project type is limited to certain activity categories as listed in 24 CFR Part 578, Subpart D. Those activities are listed below.

Eligible Activity	PSH	RRH, TH, and TH-RRH	SSO, SSO-CES
Leasing	X	X[2]	
Rental Assistance	X	X	
Operating Costs	X	X[3]	
Supportive Services	X	X	X
HMIS	X	X	X
Administration	X	X	X

4.   Matching Requirement

Projects must provide **at least** 25% match for all CoC Program funds (excluding funds provided under the Leasing activity). Match may be either cash or in-kind. Eligible sources of match are defined in 24 CFR 578.73(b).

5.   HMIS

Organization Type	Description
Homeless Services Provider	Project must record and maintain participant data in the LA BOSCOC's Homeless Management Information System (HMIS) database, ServicePoint.
Domestic Violence Services Provider	Project must record and maintain participant data in a HMIS-comparable database.

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[2] TH-RRH only
[3] TH-RRH only

6.   Coordinated Entry

Each project type is required to engage the LA BOSCOC's Coordinated Entry System (CES) in certain ways. Those ways are listed below.

CES Requirement	PSH	RRH, TH, and TH-RRH	SSO, SSO-CES
Must intake participants exclusively through CES	X	X	n/a
If the project is funded to conduct outreach: must provide the Access, Assessment, Diversion, and Rapid Exit elements of CES to project participants	X	X	X
If the project is funded for CES activities: must provide the Access, Assessment, Diversion, and Rapid Exit elements of CES as part of the CoC's CES system			X

7.   Housing First

Criterion Element	Description
Project Qualified as Housing First in FY 2021	Project must continue to answer "Yes" under project Question TBD when HUD publishes applications in e-snaps.
Project Did Not Qualify as Housing First in FY 2021	Project must, at minimum, check the same boxes in project Questions TBD when HUD publishes applications in e-snaps.

B. Scoring Elements

Projects receive points for each of the following scoring elements. Scoring elements may have one or multiple measures under which points are awarded.

1.   Project Design

Scoring Element	Total Points	Points Breakdown
1. Prioritized Target Populations	4	**4 Points:** target population includes at least one of the following: ● People experiencing chronic homelessness ● Veterans ● Youth (aged 18-24)

2.   Project Outcomes

Scoring Element	Total Points	Points Breakdown
2. Intake to Leasing	2	Average days between participant project entry and participant lease-up. **PSH** **RRH or TH-RRH** **2 Points:** <= 60 days **2 Points:** < = 30 days **1 Point:** <= 100 days **1 Point:** < = 90 days *Note: Project applicants can expect to see this metric weighted more heavily in the future.*
3. Exiting to/Maintaining Permanent Housing	12	Percentage of participant households during the last complete project performance period that for: PSH exited to permanent housing or remained in the project or RRH exited to permanent housing only: **PSH** **RRH or TH-RRH** **8 Points:** 90%+ **8 Points:** 70%+ **5 Points:** 70%+ **5 Points:** 60%+ **2 Points:** 50%+ **2 Points:** 50%+

4. Exiting to Shelter/ Streets/Unknown	8	Percentage of participant households that exited to an emergency shelter, the streets, another place not meant for human habitation, or an unknown location during the last complete project performance period: **8 Points:** <= 5% **5 Points:** <= 10% **2 Points:** <= 15%
5. Increased Income at Exit	8	Percentage of participant households that exited the project during the last complete project performance period that increased their employment income by any amount since intake or most recent annual evaluation: **PSH** **RRH or TH-RRH** **4 Points:** 15%+ **4 Points:** 20%+ **2 Points:** 10%+ **2 Points:** 15%+ **1 Points:** 5%+ **1 Points:** 10%+ increased their non-employment income by any amount since intake or most recent annual evaluation: **PSH** **RRH or TH-RRH** **4 Points:** 40%+ **4 Points:** 30%+ **2 Points:** 30%+ **2 Points:** 20%+ **1 Points:** 20%+ **1 Points:** 10%+
6. Increased Non-Cash Benefits	8	Percentage of participant households that exited the project during the last complete project performance period and that increased the number of non-cash benefits received by any amount since income or most recent annual evaluation: **8 Points:** 30%+ **5 Points:** 20%+ **2 Points:** 10%+
7. Projected Households Served	8	Total number of households served during the last complete project performance period as a percentage of the total number of households proposed to be served during that period: **8 Points:** At or above 90%

		5 Points: Between 85% and 89%
		2 Points: Between 80% and 84%
8. Bed Utilization Rate	8	Total number of beds occupied during the last complete project performance period, averaged over four quarters, as a percentage of the total number of beds proposed to be occupied during that period: **8 Points:** At or above 95% **5 Points:** Between 90% and 94% **2 Points:** Between 85% and 89%
9. HMIS Data Quality	10	HMIS data quality as reported on the project's most recent Annual Performance Report (APR), OR project is a DV services provider: **10 Points:** 95%+ OR project is a DV services provider **5 Points:** 90%+ **2 Points:** 85%+
10. Cost Effectiveness	4	Cost effectiveness is a function of how much the project costs per positive outcome. "Positive outcomes" are defined here as participants who exited to or remained in the project during/at the end of its last complete performance period. Each project's cost effectiveness value (CEV) is equal to (Total CoC Program Funds Spent - Administrative Costs Budget Line) ÷ (Total Participants Exited to/Maintained Permanent Housing). **4 Points:** CEV <= $8,500 **3 Points:** CEV <= $9,000 **1 Point:** CEV <= $9,500

3.   Project Type Specific Scoring

Each project is scored using one and only one of the following elements according to its project type or, if the project primarily serves people fleeing domestic violence, using the Domestic Violence scoring element.

Scoring Element	Total Points	Points Breakdown
11a. Domestic Violence	8	Percentage of participant households whose safety improved during the last complete project performance period. To receive points under this element, projects must assess participant safety at exit and submit evidence or an attestation thereof as part of their response to the FY 2022 CoC Program RFP. Projects are encouraged to consult with the Louisiana Coalition Against Domestic Violence (LCADV) to determine the most appropriate way to conduct this assessment **8 Points:** 90%+ **5 Points:** 85%+ **2 Points:** 80%+
11b. Permanent Supportive Housing	8	Percentage of participant households who secured, made progress toward securing, or were barred from securing SSI/SSDI during the last complete project performance period. To receive points under this element, projects must assess what percentage of participant households served during the specified period met any of the following criteria and submit evidence or an attestation thereof as part of their response to the FY 2022 CoC Program RFP: ● Household is receiving income from SSI/SSDI; ● Household is actively being served by a SOAR-trained case manager; ● Household is not eligible to receive SSI/SSDI. (*Note:* this does not include households that have been denied SSI/SSDI due to curable deficiencies in their application.) **8 Points:** <= 5% **5 Points:** <= 10% **2 Points:** <= 15%
11c. Rapid Re-Housing	8	Average days between participant entry and participant exit during the last complete project performance period. **8 Points:** <= 270 days **6 Points:** <= 300 days **4 Points:** <= 360 days

		2 Points: <= 390 days
11d. TH-RRH Joint Component	8	Project has written policies and procedures for delivering all services outlined in its project application, including clear distinctions between its transitional housing and rapid re-housing components and a process for moving between them. To receive points under this element, projects must submit their applicable policies and procedures as part of their response to the FY 2022 CoC Program RFP. **8 Points:** project policies and procedures includes all specified elements **4 Points:** project policies and procedures includes some but not all specified elements
11e. Transitional Housing	8	Average days between participant entry and participant exit during the last complete project performance period. **8 Points:** <= 180 days **6 Points:** <= 360 days **4 Points:** <= 540 days **2 Points:** <= 720 days
11f. Supportive Services Only	8	Project has written policies and procedures for delivering all services outlined in its project application and, as applicable, in the most recent version of the LA BOSCOC Coordinated Entry Policies and Procedures. To receive points under this element, projects must submit their applicable policies and procedures as part of their response to the FY 2022 CoC Program RFP. **8 Points:** project policies and procedures includes all specified elements **4 Points:** project policies and procedures includes some but not all specified elements

4. CoC Participation and Compliance

Scoring Element	Total Points	Points Breakdown
12. Funds Utilization	6	Percentage of grant funds spent as compared to the total amount of grant funds awarded during the last complete project performance period. **6 Points:** 95%+ **4 Points:** 90%+ **2 Point:** 85%+
13. APR Timeliness	4	**4 Points:** project submitted its APR to the LA BOSCOC for review within 60 days of the last complete project performance period's end date AND project submitted its APR to HUD within 90 days of the last complete project performance period's end date **2 Points:** project submitted its APR to HUD within 90 days of the last complete project performance period's end date
14. Funding Draw Timeliness	2	To receive points under this element, projects must submit evidence or an attestation that satisfies the scoring element criterion. **2 Points:** funds were drawn at least quarterly from LOCCS during the last complete project performance period
15. Monitoring	4	**4 Points:** project has no Findings outstanding from its calendar year 2022 LA BOSCOC monitoring, OR project has not yet been monitored in calendar year 2022
16. Financial Stability	4	To receive points under this element, projects must submit evidence or an attestation that satisfies the scoring element criterion. **4 Points:** project's organization had no issues or concerns during its most recently completed financial audit, OR project did not meet the single audit requirement threshold

5.   Bonus Points

Scoring Element	Total Points	Points Breakdown
a. Rural Service Area	4	For the purposes of this scoring element, all parishes are considered rural except Calcasieu, East Baton Rouge, and Houma. **4 Points:** 100% of project's beds are located in rural parishes **2 Points:** 50%+ of project's beds are located in rural parishes
b. Domestic Violence	4	**4 Points:** 100% of project's beds are dedicated to victims of domestic violence
c. Staff Sustainability	4	To receive points under this element, projects must submit evidence or an attestation that satisfies the scoring element criteria. For the purposes of this scoring element, "all staff" refers to all staff whose costs are paid for in any portion by the project. Projects receive **2 points** if all staff are paid at least $15/hour. Projects receive **1 point** if all staff either receive health insurance through their employer or receive payments intended to defray the cost of purchasing health insurance. Projects receive **1 point** if all staff receive at least 120 hours of paid leave per year (combined personal leave and sick leave excluding holidays) prorated to each staff person's Full Time Equivalents (FTEs).
d. Equity	4	To receive points under this element, projects must submit evidence or an attestation that satisfies the scoring element criteria. To qualify, the actions below must have been taken within the last three years. Projects receive **1 point** if they assessed whether black, indigenous, and other people of color (BIPOC) face barriers to equitably accessing or receiving services in their project. Projects receive **1 point** if they have addressed or have made a

		written commitment to addressing BIPOC barriers identified above, OR no barriers were identified in the assessment above. Projects receive **1 point** if they assessed whether lesbian, gay, bisexual, trans, queer, and other people whose genders or sexualities are heteronormative (LGBTQ+) people face barriers to equitably accessing or receiving services in their project. Projects receive **1 point** if they have addressed or have made a written commitment to addressing LGBTQ+ barriers identified above, OR no barriers were identified in the assessment above.

LA BOSCOC - Project Scoring and Ranking - CoC Program Local competition - FY 2022 - Project Ranking

All projects ranked are accepted

Tier 1						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
1	Start Corporation	Starting Point	PSH	Renewal	98.00%	$187,523	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
2	Start Corporation	Starting Over	PSH	Renewal	94.00%	$165,273	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
3	Start Corporation	START BOS PSH 1	PSH	Renewal	92.00%	$644,569	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
4	HIV/AIDS Alliance for Region Two	HAART Hope and Healing	PSH	Renewal	89.00%	$237,364	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
5	HIV/AIDS Alliance for Region Two	Homes from the HAART	PSH	Renewal	84.00%	$112,202	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
6	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Myriam's House	PSH	Renewal	84.00%	$122,467	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
7	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP PH Project	PSH	Renewal	82.00%	$91,294	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
8	Start Corporation	Visions II	PSH	Renewal	82.00%	$202,149	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
9	Haven, the	DV RRH	RRH	Renewal	80.00%	$481,415	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
10	Volunteers of America - Greater Baton Rouge	VOA Home at Last	PSH	Renewal	77.00%	$116,018	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
11	Start Corporation	Safe Start	PSH	Renewal	76.00%	$121,613	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
12	Start Corporation	Fresh Start	PSH	Renewal	74.00%	$251,035	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
13	Options for Independence	Visions I	PSH	Renewal	68.00%	$146,626	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
14	Start Corporation	Partners in Health & Housing for Baton Rouge	PSH	Renewal	67.00%	$295,668	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
15	Terrebonne Parish Consolidated Government	TPCG Rapid Re-Housing Project	RRH	Renewal	66.00%	$152,868	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
16	Louisiana Housing Corporation	Options Villa	PSH	Renewal	63.00%	$210,053	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
17	Volunteers of America - Greater Baton Rouge	VOA Housing First	PSH	Renewal	62.00%	$220,997	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
18	Volunteers of America - Greater Baton Rouge	Rural Supportive Housing	PSH	Renewal	52.00%	$148,449	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
19	Louisiana Housing Corporation	Louisiana Housing Corporation-RRH	RRH	Renewal	42.00%	$909,959	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
20	O'Brien House	OBH Permanent Housing	PSH	Renewal	38.00%	$28,450	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
21	Youth Oasis	TH-RRH	TH-RRH	Renewal	34.00%	$205,849	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
22	START Corporation	Start Now	PSH	Renewal	166.67%	$942,576	Bracket 2 -- Renewal -- first year projects
23	LCADV	DV-RRH	RRH	Renewal	100.00%	$829,712	Bracket 2 -- Renewal -- first year projects
24	Easter Seals Louisiana	Rapid Re-Housing Baton Rouge	RRH	Renewal	66.67%	$436,530	Bracket 2 -- Renewal -- first year projects
25	Calcasieu Parish Police Jury	Regional Coordinated Entry	SSO-CES	Renewal	47.83%	$142,504	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
26	Louisiana Housing Corporation	Coordinated Entry	SSO-CES	Renewal	40.74%	$858,938	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
27	Family Violence Program of St. Bernard	DV Coordinated Entry Access Point	SSO-CES	Renewal	59.26%	$100,000	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
28	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Coordinated Assessment	SSO-CES	Renewal	66.67%	$137,654	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
29	Start Corporation	The Network	SSO	Renewal	81.48%	$81,506	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
30	Volunteers of America - Greater Baton Rouge	VOA Outreach	SSO	Renewal	33.33%	$64,626	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
31	Louisiana Housing Corporation	HMIS Expansion	HMIS	Renewal	58.33%	$393,770	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
32	Start Corporation	BOS PSH 1 Expansion	PSH	New	91.60%	$409,030	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
33	Start Corporation	Starting Over Expansion	PSH	New	86.90%	$143,000	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
34	Youth Oasis	TH-RRH Expansion	TH-RRH	New	84.06%	$354,657	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
35	Louisiana Housing Corporation	Coordinated Entry Expansion	SSO-CES	New	N/A	$206,250	Bracket 5 -- New General Funding -- SSO-CES HMIS
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$10,993,226	Bracket 6 -- Renewal -- LAPSH Project
		Tier 1 Funds Requested (95% of ARD for all renewals)				$21,145,820	

Tier 2						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$2,225,875	Bracket 6 -- Renewal -- LAPSH Project
		Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)				$2,225,875	

DV Bonus

Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
37	Louisiana Coalition Against Domestic Violence	Domestic Violence RRH	RRH	New	n/a	$537,728	Bracket 7 -- New DV Bonus -- LCADV RRH Project
		DV Bonus Funds Requested (10% of PPRN)				$537,728	

Planning Grant

Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
n/a	Louisiana Housing Corporation	CoC Planning Grant	Planning	New	n/a	$667,762	n/a -- Planning Grant
		Planning Grant (3% of FPRN)				$667,762	

CoC Funding Application Summary

Tier 1 Funds Requested (95% of ARD for all renewals)	$21,145,820	
Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)	$2,225,875	
DV Bonus Funds Requested (10% of PPRN)	$537,728	
Planning Grant (3% of FPRN)	$667,762	
TOTAL COC PROGRAM APPLICATIONS	**$24,577,185**	

Projects Rejected/Not Funded

Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
Not Ranked	Easter Seals	Permanent Supportive Housing Baton Rouge	PSH	New	65.10%	$1,460,250	N/A
Not Ranked	Heavens Care	Heavens Care PSH	PSH	New	n/a	$269,368	N/A

Scored Forms for One Project (1E-2a)

Attachment Coversheet

-Renewal Project Scoring Sheet with Actual Scored Project
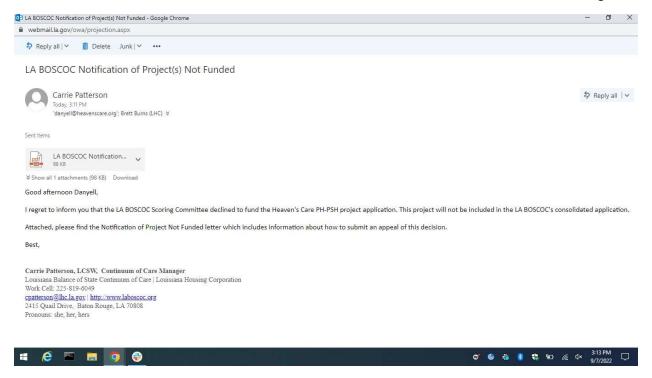
	Quest #	Max points/answer	Agency Name / Project Name	Start Corporation Visions II
Threshold Criteria	1	Y/N	Eligible Organization(s)	Y
	2	Y/N	Eligible Service Area	Y
	3	Y/N	Population Eligibility	Y
	4	Y/N	Eligible Activities	Y
	5	Y/N	Matching Requirement	Y
	6	Y/N	Coordinated Entry	Y
	7	Y/N	Housing First	Y
Design Project	1	4	Prioritized Target Populations	4
Project Outcomes	2	2	Intake to Leasing	0
	3	8	Exiting to/Maintaining Permanent Housing	8
	4	8	Exiting to Shelter/Streets/Unknown	8
	5	12	Increased Income at Exit	12
	6	8	Increased Non-Cash Benefits	8
	7	8	Projected Households Served	0
	8	8	Bed Utilization Rate	0
	9	10	HMIS Data Quality	10
	10	4	Cost Effectiveness	4
Project Specific	11a	8	Domestic Violence	■
	11b	8	Permanent Supportive Housing	0
	11c	8	Rapid Re-Housing	■
	11d	8	TH-RRH Joint Component	■
	11e	8	Transitional Housing	■
	11f	8	Supportive Services Only	■
CoC Participation & Capacity	12	6	Funds Utilization	6
	13	4	APR Timeliness	4
	14	2	Funding Draw Timeliness	2
	15	4	Monitoring	4
	16	4	Financial Stability	4
Bonus Points	a	4	Rural Service Area	0
	b	4	Domestic Violence	■
	c	4	Staff Sustainability	4
	d	4	Equity	4

	Start Corporation Visions II
TOTAL POINTS	82
POINTS POSSIBLE	100
FINAL SCORE	82.00%

Notification of Projects Rejected-Reduced (1E-5)

Attachment Coversheet

-Projects Rejected: Individual email and official letter (Pg 1)

LA BOSCOC Notification of Project(s) Not Funded - Google Chrome

🔒 webmail.la.gov/owa/projection.aspx

↩ Reply all | ∨   🗑 Delete   Junk | ∨   •••

LA BOSCOC Notification of Project(s) Not Funded

Carrie Patterson
Today, 3:11 PM
'danyell@heavenscare.org'; Brett Burns (LHC) ⌄

↩ Reply all | ∨

Sent Items

📄 LA BOSCOC Notification... ∨
98 KB

⌄ Show all 1 attachments (98 KB)   Download

Good afternoon Danyell,

I regret to inform you that the LA BOSCOC Scoring Committee declined to fund the Heaven's Care PH-PSH project application. This project will not be included in the LA BOSCOC's consolidated application.

Attached, please find the Notification of Project Not Funded letter which includes information about how to submit an appeal of this decision.

Best,

Carrie Patterson, LCSW, Continuum of Care Manager
Louisiana Balance of State Continuum of Care | Louisiana Housing Corporation
Work Cell: 225-819-6049
cpatterson@lhc.la.gov | http://www.laboscoc.org
2415 Quail Drive, Baton Rouge, LA 70808
Pronouns: she, her, hers

3:13 PM
9/7/2022

LOUISIANA
BOSCOC

September 7, 2022

Heavens Care
Danyell Henriques
13342 Crawford Road
Gonzales, LA 70737

Subject: Notification of project reduced or rejected for CoC Program Competition Funding Year 2022

Greetings,

I regret to inform you that the LA BOSCOC Scoring Committee has decided not to include the following project applications in the LA BOSCOC's consolidated application to the Funding Year 2022 Continuum of Care (CoC) Program Notice of Funding Opportunity (NOFO):

Project	Reason for Decision
Heaven's Care (PH-PSH)	Project did not meet threshold criteria

You can appeal this decision at your discretion via the following process:

Appeals are due by September 13 at 4 PM CST. Any appeals received after that time will be rejected.

Appeals should be submitted electronically to Carrie Patterson, Continuum of Care Manager, at cpatterson@lhc.la.gov. Applicants that cannot submit their appeals electronically may request a waiver by contacting Carrie Patterson, Continuum of Care Manager, at 225-819-6049.

Appeals must be based on information submitted by the application due date; no new or additional information will be considered. Omissions from the application cannot be appealed; it is each organization's responsibility to address each area identified as a factor in the funding decision.

Appeals will be submitted to the LA BOSCOC Board for consideration. The Board's decision on any appeal shall be final.

If you have any questions, please feel free to contact me at the information listed below.

Sincerely,

Carrie Patterson
Continuum of Care Manager
225-819-6049 | cpatterson@lhc.la.gov

LA BOSCOC Notification of Project(s) not funded - Google Chrome

webmail.la.gov/owa/projection.aspx

↩ Reply all | ∨   🗑 Delete   Junk | ∨   •••

LA BOSCOC Notification of Project(s) not funded

Carrie Patterson
Today, 3:37 PM
Eric Odom <eodom@laeasterseals.com>; Brett Burns (LHC) ≫

↩ Reply all | ∨

Sent Items

📄 LA BOSCOC Notification...
99 KB

≫ Show all 1 attachments (99 KB)   Download

Good afternoon Eric,

I regret to inform you that the LA BOSCOC Scoring Committee declined to fund the Easterseals' Permenant Supportice Housing - Baton Rouge project application. This project will not be included in the LA BOSCOC's FY22 consolidated application.

Attached, please find the Notification of Project Not Funded letter which includes information about how to submit an appeal of this decision.

Best,

Carrie Patterson, LCSW, Continuum of Care Manager
Louisiana Balance of State Continuum of Care | Louisiana Housing Corporation
Work Cell: 225-819-6049
cpatterson@lhc.la.gov | http://www.laboscoc.org
2415 Quail Drive, Baton Rouge, LA 70808
Pronouns: she, her, hers

3:37 PM
9/7/2022

LOUISIANA
BOSCOC

September 7, 2022

Easterseals Louisiana
Eric Odom, Vice President
935 Gravier Street Suite 720
New Orleans, LA 70112

Subject: Notification of Project Reduced or Rejected for CoC Program Competition Funding Year 2022

Greetings,

I regret to inform you that the LA BOSCOC Scoring Committee has decided not to include the following project applications in the LA BOSCOC's consolidated application to the Funding Year 2022 Continuum of Care (CoC) Program Notice of funding Opportunity (NOFO):

Project	Reason for Decision
Permanent Supportive Housing - Baton Rouge	Project did not score high enough to be considered for funding

You can appeal this decision at your discretion via the following process:

Appeals are due by September 13 at 4 PM CST. Any appeals received after that time will be rejected.

Appeals should be submitted electronically to Carrie Patterson, Continuum of Care Manager, at cpatterson@lhc.la.gov. Applicants that cannot submit their appeals electronically may request a waiver by contacting Carrie Patterson, Continuum of Care Manager, at 225-819-6049.

Appeals must be based on information submitted by the application due date; no new or additional information will be considered. Omissions from the application cannot be appealed; it is each organization's responsibility to address each area identified as a factor in the funding decision.

Appeals will be submitted to the LA BOSCOC Board for consideration. The Board's decision on any appeal shall be final.

If you have any questions, please feel free to contact me at the information listed below.

Sincerely,

Carrie Patterson
Continuum of Care Manager
225-819-6049 | cpatterson@lhc.la.gov

Notification of Projects Accepted (1E-5a)

Attachment Coversheet

● **Email Notification to project applicants that includes project information (Pg. 1)**

- **Project Information Attached to Email (Pg. 2)**
- **Publically Posted Project Information with all projects, project scores, and funding amounts**

● **CoC website posting and CoC listserv announcement that project list of accepted projects and CoC Planning grant was available (Pg. 4)**

● **Project list that was attached to email and posted on website (Pg. 7)**

9/15/22, 4:27 PM   LA BOSCOC FY22 CoC Program Local Competition: Funded Pro... - Carrie Patterson

LA BOSCOC FY22 CoC Program Local Competition: Funded Projects Final Ranking and e-snaps reminder

Carrie Patterson

Thu 9/15/2022 4:22 PM

To:Casey Guidry <casey.guidry@startcorp.org>; Laura Martinez <laura.martinez@startcorp.org>; 'Michael Acaldo'
   <macaldo@svdpbr.com>; 'Sharon St. Romain' <sstromain@svdpbr.com>; Suzanne Metoyer <suzanne.metoyer@ohcc.org>; 'Thomas
   Pate' <thomas.pate@ohcc.org>; Eboness Black <eblack@voagbr.org>; Marsha Bryant <mbryant@voagbr.org>; 'Emily Tilley'
   <etilley@obrienhouse.org>; Kelli Cunningham <kcunningham@tpcg.org>; Antoine Foret <aforet@tpcg.org>; Gail Gowland
   <gailg@fvpsb.org>; 'Mariah Wineski' <mariah.wineski@lcadv.org>; Tekoah Boatner <tboatner@youthoasis.org>; julie havenhelps.org
   <julie@havenhelps.org>; Sheri Turner <sturner@op4in.com>; Winona Connor (LHC) <wconnor@lhc.la.gov>; Vonetta Lacy
   <VLacy@lhc.la.gov>; Kelly Hogan <khogan@lhc.la.gov>; Eric Odom <eodom@laeasterseals.com>; Tarek Polite
   <tpolite@calcasieuparish.gov>; 'Kimberly M. Bilbo' <kbilbo@calcasieuparish.gov>;

Cc:Brett Burns (LHC) <BBurns@lhc.la.gov>; Clay Boykin <CBoykin@lhc.la.gov>; Victoria Johnson <VJohnson@lhc.la.gov>; 'Melany
   Mondello' <MMondello@tacinc.org>;

📎 1 attachments (106 KB)

LA BOSCOC – Project Scoring and Ranking – CoC Program Local Competition – FY 2022 – Project Ranking.pdf;

Good afternoon Project Applicants!

Congratulations! Your project applications have been approved for inclusion in the LA BOSCOC's FY2022 CoC Program Consolidated Application to HUD. I have attached the CoC approved Project Scoring and Ranking Sheet for your perusal. This information can also be found on the LA BOSCOC website: https://laboscoc.org/fy22-coc-program-competition

As stated in your Conditional Funding Letters: **All New and Renewal Project Applications must be submitted to LA BOSCOC (LA-509) in e-snaps by September 18th at 4p.**

If you have been notified by CoC Staff that your project application has required technical corrections, please submit your application in e-snaps _after_ you have completed those technical corrections.

If you have not been notifed that you have required technical corrections, please proceed with submitting your application in e-snaps.

Please don't hesistate to reach out with any questions: cpatterson@lhc.la.gov

Thank you!

Carrie Patterson, LCSW, Continuum of Care Manager
Louisiana Balance of State Continuum of Care | Louisiana Housing Corporation
Work Cell: 225-819-6049
cpatterson@lhc.la.gov | http://www.laboscoc.org
2415 Quail Drive, Baton Rouge, LA 70808
Pronouns: she, her, hers

All projects ranked are accepted

Tier 1						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
1	Start Corporation	Starting Point	PSH	Renewal	98.00%	$187,523	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
2	Start Corporation	Starting Over	PSH	Renewal	94.00%	$165,273	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
3	Start Corporation	START BOS PSH 1	PSH	Renewal	92.00%	$644,569	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
4	HIV/AIDS Alliance for Region Two	HAART Hope and Healing	PSH	Renewal	89.00%	$237,364	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
5	HIV/AIDS Alliance for Region Two	Homes from the HAART	PSH	Renewal	84.00%	$112,202	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
6	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Myriam's House	PSH	Renewal	84.00%	$122,467	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
7	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP PH Project	PSH	Renewal	82.00%	$91,294	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
8	Start Corporation	Visions II	PSH	Renewal	82.00%	$202,149	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
9	Haven, the	DV RRH	RRH	Renewal	80.00%	$481,415	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
10	Volunteers of America - Greater Baton Rouge	VOA Home at Last	PSH	Renewal	77.00%	$116,018	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
11	Start Corporation	Safe Start	PSH	Renewal	76.00%	$121,613	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
12	Start Corporation	Fresh Start	PSH	Renewal	74.00%	$251,035	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
13	Options for Independence	Visions I	PSH	Renewal	68.00%	$146,626	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
14	Start Corporation	Partners in Health & Housing for Baton Rouge	PSH	Renewal	67.00%	$295,668	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
15	Terrebonne Parish Consolidated Government	TPCG Rapid Re-Housing Project	RRH	Renewal	66.00%	$152,868	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
16	Louisiana Housing Corporation	Options Villa	PSH	Renewal	63.00%	$210,053	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
17	Volunteers of America - Greater Baton Rouge	VOA Housing First	PSH	Renewal	62.00%	$220,997	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
18	Volunteers of America - Greater Baton Rouge	Rural Supportive Housing	PSH	Renewal	52.00%	$148,449	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
19	Louisiana Housing Corporation	Louisiana Housing Corporation-RRH	RRH	Renewal	42.00%	$909,959	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
20	O'Brien House	OBH Permanent Housing	PSH	Renewal	38.00%	$28,450	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
21	Youth Oasis	TH-RRH	TH-RRH	Renewal	34.00%	$205,849	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
22	START Corporation	Start Now	PSH	Renewal	166.67%	$942,576	Bracket 2 -- Renewal -- first year projects
23	LCADV	DV-RRH	RRH	Renewal	100.00%	$829,712	Bracket 2 -- Renewal -- first year projects
24	Easter Seals Louisiana	Rapid Re-Housing Baton Rouge	RRH	Renewal	66.67%	$436,530	Bracket 2 -- Renewal -- first year projects
25	Calcasieu Parish Police Jury	Regional Coordinated Entry	SSO-CES	Renewal	47.83%	$142,504	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
26	Louisiana Housing Corporation	Coordinated Entry	SSO-CES	Renewal	40.74%	$858,938	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
27	Family Violence Program of St. Bernard	DV Coordinated Entry Access Point	SSO-CES	Renewal	59.26%	$100,000	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
28	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Coordinated Assessment	SSO-CES	Renewal	66.67%	$137,654	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
29	Start Corporation	The Network	SSO	Renewal	81.48%	$81,506	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
30	Volunteers of America - Greater Baton Rouge	VOA Outreach	SSO	Renewal	33.33%	$64,626	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
31	Louisiana Housing Corporation	HMIS Expansion	HMIS	Renewal	58.33%	$393,770	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
32	Start Corporation	BOS PSH 1 Expansion	PSH	New	91.60%	$409,030	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
33	Start Corporation	Starting Over Expansion	PSH	New	86.90%	$143,000	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
34	Youth Oasis	TH-RRH Expansion	TH-RRH	New	84.06%	$354,657	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
35	Louisiana Housing Corporation	Coordinated Entry Expansion	SSO-CES	New	N/A	$206,250	Bracket 5 -- New General Funding -- SSO-CES HMIS
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$10,993,226	Bracket 6 -- Renewal -- LAPSH Project
		Tier 1 Funds Requested (95% of ARD for all renewals)				**$21,145,820**	

Tier 2						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$2,225,875	Bracket 6 -- Renewal -- LAPSH Project
		Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)				**$2,225,875**	

DV Bonus

Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
37	Louisiana Coalition Against Domestic Violence	Domestic Violence RRH	RRH	New	n/a	$537,728	Bracket 7 -- New DV Bonus -- LCADV RRH Project
		DV Bonus Funds Requested (10% of PPRN)				$537,728	

Planning Grant

Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
n/a	Louisiana Housing Corporation	CoC Planning Grant	Planning	New	n/a	$667,762	n/a -- Planning Grant
		Planning Grant (3% of FPRN)				$667,762	

CoC Funding Application Summary

Tier 1 Funds Requested (95% of ARD for all renewals)	$21,145,820	
Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)	$2,225,875	
DV Bonus Funds Requested (10% of PPRN)	$537,728	
Planning Grant (3% of FPRN)	$667,762	
TOTAL COC PROGRAM APPLICATIONS	**$24,577,185**	

Projects Rejected/Not Funded

Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
Not Ranked	Easter Seals	Permanent Supportive Housing Baton Rouge	PSH	New	65.10%	$1,460,250	N/A
Not Ranked	Heavens Care	Heavens Care PSH	PSH	New	n/a	$269,368	N/A

==Webpage== posting/ Mail Chimp Email Notification of complete project list to public 9/15/22

The LA BOSCOC has selected and ranked all new and renewal projects to be included in its consolidated application to HUD's FY2022 CoC Program Competition. The LA BOSCOC's FY2022 CoC Program final Project Ranking can be found here: https://laboscoc.org/fy22-coc-program-competition

The Scoring Committee met on Tuesday, September 6th, to score, rank, and select projects. This process was conducted according to the Project Rating, Ranking, and Selection process as approved by the Board.

The Board voted on Thursday, September 15th, to unanimously approve the Scoring Committee's project ranking and selection as written.

New Project Funding.

Five projects were submitted for consideration. Three were selected. They were (in alphabetical order):

START Corporation's "BOS PSH 1 expansion" project, which will expand an existing project to provide long-term rental assistance and supportive services via the Permanent Supportive Housing (PSH) project type to

Five projects were submitted for consideration. Three were selected. They were (in alphabetical order):

START Corporation's "BOS PSH 1 expansion" project, which will expand an existing project to provide long-term rental assistance and supportive services via the Permanent Supportive Housing (PSH) project type to additional households in the Baton Rouge Region.

START Corporation's "Starting Over expansion" project, which will expand an existing project to provide long-term rental assistance and supportive services via the Permanent Supportive Housing (PSH) project type to additional households in the Houma Region.

Youth Oasis' "TH-RRH expansion" project, which will expand an existing project to provide Transitional Housing and short to medium-term rental assistance and supportive services via the Transitional Housing - Rapid Rehousing (TH-RRH) joint component project type to youth households in several underserved parishes of the Baton Rouge and Houma Regions.

On behalf of the Scoring Committee, CoC staff would like to extend our deep appreciation to ALL project applicants. The CoC Program project application process can be challenging, and we are profoundly grateful to have so many organizations in our CoC with the interest, investment, and dedication to ending homelessness required to engage that process.

Renewal Project Funding

All projects that requested renewal funding were selected to receive full funding for those requests.

Project Feedback

As in previous years and once time allows, CoC staff will be available to provide interested applicants with a comprehensive breakdown and assessment of each of their new and renewal projects' scores.

CoC staff hope that applicants whose new projects were not selected for inclusion will use these assessments to refine their project applications for resubmission in future years.

LOUISIANA BOSCOC

HOME   NEWS   EVENTS   MEMBERS   DATA   HOUSING AND SERVICES

Funding Year 2022 Continuum of Care Program Local Competition

HUD released the Funding Year (FY) 2022 Continuum of Care (CoC) Program Notice of Funding Opportunity (NOFO) in August 2022.

The LA BOSCOC's CoC Program local competition opened August 10, 2022.

FOR ALL PROJECTS

Request for Proposals - information about how to apply for new/renewal projects

FOR NEW PROJECTS

New Project Scoring Tool - tool used by the LA BOSCOC Scoring Committee to score and rank new projects; *includes detailed instructions for receiving*

FOR RENEWAL PROJECTS

Existing Projects Eligible for Renewal - list of all existing projects eligible to apply for renewal funding

All projects ranked are accepted

Tier 1						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
1	Start Corporation	Starting Point	PSH	Renewal	98.00%	$187,523	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
2	Start Corporation	Starting Over	PSH	Renewal	94.00%	$165,273	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
3	Start Corporation	START BOS PSH 1	PSH	Renewal	92.00%	$644,569	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
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5	HIV/AIDS Alliance for Region Two	Homes from the HAART	PSH	Renewal	84.00%	$112,202	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
6	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Myriam's House	PSH	Renewal	84.00%	$122,467	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
7	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP PH Project	PSH	Renewal	82.00%	$91,294	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
8	Start Corporation	Visions II	PSH	Renewal	82.00%	$202,149	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
9	Haven, the	DV RRH	RRH	Renewal	80.00%	$481,415	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
10	Volunteers of America - Greater Baton Rouge	VOA Home at Last	PSH	Renewal	77.00%	$116,018	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
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13	Options for Independence	Visions I	PSH	Renewal	68.00%	$146,626	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
14	Start Corporation	Partners in Health & Housing for Baton Rouge	PSH	Renewal	67.00%	$295,668	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
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17	Volunteers of America - Greater Baton Rouge	VOA Housing First	PSH	Renewal	62.00%	$220,997	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
18	Volunteers of America - Greater Baton Rouge	Rural Supportive Housing	PSH	Renewal	52.00%	$148,449	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
19	Louisiana Housing Corporation	Louisiana Housing Corporation-RRH	RRH	Renewal	42.00%	$909,959	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
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21	Youth Oasis	TH-RRH	TH-RRH	Renewal	34.00%	$205,849	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
22	START Corporation	Start Now	PSH	Renewal	166.67%	$942,576	Bracket 2 -- Renewal -- first year projects
23	LCADV	DV-RRH	RRH	Renewal	100.00%	$829,712	Bracket 2 -- Renewal -- first year projects
24	Easter Seals Louisiana	Rapid Re-Housing Baton Rouge	RRH	Renewal	66.67%	$436,530	Bracket 2 -- Renewal -- first year projects
25	Calcasieu Parish Police Jury	Regional Coordinated Entry	SSO-CES	Renewal	47.83%	$142,504	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
26	Louisiana Housing Corporation	Coordinated Entry	SSO-CES	Renewal	40.74%	$858,938	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
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28	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Coordinated Assessment	SSO-CES	Renewal	66.67%	$137,654	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
29	Start Corporation	The Network	SSO	Renewal	81.48%	$81,506	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
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31	Louisiana Housing Corporation	HMIS Expansion	HMIS	Renewal	58.33%	$393,770	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
32	Start Corporation	BOS PSH 1 Expansion	PSH	New	91.60%	$409,030	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
33	Start Corporation	Starting Over Expansion	PSH	New	86.90%	$143,000	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
34	Youth Oasis	TH-RRH Expansion	TH-RRH	New	84.06%	$354,657	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
35	Louisiana Housing Corporation	Coordinated Entry Expansion	SSO-CES	New	N/A	$206,250	Bracket 5 -- New General Funding -- SSO-CES HMIS
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$10,993,226	Bracket 6 -- Renewal -- LAPSH Project
		Tier 1 Funds Requested (95% of ARD for all renewals)				$21,145,820	

Tier 2						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$2,225,875	Bracket 6 -- Renewal -- LAPSH Project
		Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)				$2,225,875	

DV Bonus						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
37	Louisiana Coalition Against Domestic Violence	Domestic Violence RRH	RRH	New	n/a	$537,728	Bracket 7 -- New DV Bonus -- LCADV RRH Project
		DV Bonus Funds Requested (10% of PPRN)				$537,728	

Planning Grant						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
n/a	Louisiana Housing Corporation	CoC Planning Grant	Planning	New	n/a	$667,762	n/a -- Planning Grant
		Planning Grant (3% of FPRN)				$667,762	

CoC Funding Application Summary		
Tier 1 Funds Requested (95% of ARD for all renewals)	$21,145,820	
Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)	$2,225,875	
DV Bonus Funds Requested (10% of PPRN)	$537,728	
Planning Grant (3% of FPRN)	$667,762	
TOTAL COC PROGRAM APPLICATIONS	$24,577,185	

Projects Rejected/Not Funded						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
Not Ranked	Easter Seals	Permanent Supportive Housing Baton Rouge	PSH	New	65.10%	$1,460,250	N/A
Not Ranked	Heavens Care	Heavens Care PSH	PSH	New	n/a	$269,368	N/A

Final Project Scores for All Projects (1E-5b)

Attachment Coversheet

LA BOSCOC - Project Scoring and Ranking - CoC Program Local competition - FY 2022 - Project Ranking

All projects ranked are accepted

Tier 1						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
1	Start Corporation	Starting Point	PSH	Renewal	98.00%	$187,523	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
2	Start Corporation	Starting Over	PSH	Renewal	94.00%	$165,273	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
3	Start Corporation	START BOS PSH 1	PSH	Renewal	92.00%	$644,569	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
4	HIV/AIDS Alliance for Region Two	HAART Hope and Healing	PSH	Renewal	89.00%	$237,364	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
5	HIV/AIDS Alliance for Region Two	Homes from the HAART	PSH	Renewal	84.00%	$112,202	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
6	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Myriam's House	PSH	Renewal	84.00%	$122,467	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
7	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP PH Project	PSH	Renewal	82.00%	$91,294	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
8	Start Corporation	Visions II	PSH	Renewal	82.00%	$202,149	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
9	Haven, the	DV RRH	RRH	Renewal	80.00%	$481,415	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
10	Volunteers of America - Greater Baton Rouge	VOA Home at Last	PSH	Renewal	77.00%	$116,018	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
11	Start Corporation	Safe Start	PSH	Renewal	76.00%	$121,613	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
12	Start Corporation	Fresh Start	PSH	Renewal	74.00%	$251,035	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
13	Options for Independence	Visions I	PSH	Renewal	68.00%	$146,626	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
14	Start Corporation	Partners in Health & Housing for Baton Rouge	PSH	Renewal	67.00%	$295,668	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
15	Terrebonne Parish Consolidated Government	TPCG Rapid Re-Housing Project	RRH	Renewal	66.00%	$152,868	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
16	Louisiana Housing Corporation	Options Villa	PSH	Renewal	63.00%	$210,053	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
17	Volunteers of America - Greater Baton Rouge	VOA Housing First	PSH	Renewal	62.00%	$220,997	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
18	Volunteers of America - Greater Baton Rouge	Rural Supportive Housing	PSH	Renewal	52.00%	$148,449	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
19	Louisiana Housing Corporation	Louisiana Housing Corporation-RRH	RRH	Renewal	42.00%	$909,959	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
20	O'Brien House	OBH Permanent Housing	PSH	Renewal	38.00%	$28,450	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
21	Youth Oasis	TH-RRH	TH-RRH	Renewal	34.00%	$205,849	Bracket 1 -- Renewal -- PSH RRH TH TH-RRH projects in second or later year
22	START Corporation	Start Now	PSH	Renewal	166.67%	$942,576	Bracket 2 -- Renewal -- first year projects
23	LCADV	DV-RRH	RRH	Renewal	100.00%	$829,712	Bracket 2 -- Renewal -- first year projects
24	Easter Seals Louisiana	Rapid Re-Housing Baton Rouge	RRH	Renewal	66.67%	$436,530	Bracket 2 -- Renewal -- first year projects
25	Calcasieu Parish Police Jury	Regional Coordinated Entry	SSO-CES	Renewal	47.83%	$142,504	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
26	Louisiana Housing Corporation	Coordinated Entry	SSO-CES	Renewal	40.74%	$858,938	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
27	Family Violence Program of St. Bernard	DV Coordinated Entry Access Point	SSO-CES	Renewal	59.26%	$100,000	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
28	Particular Council of St. Vincent de Paul of Baton Rouge	SVDP Coordinated Assessment	SSO-CES	Renewal	66.67%	$137,654	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
29	Start Corporation	The Network	SSO	Renewal	81.48%	$81,506	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
30	Volunteers of America - Greater Baton Rouge	VOA Outreach	SSO	Renewal	33.33%	$64,626	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
31	Louisiana Housing Corporation	HMIS Expansion	HMIS	Renewal	58.33%	$393,770	Bracket 3 -- Renewal -- SSO SSO-CES HMIS
32	Start Corporation	BOS PSH 1 Expansion	PSH	New	91.60%	$409,030	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
33	Start Corporation	Starting Over Expansion	PSH	New	86.90%	$143,000	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
34	Youth Oasis	TH-RRH Expansion	TH-RRH	New	84.06%	$354,657	Bracket 4 -- New General Funding -- PSH RRH TH-RRH
35	Louisiana Housing Corporation	Coordinated Entry Expansion	SSO-CES	New	N/A	$206,250	Bracket 5 -- New General Funding -- SSO-CES HMIS
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$10,993,226	Bracket 6 -- Renewal -- LAPSH Project
		Tier 1 Funds Requested (95% of ARD for all renewals)				$21,145,820	

Tier 2						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
36	Louisiana Housing Corporation	Louisiana State Permanent Supportive Housing Initiative	PSH	Renewal	73.00%	$2,225,875	Bracket 6 -- Renewal -- LAPSH Project
		Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)				$2,225,875	

DV Bonus						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
37	Louisiana Coalition Against Domestic Violence	Domestic Violence RRH	RRH	New	n/a	$537,728	Bracket 7 -- New DV Bonus -- LCADV RRH Project
		DV Bonus Funds Requested (10% of PPRN)				$537,728	

Planning Grant						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
n/a	Louisiana Housing Corporation	CoC Planning Grant	Planning	New	n/a	$667,762	n/a -- Planning Grant
		Planning Grant (3% of FPRN)				$667,762	

CoC Funding Application Summary		
Tier 1 Funds Requested (95% of ARD for all renewals)	$21,145,820	
Tier 2 Funds Requested (5% of ARD + 100% of CoC Bonus)	$2,225,875	
DV Bonus Funds Requested (10% of PPRN)	$537,728	
Planning Grant (3% of FPRN)	$667,762	
TOTAL COC PROGRAM APPLICATIONS	$24,577,185	

Projects Rejected/Not Funded						
Rank	Agency	Project	Project Type	New/Renewal	Score	FY 2022 Requested Funds	Prioritization Bracket
Not Ranked	Easter Seals	Permanent Supportive Housing Baton Rouge	PSH	New	65.10%	$1,460,250	N/A
Not Ranked	Heavens Care	Heavens Care PSH	PSH	New	n/a	$269,368	N/A

Healthcare Formal Agreements (3A-2a)

Attachment Coversheet

-Healthcare Formal Written Agreement for New Project Application: Starting Over Expansion
-Healthcare Formal Written Agreement for New Project Application: BOS PSH 1 Expansion

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"CREATING OPPORTUNITIES"

MEMORANDUM OF UNDERSTANDING FOR IN-KIND SERVICES

This Memorandum of Understanding (MOU) is entered into by and between

Start Corporation (Recipient)

and

Start Community Health Center, a Federally Qualified Health Center (Service Provider)

I.   PURPOSE AND SCOPE

The purpose of this MOU is to clearly identify in-kind service leverage for the below named project as it relates to the implementation of the US Department of Housing and Urban Development (HUD) Continuum of Care (COC Program).   The purpose of the COC Programs is to provide housing and supportive services to people experiencing homelessness. Both Recipient and Start Service Provider will ensure that program activities are conducted in compliance with all applicable federal laws, rules and regulations, including Civil Rights and the OMB.

II.   UTILIZING HEALTHCARE RESOURCES IN HOUSING

People experiencing homelessness often have serious and complex health conditions that make it difficult to obtain and maintain stable housing. These health issues include chronic health conditions like diabetes, substance use disorders, mental health disorders, and infectious diseases like Hepatitis and HIV/AIDS. The California Policy Lab found that people living unsheltered were four times more likely than sheltered people to report that physical health conditions contributed to housing loss, mental health conditions at 3 times the rate, and substance use at 8 times the rate. In the same study, people experiencing homelessness reported worsening health conditions the longer they were homeless.

Both programs have long been involved in partnering to successfully implement COC Programs that improve the lives of people experiencing homelessness, including referrals, resource sharing, community crisis intervention and participation in community meetings.   Service Provider has collaborated with Recipient to increase participant housing stability by providing Primary Care, Mental Health, Substance Abuse, Dental, Maternal Health, Child Health, and Hepatitis C treatment. Service Provider is certified as a Patient Centered Medical Home and coordinates care of patients for optimal health outcomes. One of the greatest benefits of the partnership is the continuum of primary care services coordinated with comprehensive behavioral health services, provided in one location, which will help to prevent fragmentation of services and ensure COC Program participants remain engaged in treatment and aftercare longer term, contributing to long-term housing stability. Service Provider will assist COC Program participants to increase access to comprehensive, culturally competent, quality preventative and primary healthcare to improve the overall health of people experiencing homelessness. This partnership is critical as it will expand access to holistic care to persons living in areas where the most vulnerable experience transportation, economic, social, psychological, and education barriers to healthcare.

START
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START CORPORATION
📞 985-333-2020 📠 985-851-0162
235 Civic Center Blvd., Houma, LA 70360

III. COMMITMENT TO PROVIDE SERVICES

Start Community Health Center commits to provide the services described in this MOU for households served by the project below for the period of the grant.

Project Sponsor:	Start Corporation
Project Name:	Starting Over expansion
Project Number:	198289
Expected Award Budget:	$178,750
Total Match Required:	$35,750
Project Operating Year:	7/1/2023-6/30/2024

IV. ROLES AND RESPONSIBILITIES OF PARTNERS

The roles and responsibilities are hereby agreed to by and between the partners as follows:

Start Corporation will be responsible for financial and program administration and oversight, including the preparation and submission of requisite program and financial reports, insurance of confidentiality, maintenance of records, and managing, dispersing and accounting for all federal funds received for the COC Program. Start will oversee operations of the COC Program and work, in collaboration with its partners, to provide safe and appropriate services to people experiencing homelessness. Start will provide Case Management and Rental Assistance directly with grant funds. Eligibility for the project will comply with HUD program and fair housing requirements, and will not be restricted by the eligibility requirements of the services listed in "Type of Service" below. Referrals to existing in-house assessments and Evidence-Based Practice Programs for those participants that qualify will be:

1. Primary Care visits;
2. Behavioral Health Assessments;
3. Medication Management;
4. PrEP;
5. Hepatitis C treatment;
6. Assertive Community Treatment (ACT);
7. Medication Assisted Treatment (MAT)

Start Community Health Center will be responsible for collaborating with Start Corporation regarding eligible COC Program clients and for providing the services listed below.

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Referrals to existing in-house healthcare for qualifying participants that qualify will be:

Estimated # of Clients	Type of Service	Value of Service	# Visits Per Year	Total Annual Value
8	Primary Care Visits	$152.00	2	$2,432
10	Behavioral Health Assessments	$152.00	2	$3,040
2	Medication Management Visits	$152.00	2	$608
1	PrEP	$900	12	$10,800
1	Hepatitis C Treatment	$8,000	3	$24,000
0	ACT	$1,100/monthly	12	$0
0	MAT	$152.00	19	$0
Total				**$40,880**

Services listed above will be provided as In-Kind Leverage to COC Program participants with a total value of at least **$35,750** and will be available for the duration of the HUD grant contract.

V. SIGNATURE

This MOU has been agreed to and signed this 25th day of August, 2022.

Start Corporation   **Start Community Health Center**

_____   _____
Casey Guidry, President and CEO   Trudy Franks, Vice President of FQHC

STRART
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MEMORANDUM OF UNDERSTANDING FOR IN-KIND SERVICES
This Memorandum of Understanding (MOU) is entered into by and between

Start Corporation (Recipient)
and
Start Community Health Center, a Federally Qualified Health Center (Service Provider)

I.   PURPOSE AND SCOPE

The purpose of this MOU is to clearly identify in-kind service leverage for the below named project as it relates to the implementation of the US Department of Housing and Urban Development (HUD) Continuum of Care (COC Program). The purpose of the COC Programs is to provide housing and supportive services to people experiencing homelessness. Both Recipient and Start Service Provider will ensure that program activities are conducted in compliance with all applicable federal laws, rules and regulations, including Civil Rights and the OMB.

II.   UTILIZING HEALTHCARE RESOURCES IN HOUSING

People experiencing homelessness often have serious and complex health conditions that make it difficult to obtain and maintain stable housing. These health issues include chronic health conditions like diabetes, substance use disorders, mental health disorders, and infectious diseases like Hepatitis and HIV/AIDS. The California Policy Lab found that people living unsheltered were four times more likely than sheltered people to report that physical health conditions contributed to housing loss, mental health conditions at 3 times the rate, and substance use at 8 times the rate. In the same study, people experiencing homelessness reported worsening health conditions the longer they were homeless.

Both programs have long been involved in partnering to successfully implement COC Programs that improve the lives of people experiencing homelessness, including referrals, resource sharing, community crisis intervention and participation in community meetings. Service Provider has collaborated with Recipient to increase participant housing stability by providing Primary Care, Mental Health, Substance Abuse, Dental, Maternal Health, Child Health, and Hepatitis C treatment. Service Provider is certified as a Patient Centered Medical Home and coordinates care of patients for optimal health outcomes. One of the greatest benefits of the partnership is the continuum of primary care services coordinated with comprehensive behavioral health services, provided in one location, which will help to prevent fragmentation of services and ensure COC Program participants remain engaged in treatment and aftercare longer term, contributing to long-term housing stability. Service Provider will assist COC Program participants to increase access to comprehensive, culturally competent, quality preventative and primary healthcare to improve the overall health of people experiencing homelessness. This partnership is critical as it will expand access to holistic care to persons living in areas where the most vulnerable experience transportation, economic, social, psychological, and education barriers to healthcare.

III. COMMITMENT TO PROVIDE SERVICES

Start Community Health Center commits to provide the services described in this MOU for households served by the project below for the period of the grant.

Project Sponsor:	Start Corporation
Project Name:	BOS PSH 1 expansion
Project Number:	to be determined
Expected Award Budget:	$804,440
Total Match Required:	$160,888
Project Operating Year:	9/1/23-8/31/24

IV. ROLES AND RESPONSIBILITIES OF PARTNERS

The roles and responsibilities are hereby agreed to by and between the partners as follows:

Start Corporation will be responsible for financial and program administration and oversight, including the preparation and submission of requisite program and financial reports, insurance of confidentiality, maintenance of records, and managing, dispersing and accounting for all federal funds received for the COC Program. Start will oversee operations of the COC Program and work, in collaboration with its partners, to provide safe and appropriate services to people experiencing homelessness. Start will provide Case Management and Rental Assistance directly with grant funds. Eligibility for the project will comply with HUD program and fair housing requirements, and will not be restricted by the eligibility requirements of the services listed in "Type of Service" below. Referrals to existing in-house assessments and Evidence-Based Practice Programs for those participants that qualify will be:

1. Primary Care visits;
2. Behavioral Health Assessments;
3. Medication Management;
4. PrEP;
5. Hepatitis C treatment;
6. Assertive Community Treatment (ACT);
7. Medication Assisted Treatment (MAT)

Start Community Health Center will be responsible for collaborating with Start Corporation regarding eligible COC Program clients and for providing the services listed below.

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"CREATING OPPORTUNITIES"

START CORPORATION
985-333-2020 985-851-0162
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Referrals to existing in-house healthcare for qualifying participants that qualify will be:

Estimated # of Clients	Type of Service	Value of Service	# Visits Per Year	Total Annual Value
10	Primary Care Visits	$152.00	2	$3,040
40	Behavioral Health Assessments	$152.00	2	$12,160
8	Medication Management Visits	$152.00	2	$2,432
4	PrEP	$900	12	$43,200
3	Hepatitis C Treatment	$8,000	3	$72,000
2	ACT	$1,100/monthly	12	$26,400
2	MAT	$152.00	19	$5,776
Total				**$165,008**

Services listed above will be provided as In-Kind Leverage to COC Program participants with a total value of at least **$160,888** and will be available for the duration of the HUD grant contract.

V. SIGNATURE

This MOU has been agreed to and signed this 25th day of August, 2022.

Start Corporation

Casey Guidry, President and CEO

Start Community Health Center

Trudy Franks, Vice President of FQHC