

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: OR-507 - Clackamas County CoC

1A-2. Collaborative Applicant Name: Clackamas County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Clackamas County

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;
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.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	Yes
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	Disability Advocates	Yes	Yes	Yes
5.	Disability Service Organizations	Yes	Yes	Yes
6.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
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	Yes
10.	Law Enforcement	Yes	Yes	Yes
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
12.	LGBTQ+ Service Organizations	Yes	Yes	Yes
13.	Local Government Staff/Officials	Yes	Yes	Yes
14.	Local Jail(s)	Yes	No	Yes
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	Yes

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	Yes
25.	Street Outreach Team(s)	Yes	Yes	Yes
26.	Substance Abuse Advocates	Yes	Yes	Yes
27.	Substance Abuse Service Organizations	Yes	Yes	Yes
28.	Victim Service Providers	Yes	Yes	Yes
29.	Domestic Violence Advocates	Yes	Yes	Yes
30.	Other Victim Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Veteran's Advocates	Yes	Yes	Yes
35.				

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 communicates a transparent invitation process to solicit new members through the CoC website and County Social Media channels (Facebook and Twitter). A weekly CoC Digest goes out to the 362-member CoC list-serve with community resources, CoC monthly meeting reminders, meeting minutes, and funding opportunities including the NOFO. New members are solicited to join the Housing Services Steering Committee (CoC governing board) through public posting (CoC Website and Social Media), CoC and community meetings. Additionally CoC Lead is active throughout the community and invites new members to join the CoC and apply for funding. Support is offered to prospective applicants, and 1 NOFO Q&A session on 8/17 was attended by representatives from 5 agencies, 2 of which were new to CoC.

2. The CoC ensures effective communication with individuals with disability, including the availability of accessible electronic formats by using the County's ADA accessible website to announce regular meetings and the HUD CoC NOFO competition deadlines and processes. The CoC accommodates any accessibility requests for meetings, documents, etc. in alternative formats.

3. Staff from culturally specific organizations attend monthly CoC meetings and receive weekly emails through the CoC list-serve. The CoC consistently looks for ways to increase engagement with culturally specific organizations to collaborate on homeless service planning and provision, and to apply for funding. 6 new culturally specific organizations were contracted in the past year, utilizing non-CoC funds. They offer a range of services, including PSH, Navigation, Street Outreach, RRH, and Shelter. These providers not only provide culturally specific services, but also work with some of the County's most vulnerable community members. The CoC has undergone extensive improvement planning processes related to CE. Partners include organizations working with BIPOC, LGBTQ+, and persons with disabilities. The CoC is currently contracting with 2 culturally specific organizations to support engagement and system improvement efforts. The CoC will utilize these connections with culturally specific agencies, including TA providers, to more widely advertise CoC and CoC NOFO information and solicit new members. In addition to efforts to solicit new culturally specific providers to apply and join The CoC, The CoC Project scorecards award points to culturally specific agencies and projects.

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 organizations and individuals with knowledge and/or an interest in preventing and ending homelessness through CoC meetings, other community stakeholder meetings, and engagement with people with lived experience of homelessness. CoC membership includes homeless service providers, faith based groups, culturally specific orgs, people w/lived experience, law enforcement and community members. CoC website lists time and location for monthly CoC meetings and CoC Lead contact info. Meeting agenda and reminders go to 362-member listserv weekly, and CoC encourages sharing opinions through in-depth discussion and voting. CoC recently established a Lived Experience Board of 18 persons with lived experience of homelessness to consult on homeless service planning.

2. The CoC Lead communicates information at CoC monthly meetings, various community meetings, through a 362-member weekly digest email, and through the CoC website and social media channels. CoC providers are expected to participate in CoC meetings, and new and existing providers are asked to present. CoC sub-committees present monthly: Veterans housing/ Veterans Advisory Council, Homeless School Liaisons, Community Outreach, Street Outreach Connections (SOC), healthcare, mainstream providers, and Unaccompanied Youth services. 3 new coordinators joined CoC, focused on Street Outreach, Housing Navigation, and Supportive Case Management Services. A Youth Services coordinator will soon join. Coordinators convey information in public meetings and other forums, and solicit opinion on ending homelessness.

3. CoC Lead attends community meetings to gather information to address improvements or new approaches to prevent and end homelessness. CoC Lead attends Street outreach Connections (SOC), coordinating outreach efforts with people experiencing literal homelessness. SOC includes grassroots organizations, large hospital systems, drop-in day sites, food banks and others. When COVID called for prioritizing access to motel shelter and organizing to deliver the vaccine, SOC was invaluable. SOC helped build a by-name-list to shelter the most vulnerable and helped reduce vaccine hesitancy. This process ultimately provided insight and tips to permanently house 100+ households. CoC Lead attends Housing Services Coalition of Clackamas County, a non-profit that includes law enforcement, policymakers, business, housing service providers and other key stakeholders.

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. Notification about the CoC NOFO is made public through the CoC’s website and County Social Media channels (Facebook and Twitter). Information about the CoC and the NOFO process is frequently shared through multiple public forums, including community connect meetings that are open to the public. Information about the local competition is also shared at monthly CoC meetings, as well as other community meetings open to the public. Information is sent out through the 362-member list-serve, of which about 70% are non-CoC members who have expressed interest in receiving information about homeless services through the weekly CoC digest. The CoC Lead’s contact information is on the CoC website should anyone want to be added to the list-serve. CoC monthly meetings are also open to the public, with information on how to attend posted on the CoC website.

2. The CoC website includes information about the CoC NOFO and the local competition process, including deadlines, scorecards, and a scoring rubric. Also included is instructional information about esnaps. Prospective new applicants are encouraged to contact the CoC Lead directly for support in understanding and completing the application process. Agencies not currently receiving CoC funding are also encouraged to apply through various community meetings, which are open to the public. Additionally, a CoC NOFO Q&A session was held on 8/17, where the CoC Lead went over the local competition process and CoC NOFO.

3. The process for determining which project applications are submitted to HUD is posted on the CoC website, with links to this information shared through County Social Media channels (Facebook, Twitter). This includes information about scoring (scorecards and scoring rubric), an overview of local and HUD priorities, and final priority listing. The reallocation process is included in the CoC & ESG Policy Manual. The process for determining which applications are submitted to HUD was also shared at the Q&A meeting on 8/17.

4. The CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats by using the County’s ADA accessible website to announce the CoC was open to proposals. The CoC accommodates any accessibility requests for meetings, documents, etc. in alternative formats.

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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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 Nonexistent if the organization does not exist within your CoC's geographic area.	

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

18.	US Department of Veterans Affairs, and All School Districts within the County	Yes
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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. Clackamas County is the ESG jurisdiction and CoC geographic area. The same County office coordinates CoC activities and is entitlement entity for CDBG, HOME and ESG funds. Several divisions within Clackamas County consulted on ESG, ESG-CV, CoC, CDBG, HOME, state and local funding allocation and distribution. County has realigned its structure to allow a single division to receive and coordinate distribution of all federal, state and local homeless services funding, including ESG and ESG-CV. This will further strengthen coordination across multiple programs and funding sources. The CoC consulted with ESG Program recipients in planning and allocating ESG and ESG-CV. ESG funding for FY2022 is solely dedicated to the costs of implementing and staffing a strong HMIS. HMIS is a vital tool for our system to conduct coordinated entry and hold accountable homeless service providers across the CoC. ESG allocation decision required a cross-system evaluation, including input from community partners, and consultation with larger CoCs in local area. CoC led this coordination. With a five-fold growth in local funding and an anticipated doubling of state funding dedicated to homeless services, CoC concluded that ESG funding could be effectively used to support CoC's HMIS through this rapid growth.

FY 2022 ESG and ESG-CV funding recommendations were presented to the Housing Services Steering Committee (HSSC) on 3/10/2022.

2. CoC participates in evaluating and reporting performance of ESG Program recipients and subrecipients by regularly reviewing subrecipients' data quality and outcomes reports. The CoC Lead, in coordination with HMIS staff, regularly prepares reporting on ESG subrecipients.

3. CoC provided FY2022 HIC, PIT and Coordinated Entry (CHA) data to staff working on the Con Plan within the geographic jurisdiction. The CoC covers only one jurisdiction. This information was sent through email 2/11/2022.

4. Every year, HIC, PIT, CHA and other CoC data is provided to Consolidated Plan Jurisdictions to address homelessness within CoC's geographic area. All funding recommendations and action plans are presented at a full CoC meeting and HSSC for feedback. CoC leadership read and advised on the plan prior to its submission.

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

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 formal partnerships with organizations such as school districts, YEP, SEA, LEA with consistent community engagement. YEP, have services such as housing, employment, and social/peer support in their models. These partnerships are creating an inclusive and accessible system for youth and homeless families to receive services. Additionally, the CoC has hired a Youth Program Coordinator, who will start soon. This coordinator will partner with education providers to ensure homeless youth and families are connected to the education services for which they are eligible. CoC youth coordinator and staff will case conference using a by-name list and coordinate services to quickly serve those most in need.

School District McKinney-Vento Homeless Liaisons are a long-term Special Committee of the COC. The existence of this collaboration is codified in the COC & ESG Policy Manual. Homeless Liaisons attend and provide regular updates to the COC networking meetings on needs of homeless children and families and serve as contacts for COC members for school-related questions and support. Homeless Liaisons' networking meetings include all school district liaisons and are facilitated by a COC member agency 6 times per year. Meetings provide opportunities for training and connection with other youth and family community service providers. It also offers a platform for liaisons to problem solve and provide support to one another. The meeting facilitator updates and maintains outreach materials about rights of homeless students and School District contacts and distributes to COC members annually. This past year, the McKinney-Vento Representative from the state Education Department regularly attended monthly COC meetings, strengthening the Clackamas COC connection to state-level efforts.

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.
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(limit 2,500 characters)

Policies- Written policy in the COC and ESG Policy Manual includes guidance for all COC programs is as follows: Education of Children: Clackamas County CoC strongly values education, believing that increased educational attainment lowers the risk of future homelessness. ESG and CoC programs shall inform parents and unaccompanied youth of their educational rights, take the educational needs of children into account when families are placed in housing, and will, to the maximum extent practicable, place families with children as close as possible to their school of origin so as not to disrupt such children's education. Providers and homeless school liaisons will coordinate schooling for each school-age child, reducing school migration and connecting students to services. Reference: 24 CFR 578.23 (C) 7

Participant choice and self-determination is codified in the written CoC and ESG Policy Manual Principles, which permeate system-wide. Informing families of their educational rights and resources is central to ensuring each family has all the information needed to make the best educational choices for them.

Procedures- The CoC procedures include monthly and ongoing coordination with YEP, SEA, LEA, and school districts regarding educational services program eligibility. These monthly meetings create an avenue for the most updated information to CoC providers, and these updates are provided at CoC-wide monthly meetings. Information about eligibility for educational services are available in various styles and languages to ensure access and meet legal requirements. This way, CoC providers can follow the formal policy to inform individuals and families who become homeless of the eligibility for educational services with the most up-to-date information.

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	Yes	Yes
2.	Child Care and Development Fund	Yes	Yes
3.	Early Childhood Providers	Yes	Yes
4.	Early Head Start	Yes	Yes
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	Yes	Yes
6.	Head Start	Yes	Yes
7.	Healthy Start	Yes	Yes
8.	Public Pre-K	Yes	Yes
9.	Tribal Home Visiting Program	Yes	Yes
	Other (limit 150 characters)		
10.	Clackamas Education District, Early Learning HUB, Clackamas Workforce Project, WIC	Yes	Yes

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. CoC collaborates with DV service providers to update CoC-wide policies. Clackamas Women’s Services (CWS) is the largest community-based provider of housing and services for survivors of domestic violence, dating violence, sexual assault, trafficking, and stalking (DV) in the CoC. CWS has been an active partner in Clackamas County’s CoC since its inception and participates in all updates of CoC-wide policies. Through a trauma-informed and survivor-centered lens, CWS helped craft our CoC’s structure, policies, and procedures. The structure of our CoC includes a domestic violence (DV) “door” whereby survivors of DV can be transferred to CWS at any time during the process to ensure that survivors have access to housing along with supportive services tailored to the unique needs of survivors.

2. CoC collaborates with CWS (largest DV provider) to provide training and ongoing discussion in CoC meetings and for other subcommittees, community meetings, and working groups. Meetings are open to and promoted to CoC partners to ensure services provided by the CoC are trauma-informed, and meet the needs of survivors. In addition to CWS, the Immigrant and Refugee Community Organization’s (IRCO) Family Strengthening Program provides a culturally specific DV program, and Northwest Family Services’ Casa Esperanza (House of Hope), a culturally specific DV shelter, provides housing services as part of the CoC. To facilitate culturally specific access to the CoC, CWS completes the Coordinated Entry screening tools and commits to working directly with the CoC on behalf of all of the DV providers, as these culturally specific programs have requested. This past year CWS added a Culturally Specific Housing Coordinator position to prioritize these relationships and enhance access to the CoC system. These DV providers regularly collaborate through a monthly culturally specific DV and housing meeting and provide feedback to one another on trauma-informed and survivor-centered best practices. This meeting provides the space to present and give feedback on CoC-wide policy. As part of the CoC, Safety Compass (SC) and A Village for One (AV41) provide population-specific services and shelter for trafficking victims. CWS operates a housing program specifically for trafficking victims and works with SC, Casa Esperanza, and AV41 to prioritize referrals. AV41 presented at a CoC meeting 6/22/22.

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 coordinates with victim service providers and the Clackamas County Family Violence Coordinating Council to provide annual training to CoC-funded, non-CoC funded, and Coordinated Entry (CE) staff. Clackamas Women’s Services (CWS), the largest DV provider, provides training to CoC area project staff and CE on best practices to support those impacted by DV. CWS programs that address these needs are trauma-informed and survivor-centered. Safety planning is at the forefront of all work with survivors and their families. CWS offers in-depth training on the cycle of power and control and best practices for serving DV survivors. Training for both project staff and CE staff includes guidance about the life-threatening safety risks faced by DV survivors, especially while attempting to flee, and ways staff could help lower the risk through safety planning. CWS provides resources for referral and ongoing learning.

CoC staff partner with community organizations to ensure all CoC members are aware of DV training opportunities, which are included in the weekly CoC Digest emailed to providers and other interested persons. In the past year, CWS has provided training at CoC meetings on Identifying DV and the Communities for Safe Kids curriculum that includes abuse identification and response. In addition, CWS hosts weekly mini-trainings for local providers. This last year, CWS also updated the full 45-hour Domestic Violence Advocacy Training (DVAT) series and has opened it to the whole spectrum of service providers in Clackamas County. All of CWS’ direct service staff have completed this training and are certified as confidential advocates by the State of Oregon.

2. CWS has been involved from the start in CE system design and is fully integrated into the CE system, CE uses the best practice of believing survivors, not asking any details about abuse at any point in the process and offering the option to transfer to CWS for completely equivalent and even more confidential CE services at multiple points in the process.

CWS conducts training with CE staff annually, and has focused on how CE staff could effectively assess callers for DV, use a trauma-informed approach, understand the life-threatening safety risks faced by DV survivors, and ways staff could help lower the risk through safety planning.

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. Clackamas Women’s Services (CWS) is the primary domestic and sexual violence (DV) service provider in Clackamas County (CC). Additionally, the Immigrant and Refugee Community Organization’s Family Strengthening Program provides a culturally specific DV program, and Northwest Family Services’ Casa Esperanza (House of Hope), a culturally specific DV shelter, also provides supportive services as part of the Clackamas County CoC. These providers enter all CoC program data into the DV Comp HMIS site.

2. De-identified information is pulled from the DV Comp HMIS site in aggregate to identify disparities in the equitable distribution of resources. Once gaps are recognized, services are reorganized to ensure equitable programming and resource distribution. For example, CWS identified that some resources were not accessible or financially sustainable for immigrant survivors, so they created immigrant/refugee-specific housing programs in addition to the CoC housing resources they provide.

This data is also used to identify populations that are using resources in high numbers. If the current resources are deemed not enough or not well suited to the population, new programming is developed. This data supported the addition of a CWS Culturally Specific Housing Coordinator (new position) in the last year who facilitates a coordinated response, along with IRCO and Casa Esperanza, to the need for housing and supportive services for Latinx survivors in our community.

Further, CWS participated in a project, led by United Way of the Columbia-Willamette/The Center for Equity and Inclusion to address equity at all points across our greater continuum of providers. Through this cohort, CWS developed an equity lens tool specific to data collection and monitoring for equity. This tool helps monitor the demographics of those accessing services, and aims to institutionalize a protocol for collecting, analyzing, and evaluating data thereby ensuring practices are advancing racial equity. CWS regularly audits data and survivor feedback with a focus on equity and inclusion, having established a regular practice of disaggregating outcome data by communities to ensure that policies and practices are having positive impacts (and avoiding unintended negative ones). Using this tool CWS is able to review and compare disaggregated data from programs within and outside of the CoC and provides this report to the CoC.

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. Emergency Transfer Plan policies and procedures are required to be presented at intake both verbally and in written form to all participants receiving assistance through the CoC regardless of known survivor status. The CoC’s Emergency Transfer Plan (ETP) in the CoC & ESG Policy manual has been consistently applied, relocating and bifurcating households as appropriate. New providers are trained to implement the ETP. The Policy ensures that all CoC and ESG-funded programs must ensure that the VAWA Lease Addendum is signed between the participant and landlord.

2. The potential need for an emergency transfer is identified through the HMIS questions “are you fleeing now?” and “what is your timeline on fleeing?” Many times, survivors will also self-disclose. All CoC providers strongly encourage survivors to connect with a DV provider for wrap-around DV-specific services and to work with confidential advocates who have extensive knowledge of providing housing for DV survivors. Should a victim/survivor identify a desire to work with a DV provider, the survivor is provided with a warm hand-off, usually at intake, to Clackamas Women’s Services (CWS). A “VAWA rights” page is included in the participant Coordinated Housing Access packet along with a lease addendum that includes VAWA protections.

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)

Clackamas County’s 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, not just those run by victim service organizations. All survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking who enter through the CoC DV “door,” operated by Clackamas Women’s Services (CWS) are added to all waiting lists for which they are eligible. When Coordinated Entry (CE) assessments for homeless survivors originate with CWS, an HMIS entry with a unique number is created in the DV Comp HMIS to hold all demographic and program data and to manage the CoC DV waitlists. Then a unique number is created in the mainstream HMIS, which gives survivors an anonymized placeholder on all mainstream homeless housing referral lists for which they qualify, allowing maximum choice while ensuring safety and confidentiality. As housing slots open, CWS houses survivors directly into CoC programs or other housing options from DV or mainstream waitlists. As the CoC funds new DV providers, CWS staff work with all DV providers to coordinate CE procedures, ensure appropriate Release of Information procedures, and continue to ensure maximum choice, safety, and confidentiality.

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&2. To prioritize survivor safety and to ensure a trauma-informed, survivor-centered homeless services system, Clackamas Women’s Services (CWS), CoC’s main DV provider serving survivors of domestic and dating violence, sexual assault, stalking and trafficking, plays a principal role in CE system design, implementation, and continuous improvement. Survivors fleeing abuse or seeking safety from violence can access the CoC or ESG through the DV “door” in several ways: They can call the CWS 24-hour crisis support line, reach CWS via the text/chat line, or call or walk into A Safe Place (ASP) family justice center, where they will find confidential victim service providers as well as other supports such as law enforcement, legal advocacy, and culturally specific providers. Survivors can also connect with CWS out-stationed advocates at several locations in the community where they may already be receiving services (DHS, Behavioral Health, School-Based Health Centers, Community College etc.), or through the CWS office in the rural community.

At each entry point CWS direct service providers will address any immediate safety concerns with immediate safety planning prior to offering any other supportive services or CE screening. CWS’ crisis line is staffed 24/7, therefore, once any urgent safety concerns are addressed, survivors receive immediate screening without a wait. CE assessments are trauma informed, survivor-centered, and require no details about abuse. The CoC’s Emergency Transfer Plan (ETP) for DV survivors, in the CoC/ESG manual, has been consistently applied, relocating and bifurcating households as appropriate. New providers are trained to implement the ETP.

3. When CE assessments for homeless survivors originate with CWS, an HMIS entry with a unique number is created in the DV Comp HMIS to hold all demographic and program data and to manage the CoC DV waitlists. Then a unique number is created in the mainstream HMIS, which gives survivors an anonymized placeholder on all mainstream homeless housing referral lists for which they qualify, allowing maximum choice while ensuring safety and confidentiality. As housing slots open, CWS houses survivors directly into CoC programs or other housing options from DV or mainstream waitlists. As the CoC funds new DV providers, CWS staff works with all DV providers to coordinate CE procedures, ensure appropriate ROI procedures, and continue to ensure maximum choice, safety, and confidentiality.

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. CoC-wide anti-discrimination policy in CoC & ESG Policy Manual is updated as necessary. In last two years, stakeholder feedback was provided by Housing Services Steering Committee (HSSC) and Youth Action Board. Proposed updates are shared at larger CoC meetings attended by CoC and ESG recipients and other stakeholders. HSSC approves all amendments to policy. During YHDP Coordinated Community Planning Process, an LGBTQ+ specific service agency provided input on incorporating anti-discrimination language specific to LGBTQ+ individuals and families receiving services free from discrimination.

2. CoC annually trains on Equal Access, Fair Housing and other anti-discrimination policies and practices. Scorecards ask about how agencies address disparities and mitigate discriminatory policies and practices. Newly funded agencies receive support by CoC Lead to create their agency policy manuals. Agencies are provided with example policies to use and can be paired with established CoC providers for additional support.

3. Points are allocated in project scorecards to identify through Equal Access threshold questions and Housing First narrative questions how agencies are successfully providing services free from discrimination in alignment with CoC's anti-discrimination policies. CoC Lead reviews policy manuals of new agencies and reviews anti-discrimination policies for compliance. Equity analysis of multiple data points is conducted to determine whether or not agencies are compliant with policies. Additionally this analysis indicates the effectiveness of CoC efforts to decrease disparities and provides an opportunity to update CoC policies as necessary. The last equity analysis was conducted 9/19/2022.

YHDP requires questions about gender in order to identify disparities. CoC expanded use of these questions across the youth continuum. CoC is in process of getting approval to apply CoC wide.

4. CoC addresses compliance issues through a progressive action approach. Upon determining policy is not established and/or not being followed by a provider, CoC Lead meets with the provider to identify possible barriers and solutions. If determined for a 2nd time that the same issue exists, CoC may implement a time bound and mutually agreed upon Performance Improvement Plan (PIP), with guidance and support of the HSSC. Continued non-compliance may result in HSSC not selecting the agency for future CoC funding consideration.

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?
Housing Authority of Clackamas County	75%	Yes-Both	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
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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 Housing Authority of Clackamas County (HACC), the only PHA in the geographic region, is part of a collaborative effort with the CoC to end homelessness in the region. HACC uses a variety of preferences based on the program. Homeless programs, such as Shelter Plus Care (SPC), Foster Youth to Independence (FYI), Emergency Housing Vouchers (EHV), Mainstream Vouchers (MV), Family Reunification Program (FUP) and Regional Long Term Rental Assistance (RLRA) program, are federal and local housing voucher types that include a homeless preference and take referrals from CE. HACC has Sec 8 homeless preferences and includes a Moving on Strategy. Through these preferences, HACC collaborates closely with CoC service providers to help the most vulnerable homeless or at-risk of homelessness populations access long-term vouchers to obtain affordable permanent housing, making room in programs for newly homeless participants. In 21-22, 53 homeless preference vouchers were issued and 58 Mainstream Vouchers. HACC and the CoC collaboratively applied for and received 25 FYI tenant-based rental assistance vouchers and were awarded an additional 50 new vouchers starting January 2022. These vouchers serve youth graduating out of foster care who are identified through a partnership with CE and state foster care authorities. HACC intends to apply for more FYI vouchers in the coming year. HACC successfully applied for and was awarded an additional 20 Mainstream and 25 Veteran Administration Supportive Housing (VASH) vouchers. HACC was awarded 41 EHV vouchers that serve those experiencing homelessness or at risk of experiencing homelessness. HACC was the first PHA in the US to utilize their entire allotment of this valuable resource. This success was due to formal collaboration between the HACC, CoC, and local community service providers who helped support applicants with the voucher referral, housing navigation, and lease up process.

HACC completed the redevelopment of Tukwila Springs in fall 2022, a housing project serving extremely low-income homeless individuals age 50 and older, with 12 units prioritized for culturally specific support services for Indigenous residents. Resident selection for this 48 unit PSH project went through CE. CoC and HACC continue to collaborate on 3 new affordable housing properties in development. HACC will provide project-based vouchers, and CoC will work with service providers to identify (through CE) and support program participants.

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

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

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section 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	No
	7.	Public Housing	Yes
	8.	Other Units from PHAs:	
			No

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)?	Yes
			Program Funding Source
	2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Stability Vouchers, FYI, Mainstream, Family Unification Program

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

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

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

Name of PHA: Housing Authority of Clackamas County

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.	16
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition that have adopted the Housing First approach.	15
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.	94%

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. CoC utilizes scorecards and bed utilization tracking to ensure fidelity to the Housing First model. CoC requires projects to use the CE system for referrals, ensuring projects follow Housing First (HF) policies and practices through program admission. In addition, the CoC is designing an internal process for regularly monitoring HF compliance.

HF resources go out in weekly CoC Digest, reaching 362 members. CoC collaborates with several organizations to distribute HF information with additional opportunities for Assertive Engagement, Harm Reduction, De-escalation, Diversion, Mental Health First Aid and Trauma Informed training. With information shared across a network of providers, CoC is better equipped for Housing First training and monitoring.

2. Monitored and scored performance indicators include length of time (LOT) people are experiencing homelessness, LOT searching for PH, existence of programmatic preconditions, admission policies, voluntary nature of supportive services, tenant rights, program design, and program termination when monitoring for HF compliance.

CoC is investing in provider capacity building and technical assistance to ensure access and exclusion policies follow HF, with no preconditions to services especially around income, criminal history, sobriety or engagement. CoC also seeks to help providers through advancing conflict resolution services and a County funded statewide demonstration project from 7/22-6/23 for housing related conflict mediation.

3. All homeless services providers receive referrals from CE, regardless of funding source. CE ensures that agencies do not cherry pick referrals into their projects, and evaluates denied referrals, to ensure programs are not screening people out of programs due to preconditions. In addition to annual CoC competition, projects are evaluated for HF compliance in January using score cards, as described above. CoC Lead will continue to improve monitoring of denied referrals and provider exclusions with returns to homelessness. CoC team is evaluating the HF Tool published by HUD, adapting it to local needs, designing a local policy, and creating on-going training opportunities. This work will be operational by Summer 2023.

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. Street outreach (SO) efforts are designed to reach all persons experiencing unsheltered homelessness. Various methods are used, including boots-on-the-ground SO workers, engagement through trusted day-center locations, and pop-up resource fairs that include showers, laundry, food, clothes, survival gear and connections to housing resources. Contacts are made in different formats (including large print, ASL, Braille) and languages to ensure access for persons w/ disabilities and those with LEP, respectively. Culturally specific organizations partner to provide outreach to immigrant, refugee, and Black/African American populations. A Veteran is employed to provide veteran-specific SO. Outreach workers make it clear that housing and services are available regardless of protected class status and in compliance with the Equal Access Rule. Coordination for this SO work is done with city homeless task forces, law enforcement, libraries, parks dept, and local nonprofits. CoC's written outreach policies include coordination with all agencies using a by name list (BNL) and case conferencing to quickly identify and engage all persons experiencing unsheltered homeless

2. SO covers 100 percent of CoC's geographic area, including densely populated cities and rural/forested locations. Pop up resource fairs as described in #1 are offered in both urban and rural communities. Site-based day centers provide services in highly populated urban areas and remote rural communities. Outreach policies ensure workers strive to complete a CE assessment immediately upon engagement. CE collects data on where people are currently, showing all habitable areas are being reached, including 2 larger cities, 7 suburban areas, 5 rural towns and 5 entirely rural areas.

3. SO is conducted on an ongoing and consistent basis as described above. Street outreach workers, day-center staff, and resource fair organizers meet monthly with the CoC Outreach Program Coordinator to plan and implement the outreach procedures.

4. CoC tailored approaches to persons experiencing homelessness who are least likely to request assistance include: partnering with culturally specific providers as described in #1 above; encouraging hiring staff who share identity with people living unhoused such as veterans, peers, and BIPOC; and continuous outreach to high volume and underserved spaces to encourage trust and rapport

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	Yes	Yes
5. Other:(limit 500 characters)		
Expanded existing Law Enforcement Assisted Diversion (LEAD) program	Yes	Yes

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC). NOFO Section VII.B.1.I.	
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		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.”	228	293

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff. NOFO Section VII.B.1.m.	
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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	
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Describe in the field below how your CoC:

- 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;
- 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
- works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1. The CoC provides up-to-date information on mainstream resources for persons experiencing homelessness through community meetings, including CoC meetings. An Oregon Department of Human Services (ODHS) manager participates in CoC meetings and provides updates/changes to rules/processes for TANF, SNAP, General Assistance and Oregon Health Plan (OHP/Medicaid) and information on ODHS free food markets, ODHS job fairs, young parent resources, alcohol and drug treatment resources, Healthy Families (infant and maternal health), financial help for health coverage, a local HMO's enhanced services for emergency room high utilizers. Tips on helping participants enroll in all programs, including Medicaid benefits, are shared at CoC virtual presentations and in CoC digest emails. A weekly CoC Digest is emailed to a 362-member listserv with updates on mainstream resources. County Public Health presented on the opioid epidemic and resources for assisting participants in accessing substance use and mental health services/resources.

2. This year's scorecards increased points for projects collaborating with healthcare orgs. The new CWS RRH Expansion project application includes formalized partnership with healthcare orgs. Several renewal projects also formalized partnerships with healthcare orgs. All projects connect program participants to healthcare resources based on individual needs and choice. Several projects have in-house treatment and/or counseling services. The CoC is engaging with HealthShare Oregon to determine ways to collaborate. HealthShare has a new rental assistance pilot project focused on providing supportive services to those exiting foster care, including housing support. The CoC is working with HealthShare to determine how participants can be connected to these services through CE and other potential avenues.

3. Program staff use SOAR online training to build skills to help participants access SSI/SSDI benefits. 12 staff from 5 CoC involved organizations are SOAR certified. The county contracts with ASSIST, Assertive SSI Serve Team, to provide SSI/SSDI application assistance independent of specific housing programs. CoC is part of efforts to expand providers' ability to bill Medicaid for eligible supportive housing services. Staff from a large HMO connect with providers at monthly CoC meetings. CoC collaborates with another large HMO on planned funding for a new supportive housing project and funding CoC leadership in Built for Zero ending TA.

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)

A 1.2. The CoC is increasing capacity to provide non-congregate sheltering by supporting various agencies with their current shelter programs and developing new projects. These programs are accessed through the CE and community provider referrals. Non-congregate units are operated from hotel/motels by local nonprofit agencies. Agencies that operate traditional congregate shelters have expanded services through non-congregate hotel/motel options. While in a non-congregate setting, individuals/households can access basic services/resources, receive a CE assessment, and get matched with CoC providers for RRH/PSH. Additional non-congregate spaces for people experiencing unsheltered homelessness include Veteran Village, a site with 25 small pod spaces that offer an alternative to other shelter options.

3. CoC implemented hotel/motel stays to provide vulnerable county residents with non-congregate shelter options during the pandemic. CoC programs allow for medically vulnerable individuals to be placed in non-congregate unit. This practice protects highly vulnerable individuals from infectious diseases.

B. CoC increased non-congregate unit capacity to assist unsheltered homeless during the pandemic. Since December 2020, 261 adults and children have been served through this expanded program. In addition, CoC is allocating more local funding to further expand non-congregate units. A state grant has been awarded to identify and purchase a hotel/motel for use as a non-congregate shelter site, and local funding will pay for staffing, services and connection to permanent housing resources.

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 & ESG Policy manual has been updated to include coordination with Clackamas County Public Health and the Emergency Operations Center (EOC). Updates are scheduled for Housing Services Steering Committee (HSSC) approval by end of year. Although this collaboration has been happening since March 2020, the crisis temporarily delayed adoption of formal policies until now.

2. CoC Lead attends monthly meetings to coordinate state-wide response to outbreaks and disasters such as COVID-19 and local wildfires. CoC staff met daily from 3/2020-3/2021, and weekly thereafter to collaborates with the Public Health division (PH) and healthcare providers to support investigation, tracking, and prevention of the spread of infectious diseases.

PH staff have recently committed to attending monthly Street Outreach coordination meetings to improve information sharing between PH and service providers focused on people living unhoused. The relationships formed through this engagement are invaluable in quickly addressing infectious disease outbreaks now and in the future. Through this partnership, PH and CoC staff are collaborating on a list of providers and locations that would be most helpful for myth-busting and vaccine access information regarding hMPXV.

PH conducts quarterly advisory council meetings and provides HIV/AIDs prevention and education through partnership with local and national entities. Connections that offer support, services, and resources needed when living with HIV/AIDS include the Oregon HIV/STD Hotline, Oregon Health and Science University's (OHSU) Partnership Project, Cascade Aids Project (CAP), Quest for Integrative Health, Our House of Portland, Apoyo Latino, The Body en Español, and the CDC.

Through regular coordination with PH, education and preventive services are also available for hepatitis A, rabies/animal bites, sexually transmitted infections (STI's), mosquito-spread illnesses, flu resources, lead infections, and syringe services.

Syringe services are available, through a partnership with mobile medical services, at local shelter and outreach providers three days per week. Services offered include needle exchange, overdose kits and drugs to reverse an opioid overdose, sharps containers, harm reduction counseling, safer sex supplies, HIV and Hepatitis testing, and linkage to care with referrals to mental health, shelter, and drug and alcohol treatment.

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 continues to meet regularly with Public Health (PH) to establish and improve policies that expedite access to services that are easily accessible, effective, culturally appropriate, and trauma informed for people living unhoused. In these meetings, PH shares pertinent information regarding infectious diseases and outbreak patterns and CoC provides data about how/when/where to best reach people experiencing homelessness (PEH) to reduce infectious disease outbreaks among the homeless community. CoC provides data analysis of CE, and estimates of PEH to PH to share on a public-facing dashboard which includes lots of data on various social determinants of health. CoC Lead coordinates with PH and system partners to share information widely at various community meetings, and includes information through the 362-member CoC list-serve.

2. PH has presented to the CoC at monthly meetings throughout the Covid-19 pandemic, and at least 2 times within the past year. These meetings are attended by CoC and non-CoC-funded service providers. Though meeting frequency has reduced since Dec 2021, CoC staff member continues to participate in monthly coordination meetings with PH staff, representing PEH among various stakeholders representing racial and ethnic groups, people with disabilities, and older adults. These meetings provide a venue for constant information sharing and policy development within the context of relationship development across service systems. Through these efforts, CoC has coordinated with PH to establish Covid-19 vaccine and testing events at various CBO sites, including those hosted by shelter and street outreach organizations. Because these meetings were so successful in coordinating the COVID-19 response, they continue as we plan for a response to hMPXV. PH and CoC staff are collaborating on a list of providers and locations that would be most helpful for myth-busting and vaccine access information regarding hMPXV.

PH staff have recently committed to attending monthly Street Outreach coordination meetings to improve information sharing between PH and service providers focused on people living unhoused. The relationships formed through this engagement are invaluable in quickly addressing infectious disease outbreaks now and in the future.

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. Coordinated Housing Access (CHA) is CoC’s CE system. CoC serves a mix of suburban, rural and wilderness areas. CHA collects data on where people are currently, showing all habitable areas are being reached, including 2 larger cities, 7 suburban areas, 5 rural towns and 5 entirely rural areas. CHA has 3 main “doors”: mainstream, DV and youth. Each “door” does population specific outreach. CHA outreach is weekly at drop-in day sites, and monthly at meetings with homeless liaisons from all 10 school districts, and with all 11 senior centers and 4 state human service offices. CHA advertises on County’s social media and quarterly newspaper sent to every known home.

CHA is training street outreach, basic needs homeless service providers, and other community partners to complete assessments. Efforts to recruit culturally specific organizations to expand outreach and assessment have been successful.

2. CHA uses a standardized assessment process. Everyone goes through the same tiered assessments. All assessors are trained in trauma-informed communication. CoC uses a locally-developed tool that does not retraumatize people seeking services. Screening tool first asks participants about their housing instability, builds-in system diversion and gathers basic demographics. For those who cannot be diverted, the 2nd tier assesses homeless history and barriers to housing access. For those who meet CH definition, tier 3 is a locally developed VI about mental and physical health, hospital visits, addiction and age.

3. CHA system is updated regularly with feedback from participating projects and households. CHA has adopted a culture of constant change. CHA has completed one large overhaul. CHA 2.0 incorporated rent assistance and prevention. CHA 3.0 is 75% complete. It will use Built for Zero, By-name list, and case conferencing best practices to track and show clear progress toward ending homelessness.

Homeless services and other interested parties participate in active planning and implementation workgroups. CHA lead facilitates these meetings, ensuring representation from historically marginalized groups including BIPOC, LGBTQIA+ and rural areas. Toward racial/ethnic equity, CoC has contracted with culturally specific local non-profits to conduct focus groups with BIPOC community members, assessing ease in accessing and using CHA. After 90% of CHA calls, a participant feedback survey is emailed to callers. This feedback informs CHA evolution work.

	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.
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(limit 2,500 characters)

1. CE (CHA) reaches people least likely to apply for homeless assistance. CHA outreaches weekly at 2 low barrier homeless day centers, covering entire geographic area, serving many long term homeless persons and persons with disabilities. New local funding adds \$1.5+ mil. to 6 providers to expand street and site-based outreach to connect more people to CHA, then PH, resulting in 212% increase in new SO CHA entries last FY. This includes two culturally specific providers, one in Black/African American and one in Immigrant/refugee communities. DV survivors have access to all CHA programs without disclosing identifying information through innovative DV provider partnership. YHDP Diversion has increased outreach to youth in both rural and urban areas.

2. CHA prioritizes people most in need by vulnerability scoring including LOT homeless and disability, with added VI for CH eligible. Score is entered into tool to match people with all programs they qualify for. PSH uses HUD’s Orders of Priority. CoC uses by-name-list (BNL) and case conferencing best practices to further prioritize people with most immediate need, assessing urgency and quickly matching with existing housing resources.

3. CHA ensures people most in need of assistance receive timely PH aligned with their preferences. Before, CoC calculated it would be 22+ years to house CH backlog. With new local funds, it is estimated to take less than 2 years. With BNL and case conferencing, CoC connects those prioritized to wrap-around housing services within 3 business days. To ensure help consistent with people’s preferences, CHA includes a Participant Choice Form, a brief description of each provider of services participant qualifies for. Participant may rank providers they prefer to work with. All efforts are made to match people with top choices during case conferencing and prioritization meetings.

4. CHA reduces burdens on CE users. CHA assesses in a timely, person-centered way. People can be assessed during CHA outreach, in-person at a convenient place, by phone, at a scheduled time or with advocates or family. CHA is training medical and behavioral health providers and homeless school liaisons to do assessments. CHA’s tiered assessment is trauma-informed, asking minimal questions to assess needs and match with resources. CHA is conducting analysis and focus groups by culturally-specific experts to ensure cultural responsiveness. Trauma informed assessment reduces burden of using CHA.

1D-10.	Promoting Racial Equity in Homelessness—Conducting 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.	09/19/2022

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. CoC completed an Equity Analysis of entire CoC in September 2022. Intention of Equity Analysis is to highlight system strengths and areas for improvement around equitable service delivery. For this Analysis, CoC looked at CHA (CE system), and subsequent program entries and exits. HMIS was primary data source. Race and ethnicity characteristics were reviewed from participants who accessed CHA (9/20- 9/22) and those who exited programs to either permanent or unstable housing destinations. These demographics were then compared to expected distributions for racial and ethnic groups living in poverty using American Community Survey (U.S. Census Bureau, 2020) data. Historically marginalized populations are often represented at a higher rate in poverty data than general County-level census demographics.

Statistical testing was conducted to identify if particular groups of people were overrepresented or underrepresented in CHA data at a statistically significant level when compared to expected distributions from census data. American Community Survey information used to generate the expected distributions for this analysis is considered a valid source of data. However, Census data carries with it a margin of error that may be increased for historically marginalized populations. This analysis helps to identify strengths and weaknesses of current CoC system.

2. CoC identified the following racial and ethnic disparities in provision and outcome of homeless assistance:

- People who identify as Black or African American make up a higher % among CHA participants as compared to County Poverty distributions.
- People who identify as Black or African American exited housing programs without PH at a higher rate compared to their participation in CHA.
- People who identify as White make up a lower % among CHA and program participants compared to County Poverty distributions.
- People who identify as Asian make up a lower % among CHA and program participants compared to County Poverty distributions.

Differences between 20-22 and 17-19 Equity Analyses

- People who identify as Black/African American participated in CHA and housing programs at a higher % in 20-22
- People who identify as Native Hawaiian/Pacific Islander participated in CHA at a higher % in 20-22
- People who identify as Hispanic/Latine participated in CHA at underrepresented rates in 17-19 and higher than statistically expected rates in 20-22.

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

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)

In 21-22, CoC contracted with 6 culturally specific providers for shelter, navigation, outreach, PSH and RRH housing and support services. These locally funded contracts work with many of the most vulnerable populations. CoC recently worked with culturally specific technical assistance (CSTA) to evaluate and improve CE system and Supportive Housing Services (regional tax) funds local implementation plan outreach. CoC efforts will continue to increase relationships with culturally specific organizations and people from marginalized communities. CoC re-contracted with CSTA around engagement and equity analysis, and they will hold focus groups with people disparately impacted by homelessness (focus on BIPOC community members) over next few months. This will help CoC address disparities identified in provision and/or outcomes of homeless services.

CoC Scorecards award points to projects that demonstrate commitment to racial equity and addressing disparities in service provision and outcomes. In '22, CoC expanded equity questions and increased maximum equity points by 230%. Points are also awarded to culturally specific agencies and programs. CoC projects either have or are establishing equity frameworks, analysis and anti-racist policies. For example: Parrott Creek hired BIPOC Housing Navigator and Indigenous Cultural Ecologist. Chez Ami holds Town Halls for Black/African American employees and recently developed KARIBU, a culturally specific program to address disparities for BIPOC community members that experience severe mental health symptoms and homelessness.

CoC newly established Lived Experience Board consults on service planning and provision. Members are paid \$150/2-hr meeting. At the first meeting, members gave input on important elements of housing project types, from outreach to PSH. CoC and youth funded agencies consult with Youth Action Board to evaluate program design and implementation, including addressing disparities in provision of services and outcomes.

CoC Staff attended a HUD System Performance Improvement workshop in '22 and are evaluating Stella P data, analyzing system and project wide disparities and developing an improvement plan. Staff are currently participating in CES Prioritization and Assessment Community Workshop. CoC is working with Built for Zero, alongside partners working with County's most vulnerable community members. These efforts will further support CoC in addressing program and system disparities.

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)

CoC has many measures in place to track progress on eliminating disparities in the provision and outcomes of homeless assistance. Equity analysis is done every two years. This analysis looks at race and ethnicity at the Coordinated Entry (CHA) access point and again when people exit homeless housing programs. Each equity analysis cycle is compared to the previous analysis to track progress and identify additional areas for growth and change.

Completing an equity analysis every two years is not enough to move the needle on racial and ethnic disparities. After each analysis is complete, CoC engages the communities included in the report to ground truth data and identify contributing factors. CoC examines where progress is evident and where work is still needed.

CoC has contracted with 2 Culturally Specific organizations to coordinate this work. They will lead 3 focus groups of people who identify as BIPOC, including one in Spanish. The focus groups will answer questions about access to services, prioritization methods, and how trauma-informed and culturally responsive the CHA assessments are. This is the second such round of focus groups CoC has conducted related to Equity Analysis.

After learning from the focus groups, their feedback will be used to implement changes to continue to move toward a system free of racial and ethnic disparities. CoC implemented several changes including increasing contracts with culturally specific organizations, purposefully pursuing a more diverse and representative planning group to improve CHA system, and adopting system-wide anti-racism guiding principles.

Once changes identified in focus groups are implemented and have some time to take effect, CoC will start over with another Equity Analysis to identify whether the changes were effective.

An example of this process at work is with the Hispanic/Latine community. In 17-19 Equity Analysis, COC saw access by Hispanic/Latine community members had decreased and were accessing CHA at a lower rate than they experience poverty per census. After consulting with Hispanic/Latine community, CoC focused on hiring more bi-lingual staff, led thorough outreach and communication to educate providers about fears around public charge laws, improved coordination with culturally specific agencies, and providers stepped up their cultural responsiveness. In 20-22 Equity Analysis, Hispanic/Latine community was accessing CHA at a higher rate than expected from census poverty data

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)

Clackamas Counties CoC has made outreach efforts to engage people with lived experience of homelessness in leadership roles and decision making processes.

There are four designated seats on the Housing Services Steering committee (HSSC), the CoC’s governing board, for people with lived experience of homelessness (PLEH), two of which are dedicated to youth. PLEH were recruited through targeted outreach to grassroots and mainstream agencies. The CoC does targeted outreach through a list serve including 362 agencies and community members and posting on the CoC website.

HSSC is responsible for evaluating and approving CoC and Emergency Solution Grant (ESG) funding priorities and project performance measures. The HSSC evaluates and approves CoC and ESG program policies annually. HSSC follows the Continuum of Care Code of Conduct in the Bylaws, analyzes homeless program policies and performance data to identify needs, areas for improvement and future program development, assigns workgroups, as necessary, to carry out the responsibilities of the Continuum of Care and engages in strategic planning of homeless services, programs, funding, goals and policies. The PLEH input is vital to these decision-making processes.

Significant points during CoC program ranking are awarded to Continuum of Care funded agencies who include individuals with lived experience of homelessness on Boards making decisions on policy and program planning.

Staff with lived experience throughout the CoC provide housing case management, navigation, peer support and retention services. Agencies value the lived experience staff bring to CoC programs and in turn provide an inclusive and safe environment for them to thrive.

The CoC has hosted paid focus groups for PLEH to participate in the development of programs and help guide services in the community. The participating PLEH were paid \$75/hr for their time. Technical assistance and support with communication options were provided, along with financial assistance, to remove barriers to participation. The CoC is currently developing an ongoing Lived Experience Board with a non-profit partner. Individuals from the initial focus groups will be offered the opportunity to participate in paid future planning efforts.

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.	22	18

2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	22	18
3.	Participate on CoC committees, subcommittees, or workgroups.	22	18
4.	Included in the decisionmaking processes related to addressing homelessness.	22	18
5.	Included in the development or revision of your CoC's local competition rating factors.	13	9

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 is working with County departments to ensure lived experience of homelessness (LEH) is appropriately valued in hiring. CoC works with providers to encourage adapting job descriptions to offer professional opportunities for people with lived experience of homelessness. Examples include: Clackamas Youth Action Board (YAB) works with Youth Service Providers on job descriptions to allow opportunities for youth currently or formerly experiencing homelessness; CoC adapted job requirements for new homeless service area Coordinator positions to allow lived experience to count towards education and employment requirements.

CoC supports YAB, which provides an opportunity for youth to gain professional skills and interact with potential employers through community meetings, system planning and implementation processes. A YAB member was just hired by CoC to coordinate the Youth portions of the continuum. The Housing Services Steering Committee (HSSC) includes 4 lived experience spots, including two youth-specific. HSSC helps these members gain professional experience while impacting positive change in planning and implementation of homeless services. CoC recently started a Lived Experience Board to advise on homeless services planning. This group will grow to play a significant role in design and implementation of programs and system-wide improvement. While Board members are paid for their time, this opportunity also supports training and professional development. CoC is developing a peer leadership position for someone with LEH to support this Board.

Many CoC-funded projects and agencies have professional development and employment opportunities for PLEH built into their project and/or organizational model, resulting in higher CoC ranking. For example, Housing Authority has a strong history of establishing employment opportunities and promoting people with lived experience of homelessness. Chez Ami trains and promotes participants into Peer Support as well as other paid positions. CWS recently created 8 new leadership positions to increase opportunities for advancement for PLEH. Social Services has a history of promoting through Jobs Plus (TANF recipients). One PLEH started as a Jobs Plus employee and was recently promoted to a supervisory role.

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. CoC routinely gathers feedback from people experiencing homelessness and people who received assistance through CoC or ESG (PEH) on their experience receiving assistance. Housing Services Steering Committee (HSSC), the CoC governing board, has four designated PEH seats. Two of four dedicated seats are for Youth Action Board (YAB) youth, all YAB youth have lived experience of homelessness or housing instability. HSSC and YAB participate in all funding distribution decision-making and help evaluate program and system success.

CoC convened a Lived Experience Board (LEB) to provide direction and feedback on this NOFO response as a pilot for a larger LEB to be convened by a partner non-profit, funded through local government. This will enable easier payment, advocacy to CoC and other government entities, and a flexible structure to ease promotion of LEB members to full-time paid roles.

CoC has contracted with two culturally specific agencies to conduct focus groups of PEH and homeless program participants for feedback and guidance on CE system, helping make it more culturally responsive and trauma informed.

People contributing lived expertise to improve system performance are always paid. YAB and HSSC members are paid \$25/hr, LEB members were paid \$150/meeting and focus group members are paid \$50/meeting.

CoC routinely informally gathers feedback from people who received CoC and ESG assistance by maintaining strong relationships with grass-roots groups. These groups have long-standing, trusting relationships with people experiencing homelessness, especially chronic homelessness. As participants get connected with homeless services, their grassroots supports continue to encourage self-advocacy and advocate on their behalf. An example - a recently housed person continued to connect with provider that supported them while unhoused. Participant had many well thought-out ideas about how housing system could better support newly-housed CH folks, including peer-led support groups and discounted community outings.

CoC is developing a template policy on participant voice for providers to use for gathering participant feedback.

2. Once feedback is received, 5 Program Coordinators, focused on Outreach/Shelter, Housing Navigation, Housing Retention, Youth Homelessness, and CoC Lead work on improvement. Projects include addressing training needs based on grassroots and LEB input and programs to ease transition from living unhoused to permanent housing

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)

1. PHA, in partnership with the CoC, worked with City and other local jurisdictions to reform zoning and land use policies to permit affordable housing development. The collective attended planning/zoning meetings to advocate for the necessary change, and met with local city government to inform them of the necessary zoning changes. Following this advocacy, the local government Planning Commission recommended the approved Ordinance to the larger City Council for adoption, which was wholly approved on 11/4/21.

PHA, in partnership with the CoC, undertook an extensive master planning process beginning in 2018 for the rezoning and redevelopment of a long-standing Public Housing site in Milwaukie OR. Stakeholders from Milwaukie City Council, Milwaukie Planning Department, the Mayor's office, local business interests, community members and PHA/CoC staff and officials were engaged from the beginning and throughout the entire process.

The master planning and rezoning process resulted in approval from the City of Milwaukie to create up to 400 additional housing units on the site. This will bring the total housing units on the site to 600. Predevelopment work is currently underway and will result in a vibrant new pedestrian friendly community that includes a variety of housing types and serves a mixed income population.

2. The CoC participated in the Housing Affordability and Homelessness Task Force (HAHTF) to aid in the effort to reduce barriers to affordable housing development. The HAHTF was appointed by the Board of County Commissioners (BCC) to create a report outlining steps they could take to reduce regulatory barriers to housing development. As a result, the BCC approved several changes to the Zoning and Development ordinances to encourage the development of more multifamily housing in the County. Specifically, amendments were approved that will:

- Provide residential developers with additional entitlements (such as more units) in exchange for providing housing that is affordable for low-income households
- Increase maximum allowed housing density in some unincorporated commercial zones from 25 units/acre to 60 units/acre;
- Allow a 20% density bonus for housing in mixed-use development in those unincorporated commercial zones;
- Reduce parking requirements for multifamily developments in unincorporated commercial and residential areas, and
- Reduce parking requirements for multifamily developments within ¼ mile of a light-rail station.

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
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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?	16
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section 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. Project scorecards are sent to agencies mid year and during local competition. Scorecard data is pulled from APRs for last completed program years, monitoring results from local HUD staff, and HMIS. The Ending Homelessness Project Performance measure is key in determining successful permanent housing (PH) for participants. For PSH, full points are awarded to programs with 99+% of clients remaining in or exited to PH. Points are: < 82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, 99+%=7.

For TH, points are: TH program met local goal of at least 99% of clients exiting to PH: <82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, 99+%=7.

For RRH and Joint-TH RRH projects, points are: RRH or Joint TH-RRH met local goal of at least 87% who exited program to PH, maintain PH 6 months after program exit: <69%=0, 69-71%=1, 72-74%=2, 75-77%=3, 78-80%=4, 81-83%=5, 84-86%=6, =87%=7.

2. CoC analyzes data from HMIS and other databases on how long it takes to house people in PH. This is not currently ranked, but will be next year. Information gathered for non-CoC projects helps identify when people may be struggling to access housing, and newly hired Navigation Coordinator works with case managers and CoC providers to support rapid PH placement. CoC participated in '22 HUD System Performance Improvement Community and is using Stella P to analyze data and plan for system improvement. CoC participates in Built For Zero to support this work.

3. CoC recognizes the particular vulnerability of abuse or a history of abuse, domestic violence, and sexual assault that those served through victim service providers (VSPs) have experienced and encouraged new applicants to apply for programs with a focus on DV survivors. CoC received two new VSP expansion projects. Unaccompanied youth experiencing homelessness are another vulnerable population. In addition to two non-ranked YHDP projects, two youth focused projects were ranked.

4. CoC considered the severity of needs and vulnerabilities in ranking. Projects serving CH or underserved populations were awarded additional points. Lower thresholds, resulting in weighted scores, were used for some measures for PSH serving high-needs populations. As access to physical and behavioral healthcare is crucial, applicants were awarded points for health care collaborations. More Housing First emphasis was added, with a significant increase in points for strong Housing First policies and practices.

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.
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(limit 2,500 characters)

1. CoC obtains input from persons of different races, particularly those over-represented in local homeless population, through CoC meetings, other public forums, focus groups, and Housing Services Steering Committee (HSSC) representation. 6 culturally specific agencies were contracted in past year, using local funds for PSH, Navigation, Street Outreach, RRH, and Shelter services. These providers work with CoC's most vulnerable community members, attend CoC and other meetings, and provide input on CoC's review and ranking process. CoC contracts with 2 culturally specific orgs for engagement and system improvement assistance, including focus groups with people over-represented in local homeless population (including BIPOC). HSSC has primary responsibility for updating rating factors, reviewing applications, selecting and ranking. Through a deliberate effort in a predominantly white area, HSSC has 20% BIPOC members. 2 HSSC seats are dedicated to Youth Action Board members, a racially diverse group with lived experience of homelessness. HSSC members with lived experience are paid for their time.

2. Input from culturally specific providers, persons identifying as BIPOC, and other groups over-represented in homelessness, was central to revising project scorecards. Based on input, CoC expanded the equity section, to solicit more in-depth information about provider policies, practices, and decision-making that advance equity. Next year, a new Lived Experience Board (LEB), currently 40% BIPOC, will provide input on the ranking process.

3. HSSC is governing body for ranking projects apps. This group includes people of different races, including those over-represented in local homeless population. Feedback is received through CoC and other meetings attended by advocacy groups, service providers and community members. As LEB continues to develop, it will play an increasing role in evaluating applications and overall ranking process.

4. In addition to increased points and questions tied to equity, increased project scorecard points are attached to an added question on Housing First. This looks at how agencies address barriers to participation. Projects that score lower in certain performance measures, such as exits to PH, can identify barriers faced by participants and indicate what steps they take to remove barriers. Equity questions look at policies, outcomes, and org leadership structures, ensuring equitable services from orgs that represent those served

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.
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(limit 2,500 characters)

1. CoC reallocation process is in CoC & ESG Policy manual. Local competition is open to new applicants, and all applicants must complete scorecards and steps in esnaps. It defines reallocation process of defunding low-performing or underutilized projects and creating new projects, and how applicants are informed. Homeless Services Steering Committee (HSSC) considers past performance (if applicable), equity commitments, Housing First fidelity, and ability to fill service gaps during scoring/ranking. HSSC scores projects and ranks in score order. Resultant ranking determines which projects, if any, will be reallocated to fund new projects. After ranking, HSSC confirms decisions and considers any extenuating issues that may warrant reconsidering reallocation. Then, CoC Lead notified agencies whether their applications were ranked and submitted to HUD, or rejected and/or reallocated by HUD's required date. CoC's reallocation process is communicated by making manual accessible to all, posting HSSC scoring/ranking meeting minutes, encouraging applicants to read NOFO reallocation guidance, communicating scorecards and ranking process and mid-year project performance review.

CoC conducts second project evaluation, similar to scoring/ranking, outside of annual competition. CoC communicates intent of mid year project review to address poor performance and reduce reallocation risk. Projects completed scorecards, including SPM (exits to PH, increasing income) and performance (monitoring findings, on-time APR, full spendout, bed utilization) data. New project scorecards include narrative to determine capacity to run effective projects. PIT and CE data determines local need, with bonus points awarded for meeting local needs. Programs with low score/rank risk reallocation.

2. CoC did not identify any low-performing or underutilized projects for reallocation.

3. CoC did not reallocate any low-performing or less needed projects in local competition this year.

4. CoC conducts mid-year project evaluations, to give projects time to make improvements before annual competition. CoC communicates with providers the importance of project success and reallocation risk if poor performance. COVID brought more funding in across CoC, including agencies not CoC funded in past. This new funding reduced urgency of providers to apply for CoC funding, and few new projects applied this year. Thus, CoC scoring/ranking and reallocation process did not result in reallocations.

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?	Yes
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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)?	No
2.	Did your CoC inform applicants why their projects were rejected or reduced?	No
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.	

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
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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
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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.	09/27/2022
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section 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.	09/27/2022
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2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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 Community Services (formerly ServicePoint)
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Multiple CoCs
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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.	05/03/2022
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2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section 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	
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2. state whether your CoC is compliant with the 2022 HMIS Data Standards.

(limit 2,500 characters)

1. CoC and HMIS Leads work in conjunction with DV housing and service providers to make sure data is updated in a separate confidential DV implementation of HMIS. This is a comparable relational database in accordance with HMIS Data Standards. The DV implementation of HMIS was developed by WellSky, the same vendor as the CoC-selected standard HMIS software. The CoC and HMIS Lead have developed HMIS workflow trainings to meet the special needs of DV providers and provide guidance as data standards are updated. The HMIS comparable database is used to collect participant data and produces CSV files that are uploaded into Sage for APR and CAPER reporting as required by HUD. With clients entered under anonymized numbers rather than names, DV providers enter all demographic and program data required to pull de-identified aggregated performance data for each of their CoC projects. DV providers submit aggregated data to the CoC and HMIS Lead for local reports, including system performance monitoring, equity analysis, bed utilization reporting, among others.

2. The CoC is compliant with 2022 HMIS Data Standards. The vendor, WellSky, updates the database to remain compliant with HUD’s requirements and current HUD data standards. WellSky Community Services meets federal, state, and local requirements, and the WellSky team actively works with each of these partners to convert complex policies into practical solutions through WellSky products, including customizable data visibility, system functionality and reporting. The COC, HMIS lead, and HMIS support staff and administrators all work together to ensure data expectations, privacy and security standards are met. The Implementation Lead assesses the vendor’s compliance to all HMIS related standards.

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	181	54	127	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	54	0	54	100.00%
4. Rapid Re-Housing (RRH) beds	293	50	243	100.00%
5. Permanent Supportive Housing	645	7	638	100.00%
6. Other Permanent Housing (OPH)	44	0	44	100.00%

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

N/A- Bed Coverage Rate is 100%

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
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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.	01/26/2022
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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.	05/03/2022
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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)

The CoC has not conducted an unsheltered PIT count since January, 2019. In 2021 the CoC applied for and was approved by HUD to use a waiver to conduct the unsheltered portion of the PIT using local, robust CE data. The CoC is due to complete an unsheltered PIT count in FY2023.

1. In 2021, youth data was included in the unsheltered PIT, drawn from local CE data. Because the 2021 count was based on CE data, all of the time working to collect accurate CE data was part of the FY 2021 PIT planning process. In 2019, only 1 chronically homeless (CH) youth was identified. In 2021, 6 CH youth were included in the count. This increase reflects the hard work and coordination between stakeholders engaged with reaching out to and serving homeless youth. This coordination has resulted in more effective outreach to youth experiencing homelessness and an increased willingness to engage with the housing services system. Youth are more willing to engage when there are youth-specific services offered, as these services feel safer and more accessible.

2. Due to no actual unsheltered count in 2021, youth were not engaged in the actual count. In 2019, the last year for which an unsheltered PIT count was conducted, several youth participated in the count. Youth connected with a local LGBTQ+ youth-serving org, were trained to conduct surveys. Other formerly homeless youth, who learned about the opportunity to volunteer for the count through social media outreach, conducted surveys at food pantries.

3. Due to no unsheltered count in 2021, stakeholders were not engaged in selecting locations. In addition, the pandemic scattered youth possibly more than other groups, and finding common locations for youth experiencing homelessness has been a big challenge. In 2019, the last year for which an unsheltered PIT count was conducted, Widespread outreach took place during the planning of the PIT Count to engage youth experiencing homelessness, formerly homeless youth, and stakeholders who serve youth. The PIT Coordinator met with youth-specific providers and youth to target common gathering locations where youth experiencing homelessness were most likely to be identified. McKinney Vento (MV) Liaisons met several times prior to the PIT Count to determine best ways to gather data from the school system. Locations identified were: Youth Move (youth empowerment), The Living Room's (LGBTQ youth drop-in center) GSA Summit held at a local community college, and through the MV Liaisons.

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. The 2022 sheltered PIT Count shows an increase in adult-only emergency shelter. This increase is due to the way FEMA and ESG-CV funding was used to help protect our most vulnerable unhoused neighbors. FEMA guidelines and a local by-name list effort prioritized the most vulnerable and those with the longest homeless histories. Because our CoC has not had year-round shelter for adult-only households in the past, this additional shelter capacity was geared toward this group. While families with children were permitted in the program, most families with children self-selected family-focused shelter options. As a result, the prevalence of Chronic Homelessness among adult-only households in emergency shelters increased significantly. All households in non-congregate hotel/motel shelters have been prioritized for new, locally-funded PSH, and 170 households have already moved into PH.

A new TH program for adult-only households was added to the HIC, using local funds.

2. CoC did not conduct an unsheltered PIT count in 2022. SPM data compares the 2 most recent unsheltered PIT counts, 2019 and 2021. There were significant changes in methodology between the 2019 and 2021 unsheltered counts. For the FY 2021 PIT Clackamas County received a waiver to use Coordinated Entry (CE) data, for those waiting for services on the point in time date, in lieu of a traditional unsheltered count.

3. Based on the differences in the 2019 traditional unsheltered PIT count and the 2021 CE-based unsheltered count, the CE system is more successful at reaching and screening families with children experiencing homelessness than the traditional PIT unsheltered count efforts. There were 34 more households and 121 more people from families with children in the 2021 PIT count, compared with the 2019 PIT count.

There was a decrease from 187 to 150 households without children from the 2019 to the 2021 PIT count. This decrease can be attributed to the implementation of a RRH program dedicated to moving Chronically Homeless (CH) households, who met the FEMA definition of COVID-vulnerable, directly into Permanent Housing. A local funding source has added significant street outreach and PSH capacity, to move more people experiencing CH quickly into PH. The majority of those experiencing CH in Clackamas County are in adult-only households, and the program focused on those with the longest time homeless.

4. N/A: There were changes.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 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. CoC analyzed CE, HMIS, DV Comparable Database, and SPM data to identify risk factors that lead to first-time homelessness for individuals and families in its geographic area. CoC identified the following as primary risk factors: low income, single parent families, fleeing DV, large families, and heads of household who have a disability. In the last 18-20 months, loss of income and ability to work due to Covid were major risk factors as evidenced by CE data. The YHDP Coordinated Community Plan consulted with youth providers and youth with lived experience of homelessness to identify system involvement (Foster Care, Juvenile Justice, mental health), identifying as LGBTQ+, and pregnancy/parenting as additional risk factors for youth and young adults.

2. CoC's tiered CE assessment consists of one questionnaire designed to assess the ability of participants to divert from homelessness. This questionnaire is completed with every person who connects with CHA and is at risk of becoming homeless. This assessment includes exploring the participant's current strengths and support system, and asking the participant what they feel they need at this time to resolve their housing crisis and avoid homelessness. During the 2021-2022 FY, this assessment was completed with 1,193 different households- 5% of those callers were assigned short-term diversion case management to quickly identify stable housing and avoid homelessness.

CoC provides on-going homelessness diversion training to community partners. The most recent training was a 2-full-day convening on 9/13 and 9/14. Over 30 participants were in attendance from more than 10 community partner organizations, and the training was a collaboration between more than 5 organizations, including culturally specific orgs. This training gives providers the tools necessary to give quality, trauma-informed help to community members in crisis. CoC provides partners with regular opportunities to learn how to best serve traditionally-underserved populations. From 4/2022- present, more than \$30M in state and federal COVID Rent Relief funds have been used to help more than 1,750 households experiencing housing insecurity due to the pandemic and prevent homelessness.

3. The CoC Lead, with support from the Housing Services Steering Committee (HSSC), is responsible for overseeing CoC's strategy.

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. FY 2020-2021 SPMs show growth in LOT homeless and number of people in shelters. Prior to receiving COVID-related funds, CoC had limited shelter capacity, mostly temporary warming centers. In a few short months, COC experienced an influx of people being able to access shelter, but availability of PH options did not increase at the same rate to move people quickly from shelter.

COC's strategy to reduce LOT homeless is to increase services and PH availability. Local and state funds increased investment through funding service providers and coordinators to support Street Outreach and Housing Navigation services in county. CoC now has increased capacity to identify individuals experiencing longest LOT homeless and connect those households to services to help them overcome barriers and quickly obtain PH.

In 2020, HACC was awarded \$40Mil in Affordable Housing Bonds and 125 project-based vouchers to 3 projects. These three projects will provide a total of 414 units, of those 153 units will be for households at or below 30% AMI. Locally funded Supportive Housing Services measure (SHS) increased investment in long-term rental assistance vouchers, providing new long-term vouchers to 202 households in 21-22. SHS added at least \$32 mil annually, with a primary focus on ending chronic homelessness by 2025.

COC awards more points in ranking process to projects with policies and procedures supporting Housing First (HF). CoC is developing systems to support projects in evaluating the success of their HF policies and practices, creating a COC with consistent low barrier access to programs focused on rapid PH placements.

COC is participating in Built for Zero movement, creating by-name lists of individuals experiencing homelessness and participating in regular case conferencing to coordinate services to more effectively prioritize and address their needs. Built for Zero includes improving data collection to understand trends in order to improve prioritization process to end homelessness across populations.

2. CE and Street outreach cover 100% of CoC. Households with longest LOT homeless are identified through CE system, outreach and connections with street outreach providers, shelter providers, first responders and health systems. PSH participants on BNL are prioritized by vulnerability and LOT homeless as part of case conferencing..

3.COC Lead, with support from Housing Services Steering Committee, is responsible for overseeing strategy.

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. Data in Metric 7b.1 includes CoC’s night-by-night overflow severe weather warming centers. There is no case management attached and PH placements are not tracked. Running the report without these centers shows 63% successful exits. Warming centers hurt data results but keep people alive.

CoC strategy to increase rate that individuals and persons in families in shelter, TH, and RRH exit to PH is to invest more in support services and affordable housing and improve data analysis. Local Supportive Housing Services (SHS) funding has expanded availability of housing navigation and support, increasing the number of households who access PH quickly. In 21-22, SHS provided 202 vouchers to vulnerable homeless individuals and families. SHS’ full-time Housing Navigation Coordinator provides TA and support to service providers.

CoC collaborates with PHA to move people from homelessness to PH using Mainstream, VASH, FYI, EHV and new SHS program vouchers. CoC and PHA continue to collaborate on applications to increase voucher access for most vulnerable. PHA added 360 units of affordable housing since 3/21, including 93 units subsidized with Project Based Vouchers or PSH funds, prioritized for people experiencing homelessness.

Participation in regionally coordinated SHS investment and Built for Zero (BFZ) is requiring CoC to analyze homeless system in new ways and is helping identify flow of services and programs to end homelessness for all populations.

2. CoC strategy to increase rate that individuals and persons in families residing in PH projects retain their PH or exit to PH destinations is to invest more in support services, landlord outreach, and systems coordination. CoC has increased successful exits/retention from 97% in 2020 to 99% in 2021. SHS has increased availability of long-term vouchers with supportive case management. SHS also funds a full-time Supportive Housing Coordinator to support housing retention across the COc. CoC invests in full-time Landlord Outreach to nurture landlord relationships to obtain and retain formalized agreements to set aside units for people experiencing homelessness and develop master leasing to reduce barriers to housing access. CoC and PHA work collaboratively on move-on strategy, providing vouchers specifically for individuals and families in PSH programs who no longer need case management.

3. CoC Lead, with support of Housing Services Steering Committee is responsible for overseeing CoC’s strategy.

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. CE and street outreach (SO) cover 100% of CoC. All SO workers complete CE assessment immediately upon engagement and CE is offered at homeless day centers and through partner organizations. While the CoC does understand HUD’s approach to this measure, a local measure looks at returns to homelessness through CE data. This way, CoC can identify households that have fallen out of PH earlier, and quickly move to re-house them.

2. The COC’s process for reducing the rate of returns to homelessness is to increase funding for services, improve access to services, improve SO/CE outreach, and improve data analysis. COC assisted significantly more households in 2021 due to increased local funding and COVID-19 recovery funding. With a significantly larger sample size of households served, the returns to homelessness numbers also increased.

Upon further analysis of the data, we learned that most returns to homelessness were participants from RRH programs. One factor in RRH returns to homelessness is a data entry procedure that results in the appearance of returns to homelessness. The COC is working to clarify and re-train on data entry practices to improve data quality. The COC recognizes that RRH programs require greater funding to provide a longer period of time for households to stabilize. The COC has identified a local funding source to enhance the system wide RRH approach.

The COC has applied to significantly increase funding to Clackamas Women’s Services to support the needs of some of the most vulnerable households experiencing homelessness. Additionally, local funding has been invested in direct service support and CoC has hired a team to coordinate and support the capacity of service providers.

The COC is contracting with two culturally specific Community Service Organizations on an engagement strategy and qualitative equity analysis of its homeless service system. This will include focus groups to learn more about improving service access and responsiveness—particularly for BIPOC households.

3: The CoC Lead, supported by the Housing Services Steering Committee, is responsible for overseeing your 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. CoC uses multiple strategies to assist participants in increasing employment income, including holding CoC programs accountable via project scorecards for increasing participant income, HMIS data to identify barriers to employment, and partnering with CBOs to provide participants with educational/employment resources. CoC assists participants in removing barriers to employment, i.e., education or reliable transportation, and finding employment. For example, CoC identified criminal history as a significant barrier to increasing employment income. CoC partnered with Clackamas Workforce Partnership (CWP), the County’s Children, Family & Community Connection (CFCC) and Community Corrections divisions; Oregon Department of Human Services (ODHS); and volunteer attorneys to provide CoC participants with access to the Clean Slate Clackamas Project. The project runs clinics twice each month, offering free legal services to people seeking to expunge or “remove” criminal charges from legal records.

2. CoC has an MOU with CWP, the local workforce board. CWP focuses on populations highly impacted by homelessness. CWP and affiliated partners prioritize workforce program access for CoC participants when referred. CWP supports tailored services for people with disabilities, youth, veterans, English language learners, TANF recipients, and people on parole or probation, among others. CoC providers and CWP partners leverage resources to support participants’ return to work. Clack Co. Social Services and CFCC have dedicated staff who partner with companies and job fairs to promote work with vets, and conduct outreach at Vet Village (transitional to PH program) to support vets wishing to participate in income development.

CoC participants are supported to use Individual development account (IDA) programs to save for vehicle purchases or educational expenses that can increase their employability. IDAs are available through numerous CBOs. The PHA Family Self Sufficiency (FSS) was expanded this year and is for people who receive public housing or Section 8 to offer employment and education support to eliminate or reduce dependence on government subsidies and save money by increasing earned income. This earned income progression results in tenant rent increases that are placed into an escrow or savings account. Finally, CoC partners with ODHS on RRH and prevention for families in ODHS Jobs programs.

3. CoC Lead and Steering Committee oversee this strategy.

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. 25% of adult stayers increased non-employment cash income in FY2021, an 11% decrease over FY2020. This decrease was due to a pause in many services related to non-employment cash income during the pandemic. As the Country was in crisis, the CoC ensured participants got the unemployment and stimulus benefits they were eligible for. CoC continues to explore opportunities to increase non-employment cash income through SOAR/SSI/SSDI & federal VA benefits. 12 case managers from 5 organizations are SOAR certified. Case managers provide SOAR support, when appropriate, to clients within their programs. The county SOAR lead works with the state and other local leads to advocate for funding to support a SOAR program independent of a specific housing program. This is an effort to expand the availability of SOAR related services to all within the county who are experiencing homelessness. The County is committed to increasing funding to support SOAR applications through a specialized non-profit provider. RFPs for this work are expected in FY2023.

The state recently adopted a centralized application for SNAP, TANF, Medicaid, etc. Representatives from the state Department of Human services presented about this new option at a CoC sub-committee meeting with many homeless services providers.

DV survivors enrolled in CoC programs and/or waiting for placement on the DV waitlist, are supported in increasing non-employment cash income through facilitation and support to access public benefits such as TANF, SSI/SSD and Temporary Assistance to Domestic Violence Survivors (TADVS). Clackamas Women's Services (CWS), employs three full-time co-located DV Advocates, housed at each of our two county Department of Human Services Self Sufficiency offices who aid survivors to apply for these benefits. These advocates provide wrap-around support services to all applicants applying for these benefits and identifying as experiencing domestic violence. These supports include providing immediate access to diversion services as well as the Coordinated Housing Assessment and CoC waitlists.

Program staff support participants in seeking child and/or spousal support payments that have been directed by the courts. A DHS Self Sufficiency Branch Manager regularly participates in CoC meetings and updates providers on TANF and General Assistance eligibility and application process.

2. The CoC Lead, with support of the Steering Committee, is responsible for overseeing this strategy.

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?	Yes
--	--	-----

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
CWS RRH Expansion...	PH-RRH	17	Both

3A-3. List of Projects.

1. What is the name of the new project? CWS RRH Expansion-FY 22-CoC Bonus Project

2. Enter the Unique Entity Identifier (UEI): D5XHD5DNL3J9

3. Select the new project type: PH-RRH

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

5. Select the type of leverage: Both

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;
- 24 CFR part 578;
- 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

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

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	Yes
2.	PH-RRH or Joint TH and PH-RRH Component	No

You must click "Save" after selecting Yes for element 2 PH-RRH or Joint TH/RRH Component to view questions 4A-3b. through 4A-3h.

4A-2.	Information About the Project Applicant for the New Support Services Only Coordinated Entry (SSO-CE) DV Bonus Project.	
	NOFO Section II.B.11.(e)(2)	

Enter in the chart below information about the project applicant applying for the new SSO-CE DV Bonus project:

1.	Applicant Name	Clackamas Women's Services
2.	Project Name	CWS SSO FY22- Expansion DV bonus Project
3.	Project Ranking on Priority Listing	18
4.	Unique Entity Identifier (UEI)	D5XHD5DNL3J9
5.	Amount Requested	\$180,143

4A-2a.	Addressing Coordinated Entry Inadequacies through the New SSO-CE DV Bonus Project.	
	NOFO Section II.B.11.(e)(2)(c)	

Describe in the field below:

1.	the inadequacies of your CoC's current Coordinated Entry that limits its ability to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking; and
2.	how the proposed project addresses inadequacies identified in element 1 of this question.

(limit 2,500 characters)

1. Domestic violence, dating violence, sexual assault, and stalking (DV) survivors often have limited windows of time to seek services, and when they do, they may need to flee quickly. Survivors often seek services in person for safety reasons. The general CE requires households to call a centralized line and leave a message. Messages are meant to be returned within 3 days but the wait for a call back may be longer, as County employees are limited to a four-day workweek. Clackamas Women's Services (CWS), the CoC's DV "door," provides a crisis support hotline answered 24/7 by a live person trained in both DV and housing. Everyone who answers the hotline is a certified confidential advocate and trained to fill out an intake for CoC's CE, called coordinated housing access (CHA). Calls to the CE system and the number of victims walking in to receive crisis services, including housing, continue to increase as evidenced by 4A-3 unmet need of 831 survivors needing housing services.

2. This project will add CE capacity to respond to the increasing number of calls as well as add mobile confidential DV advocates to provide easily accessible CE services to the rural community and to walk-ins at A Safe Place Family Justice Center (ASP).

Through CWS, survivors speak to advocates with expertise on the impacts of DV and the supportive services available. All services offered by CWS are trauma-informed and voluntary. CWS also offers advocacy, legal services, Latinx services, counseling, support groups, and youth services. While most of these services are provided at ASP alongside partner agencies such as law enforcement, the Department of Human Services (DHS), and more, CWS also has advocates co-located at DHS offices, CC Behavioral Health, and School-Based Health Centers. This expands the supportive services offered to survivors and the entry points for survivors in need of housing. CWS has developed the infrastructure and the relationships to support culturally specific agencies and programs serving DV survivors in our CoC. CWS fills out the paperwork and manages the connection with the CoC, the aspects that were challenging for these providers. This system was developed jointly. CWS has staff members in the Shelter and Housing Program who speak Spanish, Russian, Farsi, and Arabic, in addition to English.

	4A-2b. Plan to Involve Survivors in Policy and Program Development in the New SSO-CE DV Bonus Project.	
--	--	--

NOFO Section II.B.11.(e)(2)(d)

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

(limit 2,500 characters)

Clackamas Women’s Services consistently incorporates and centers the voices and ideas of individuals with a range of lived expertise into policies and practices at all levels of the organization. In addition to anonymous feedback forms, CWS invites survivors for an interview, a relational process for cultivating feedback. Also, there are several formal groups comprised of individuals with lived experience to provide insight into decision-making. VOICES is a survivor-led committee that volunteers their time to celebrate their strength and survival. They use their voices to help others through advocacy, education, and empowerment. They support each other and incoming clients, identify gaps in services, and provide invaluable feedback on service delivery and policies from their lived expertise. Latina Leadership Team aims to develop leadership skills and raise the voices of Latina staff and participants. This team accomplishes the latter through outreach to the community, drawing from survivor feedback to identify barriers to services and develop solutions to ensure equitable access.

CWS has intentionally expanded decision-making roles and processes to be more inclusive. Last year alone, eight new leadership positions were created. 40% of the Board of Directors and 60% of agency staff identify as having lived experience with domestic violence and/or homelessness. The Culturally Specific Housing Coordinator is a great example of how the agency integrates both the voices of those with lived experience and implements equity-based policies. Once this position was created, Liliana Weismann, a bilingual/bicultural case manager, was promoted to it. The creation and promotion were, in part, due to an acknowledgment of the work she was doing to network and provide technical assistance to culturally specific partner programs and a result of feedback from participants and culturally specific programs themselves. Some CWS participants and culturally specific providers are monolingual Spanish speakers. Without a Spanish speaker in housing-specific leadership, they felt they could not communicate or give feedback in the same way English speakers were able to. To meet this identified need and honor Liliana’s efforts, she is now the Culturally Specific Housing Coordinator, and part of CWS’ leadership. She is having great success moving forward with CWS’ goals to prioritize those who experience discrimination at both an individual and systemic level.

Applicant Name
This list contains no items

4B. Attachments Screen For All Application Questions

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

- | | |
|----|---|
| 1. | You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete. |
| 2. | You must upload an attachment for each document listed where 'Required?' is 'Yes'. |
| 3. | We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube. |
| 4. | Attachments must match the questions they are associated with. |
| 5. | Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. |
| 6. | If you cannot read the attachment, it is likely we cannot read it either. |
| | <ul style="list-style-type: none"> . 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...	09/26/2022
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/26/2022
1E-1. Local Competition Deadline	Yes	Local Competition...	09/26/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/27/2022
1E-2a. Scored Renewal Project Application	Yes	Scored Renewal Pr...	09/26/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/26/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/26/2022
1E-5b. Final Project Scores for All Projects	Yes	Final Project Sco...	09/26/2022
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting—CoC-A...	09/28/2022
1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	09/29/2022
3A-1a. Housing Leveraging Commitments	No	Committment Lette...	09/26/2022

3A-2a. Healthcare Formal Agreements	No	Project Health Ca...	09/27/2022
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Renewal Project Application

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: Web Posting–CoC-Approved Consolidated Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: Commitment Letter- leveraging housing resources

Attachment Details

Document Description: Project Health Care Leverage

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/20/2022
1B. Inclusive Structure	09/29/2022
1C. Coordination and Engagement	09/29/2022
1D. Coordination and Engagement Cont'd	09/29/2022
1E. Project Review/Ranking	09/29/2022
2A. HMIS Implementation	09/29/2022
2B. Point-in-Time (PIT) Count	09/29/2022
2C. System Performance	09/29/2022
3A. Coordination with Housing and Healthcare	09/29/2022
3B. Rehabilitation/New Construction Costs	09/29/2022
3C. Serving Homeless Under Other Federal Statutes	09/29/2022

4A. DV Bonus Project Applicants	09/29/2022
4B. Attachments Screen	09/29/2022
Submission Summary	No Input Required

be allowed to participate in the program. Applications from MOU Referring agencies denied due to these reasons still count towards the total allowed to be referred for a preference.

HACC holds the right to close the preference wait list at any time due to lack of available vouchers.

Preferences 1-5 will be served before Preferences 6-11. Preferences 6-11 households will be served based on date and time of placement on the preference wait list. HACC preferences are as follows:

1. Any family that has had their voucher rescinded due to insufficient program funding will always be served before all other preference or wait list families.
2. Project Based Voucher families that have lived in their unit no less than one year **and** have requested a Tenant Based Voucher **before giving notice to vacate** will be issued a voucher before all other preference families can be served.
3. Eligible families displaced from Housing Authority owned units due to acquisition or sale of property, demolition or rehabilitation work. This preference may include residents of HACC owned local projects that have to be relocated due to a change in the population to be served at the units, rehabilitation, or sell of units. These families will be allowed to move with debts owed as long as they sign a payment agreement and are current on all payments. These families will only be issued a voucher according to the HCV Occupancy Standard of 2 per room and not based on the unit size they currently occupy.
4. Families currently in the Public Housing program who have met the requirements for an emergency or administrative transfer but whose needs cannot be met within the Public Housing program through relocation.
5. HACC Public Housing Families who are under housed, over housed or in need of reasonable accommodation that Public Housing cannot accommodate through relocation.
6. Maximum of 33 dedicated vouchers to serve homeless persons per fiscal year (FY) (July 1st to June 30th). Families must be homeless at time of application. This preference can only come from direct referring agencies that have signed a Memorandum of Understanding (MOU) outlining the services to be offered to those referred. The referrals must originate from the Coordinated Housing Access (CHA) system and have an HMIS identification number to show an intake was completed. To be referred households must be actively engaged in services at time of voucher issue. Referring agencies are limited to no more than 5 referrals from July 1-December 31. Starting January 1 remaining available vouchers will be distributed first come, first served order. Unused Preference slots do not carry over to the next fiscal year.

7. Maximum of 17 dedicated vouchers within a fiscal year (July 1st to June 30th) for families referred by a domestic violence professional counseling organization and/or shelter, for victims of domestic violence that has occurred within the last 12 months and are certified as homeless by the agency and who continue to be in counseling or case management through the referring agency or other professionally recognized counseling organization. Referrals from agencies that have signed an MOU outlining the services to be offered to their referral families will only be accepted. The applicant must certify that the abuser will not reside with the applicant unless the PHA gives prior written approval. Applicants will be served on a first come, first served basis. Unused Preference slots do not carry over to the next fiscal year.
8. Maximum of 10 dedicated vouchers per year within a fiscal year (July 1st to June 30th) for households referred by a provider that has entered into a Supportive Services MOU with HACC and applicant has been deemed by the provider to be in less need for supportive services. The household must be considered a candidate that is graduating off the PSH and that at time of entry into the PSH program were homeless and/or disabled. Unused Preference slots do not carry over to the next fiscal year. Referring agencies are limited to no more than 5 referrals from July 1-December 31. Starting January 1 remaining available vouchers will be distributed first come, first served order. Unused Preference slots do not carry over to the next fiscal year.
9. Shelter Plus Care families may graduate to a regular voucher if the grant changes making them no longer qualify for assistance under the revised grant or if services are no longer needed and family is fully stabilized as shown by having passed inspections consistently, no eviction threats, income (cannot be zero income) and any necessary established service connections.
10. For Mainstream Vouchers only, preference will be given to non-elderly persons with disabilities transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless or at risk of becoming homeless who are referred by an agency with an active MOU to provide supportive services. Homeless status must be met at time of application.
11. Eligible Clackamas County families who have been displaced from their homes by a natural disaster as declared by the Federal, State or County government who have not been eligible for long term assistance including but not limited to federal assistance such as Federal Emergency Management Agency (FEMA), State or local government assistance, insurance settlements, or the like, and who face long term homelessness. Those families seeking any compensation or settlement that may come in the future may not apply until all legal recourse has been resolved. Families receiving temporary assistance such as motel vouchers may apply if no other legal negotiation for compensation is under consideration. This preference is limited to 10 Families that can be confirmed by Clackamas County EOC to

Annual Notice of Funding Opportunity: Continuum of Care

Date: 8/10/2022

On Aug. 1, the U.S. Department of Housing and Urban Development released the annual **Continuum of Care (CoC)** Notice of Funding Opportunity (NOFO). The intent is to fund programs that move people from homelessness into permanent housing. This is separate from the **special NOFO that is also currently open**.

The project deadline is Monday, Aug. 29 at 11: 59 p.m. Applications should be submitted through the ESNAPS portal. They will be reviewed by Clackamas County's CoC Steering Committee.

Types of projects can include:

- Rapid rehousing
- Permanent supportive housing
- Rental subsidy
- Case management
- Housing placement
- Youth Homelessness Demonstration Program

All agencies planning to or considering applying are encouraged to read the **NOFO** in full. This year, funds can be used to renew or expand existing programs, consolidate two projects, move towards a different program type, or create a new project.

For more information, please email Raina Smith-Roller (rsmithroller@clackamas.us), with your name, agency and email address.

Please sign up for technical assistance

In order to help providers better understand the requirements and application, we are holding two technical assistance sessions. All applications must be submitted through the ESNAPS portal and complete a project scorecard. Project scorecards will be available soon. The technical assistance session will help you with this process.

Join us live or watch the recorded sessions at www.clackamas.us/communitydevelopment/cchp.html

- Wednesday, Aug.17 from 10 a.m. to noon. Join via Zoom link
- Tuesday, September. 6 from 3 to 5 p.m. Join via Zoom link

Continuum of Care Application

The CoC submits an annual application to the U.S. Department of Housing and Urban Development (HUD) articulating the CoC's planning efforts and other activities within Clackamas County which relate to homeless people. To get a copy of this application, contact the Clackamas County Community Development Division at 503-655-8591.

The project application deadline is Monday, Aug. 29, 2022 at 11: 59 p.m.

Applications should be submitted through the ESNAPS portal. They will be reviewed by Clackamas County's CoC Steering Committee.

For more information, please email Raina Smith-Roller at rsmithroller@clackamas.us with your name, agency and email address.

NOFA Priority Listing		2021
Consolidated Application		2021
Ranking and Selection Process		2021
Local Priority Listing		2021
Rating and Ranking Score Cards	2022	2021

Facebook

 **Clackamas County, Oregon** ✓
August 18 at 3:34 PM · 🌐

New: Apply for annual funding from [U.S. Department of Housing and Urban Development](#) for programs that move people from homelessness into permanent housing! The deadline is Aug. 29. Find all the info here:

CLACKAMAS.US 

Annual Notice of Funding Opportunity: Continuum of Care | Clackamas County

  2

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 **Clackamas County, OR** ✓
[@clackamascounty](#)

New: Apply for annual funding from [@HUDgov](#) for programs that move people from homelessness into permanent housing! The deadline is Aug. 29. Find all the info here: bit.ly/3Cf42hl

4:03 PM · Aug 18, 2022 · Sprout Social

1 Like

Skinner, Erin

From: SmithRoller, Raina
Sent: Wednesday, August 24, 2022 12:08 PM
Cc: Brown, Vahid; Skinner, Erin; Ahern, Abby; Okeke, Claire
Subject: FY 2022 CoC NOFO- Local Competition DEADLINE EXTENDED to Tuesday, August 30th, 11:59pm

Importance: High

Hello CoC Applicants,

I wanted to inform you that, due to HUD delays in getting Project Applications in esnaps, as well as delays in the release of Detailed Instructions, we have decided to extend the local competition deadline by one day. Unfortunately this is not much extra time, but it is all we have the ability to do. We recognize this is still a very tight timeline, and hope the additional day helps some. **The new deadline for all Project Applications, to be submitted in esnaps, and completed Score Cards returned by email, is Tuesday, August 30th, by 11:59pm.**

Thank you all for the important work you do, and I look forward to receiving your applications and completed Score Cards.

Please do not hesitate to reach out with questions.

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

Annual Notice of Funding Opportunity: Continuum of Care

Date: 8/10/2022

Update 8/24/22: Deadline was changed from Aug. 29 to Aug. 30.

On Aug. 1, the U.S. Department of Housing and Urban Development released the annual **Continuum of Care (CoC)** Notice of Funding Opportunity (NOFO). The intent is to fund programs that move people from homelessness into permanent housing.

The project deadline is Tuesday, Aug. 30 at 11: 59 p.m. Applications should be submitted through the ESNAPS portal. They will be reviewed by Clackamas County's CoC Steering Committee.

Types of projects can include:

- Rapid rehousing
- Permanent supportive housing
- Rental subsidy
- Case management
- Housing placement
- Youth Homelessness Demonstration Program

All agencies planning to or considering applying are encouraged to read the **NOFO** in full. This year, funds can be used to renew or expand existing programs, consolidate two projects, move towards a different program type, or create a new project.

For more information, please email Raina Smith-Roller (rsmithroller@clackamas.us), with your name, agency and email address.

Please sign up for technical assistance

In order to help providers better understand the requirements and application, we are holding two technical assistance sessions. All applications must be submitted through the ESNAPS portal and complete a project scorecard. Project scorecards will be available soon. The technical assistance session will help you with this process.

Join us live or watch the recorded sessions at

www.clackamas.us/communitydevelopment/cchp.html

- Wednesday, Aug.17 from 10 a.m. to noon. Join via Zoom link
- Tuesday, September. 6 from 3 to 5 p.m. Join via Zoom link

Guide Page

Volunteering and Getting Involved
Housing Resources

Continuum of Care Application

The CoC submits an annual application to the U.S. Department of Housing and Urban Development (HUD) articulating the CoC's planning efforts and other activities within Clackamas County which relate to homeless people. To get a copy of this application, contact the Clackamas County Community Development Division at 503-655-8591.

The project application deadline is Tuesday, Aug. 30, 2022 at 11: 59 p.m. Applications should be submitted through the ESNAPS portal. They will be reviewed by Clackamas County's CoC Steering Committee.

For more information, please email Raina Smith-Roller at rsmithroller@clackamas.us with your name, agency and email address.

Update 8/24/22: Project application deadline was changed from Aug. 29 to Aug. 30.

NOFA Priority Listing		2021
Consolidated Application		2021
Ranking and Selection Process		2021
Local Priority Listing	2022	2021
Rating and Ranking Score Cards	2022	2021
Scoring Rubric for Narrative Questions	2022	

Clackamas County Continuum of Care - FY2022 Ranking Process

Clackamas County CoC monitors project performance during APR review prior to submission, through regularly scheduled data quality and bed utilization reports, and as part of the evaluation, review, scoring and ranking process. Before working on updating score cards, Coordinated Entry, PIT count, and equity analysis data was examined to determine local needs. The score cards used for the CoC ranking process are also completed and evaluated by the Housing Services Steering Committee (HSSC), formally known as the CoC Steering Committee (CoCSC), as part of mid-year program and system performance evaluation. If the HSSC determines that a program is underperforming the HSSC will support programs to improve performance, following the CoC Corrective Action Process as per the CoC Bylaws. DV providers are scored on objective criteria data from comparable database.

At regular HSSC meetings all five score cards were updated. **Objective Criteria, used in review, ranking and selection** to determine future program success, was different based on the type of score card used:

For all Score Cards the following revisions were made to align with local and HUD priorities:

- **Revised narratives:** Healthcare collaboration, increased points.
- **Added narrative:** Ability to serve outside of the urban growth boundary (UGB) questions*. The UGB question was not scored this year, but provided information on how to increase services in rural parts of Clackamas County.
- **Revised narrative:** Description of equity and inclusion strategies. Significantly increased points for equity and inclusion (from 10 to 33 total points). Added additional equity questions.
- **Added narrative:** Added narrative question related to Housing First policies and practices. Increased points associated with Housing First question (from 1 to 10 total points).

The following elements are within each Score Card:

- **New Project Applications-** basic threshold requirements (such as HMIS, CE, and Equal Access); HUD application requirements (such as eligible activities, project type); local goals (Increase RRH and Dedicated CH beds, project that serves non-Chronic single adults, commitment to using Housing First approach with no service participation requirements or preconditions, Culturally Specific Organization and/or Culturally Specific Project); and narratives (agency administrative capacity, success with federal grants, experience working with homeless populations, program plans to positively contribute to HUD's System Performance Measures, description of their equity and inclusion strategies, ability to serve outside of the urban growth boundary, Housing First, collaboration with healthcare)
- **First-year Renewal Projects-** Steps taken to be incorporated into CE System; drawdowns (projects that are within 1 month of starting operating year have hired staff); HMIS data quality (getting new staff training in policies and procedures, data entry); submission by agency of Housing Inventory Form to HMIS staff; Participation in CoC meetings; increased or maintained income (staff member registered or completing SOAR training); HUD application requirements (such as eligible activities, project type); local goals (increase RRH and Dedicated CH beds, project that serves non-Chronic single adults, Commitment to using Housing First approach with no service participation requirements or preconditions, Culturally Specific Organization and/or Culturally Specific Project); and narratives

Clackamas County Continuum of Care - FY2022 Ranking Process

(description of their equity and inclusion strategies, ability to serve outside of the urban growth boundary, Housing First, collaboration with healthcare)

- **Standard Renewal Projects**- unresolved HUD findings, on-time APR submission, eLOCCS drawdown rates, **System Performance**: HMIS data quality, bed utilization rates, exits to permanent housing, and increasing participant incomes, narratives (description of equity and inclusion strategies, ability to serve outside of the urban growth boundary, Housing First, and collaboration with healthcare)
- **Youth Renewal Projects**- evaluated based on the same criteria as Standard Renewal with 2 exceptions: The income measure was adapted to include increased/maintained income AND/OR attending school or training program

Up-to-date past performance data was used for all applications for which the data was available, including all Youth and Standard renewal projects. Data was pulled from projects' most recently completed program year. **Target population, housing component type, number of households to be served, and cost effectiveness** were some of the **objective criteria** included on all score cards. All new and renewal projects were scored on narrative responses related to equity, housing first, and healthcare collaboration efforts. Potential bonus points were awarded to new and renewal projects that met each of the following criteria:

- 100% Dedicated Chronically Homeless beds or Dedicated PLUS beds, intended to serve participants with severe barriers.
- Increases overall RRH beds
- Applicant is a Culturally Specific Organization and/or Project is Culturally Specific

Bed utilization rates, exits to permanent housing destinations, and increasing participant income, are the **factors related to achieving positive housing outcomes and factors related to improving system performance** that were explicitly evaluated using the attached score card. In order to ensure projects are in **compliance with 24 CFR part 578**, eLOCCS drawdown rates and timely APR submittal are considered, while funds recaptured by HUD and monitoring/audit findings are scored. The score card was filled in by CoC staff using HMIS and project application data, and project staff provided answers to the narrative section.

Score Cards award points for projects that address severe barriers to accessing housing and services: This includes questions tied to Housing First policies and practices; points associated with increasing cash and non-cash benefits; collaboration with healthcare organizations; and points tied to projects serving Chronically Homeless households.

Each of the score cards used is attached below. All new and renewal project applications were submitted through Esnap to the CoC by the deadline set by the CoC, August 30th, 2022. The projects included in our FY2022 CoC Application were monitored, evaluated, reviewed, scored, accepted, and ranked on September 8th, 2022. Minutes of this and other HSSC meetings are available to the public.

Clackamas County Continuum of Care - FY2022 Ranking Process

New Project Applications

Extensive outreach was done to encourage new applicants. Unfortunately due to this year's accelerated timeline, no new agencies chose to apply. We did receive the following two new project applications from an existing service provider, to expand renewal projects for DV survivors. **The HSSC recognizes the particular vulnerability of abuse/victimization or a history of victimization/abuse, domestic violence, and sexual assault that people served through victim service providers have experienced and encouraged new applicants to apply for programs with a target population of DV survivors, including survivors of sexual assault.** Note: while these two projects initially ranked in Tier 1, the HSSC determined that an evaluation of local needs warranted prioritization of existing Renewal projects over Expansion projects. This year, expansion project applications were evaluated differently than renewal projects. The HSSC recognizes the importance of evaluating all projects based on their ability to effectively meet local needs and HUD priorities, and reallocates as necessary. Had new project applications been received outside of expansions, those new projects would have been evaluated to determine how they meet local needs and HUD priorities and ranked appropriately.

Rapid Rehousing (RRH) Expansion (Expansion) Project: The CoC received one new Rapid Rehousing (RRH) project application, to expand a renewal project. This project is ranked as a CoC Bonus Project. The CoC has a long-standing relationship with VSPs in our region, and has a specific method for evaluating projects submitted by VSPs. Once the blank score card was finalized by HSSC, it was emailed to VSPs to fill in using data generated from their comparable database. This project was screened for the **degree to which it improved safety for the population served**. The narratives in their application and score card clearly demonstrated the deep thinking and commitment each organization has for the safety of their participants. This project leverages non CoC and ESG funding housing and healthcare resources.

Supportive Services Only-Coordinated Entry (SSO-CE) Expansion Project: The CoC received one new SSO-CE Expansion project, to expand a renewal project. This project is ranked as a DV Bonus Project. This project was screened for the **degree to which it improved safety for the population served**. The narratives in their application and score card clearly demonstrated the deep thinking and commitment each organization has for the safety of their participants. If selected for funding, this SSO-CE project would significantly increase capacity to reach and rapidly connect DV survivors, including survivors of sexual assault, to housing.

Renewal Project Applications:

Thirteen Ranked Renewal Projects: The HSSC received 13 renewal applications. Each were evaluated on performance, their ability to positively contribute to local and HUD priorities, and meet the needs of the community.

Three Projects Ranked but Not Scored: There were a few projects that could not be evaluated or had outcomes that could not be compared with the other CoC projects. **Coordinated Housing Access (CHA), CWS Coordinated Entry and Homeless Management Information System (HMIS)** could not be evaluated in a meaningful way to compare with the other projects because these projects do not serve participants in the same

Clackamas County Continuum of Care - FY2022 Ranking Process

way as TH, RRH or PSH projects. CHA, our Coordinated Entry, screens for the other programs and HMIS is used to collect and analyze data. For Coordinated Entry and HMIS, The HSSC decided that projects which are necessary for the success of the whole continuum need to be included at the top of Tier 1.

Projects Accepted but Not Ranked: As per instructions in the FY2022 CoC NOFO, 2 YHDP Replacement Projects were accepted but not ranked. The CoC Planning application was also reviewed for threshold compliance and quality of narrative response, but was not ranked.

Rejected or Reduced Projects: No projects were rejected or reduced during the FY2022 Ranking Process.

*ability to serve outside of the urban growth boundary – In May 2020, voters in greater Portland approved Measure 26-210 to fund services for people experiencing or at risk of homelessness within the urban growth boundary. Clackamas County is estimated to receive over \$25million annually to serve people experiencing homelessness within the metro area. While CoC funds will still be utilized in all areas of the county, we want to ensure that there is adequate capacity to serve rural communities.

Score Card for New Project Applications

(Including bonus and reallocation)

Project Name: _____ Date: _____

Assistance Type	Target Population	# of Units Proposed	Households to Serve

1.	Minimum Project Thresholds (CoC and HUD Priorities)	Meets all Y/N
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1. Willing and able to participate in CHA: YES ____ NO ____
2. Willing and able to participate in HMIS (or an equivalent, if DV provider): YES ____ NO ____
3. Agrees to all CoC policies and practices: YES ____ NO ____
4. Housing First, **with no service participation requirements or preconditions** (limited exception for sober living projects) YES ____ NO ____
5. Equal Access YES ____ NO ____
6. Application includes only eligible activities and expenses
 - a. Program component type is allowed under the FY2022 NOFO: YES ____ NO ____
 - b. All Budget Line Items must be allowable under the FY2022 NOFO & clearly explained: YES ____ NO ____
7. Application amount plus match (Budget) reasonably reflects the proposed scope of work: YES ____ NO ____
8. Application is complete by the designated due date with no missing items: YES ____ NO ____

Meets Minimum Threshold: _____

2.	Other HUD and CoC Criteria	Maximum Points: 4
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1. Dedicated Chronically Homeless (CH) beds/ Increase overall Rapid Rehousing (RRH) beds (2 points)
 - a. YES ____ NO ____
2. Application is for a project that serves non-Chronic single adults? (2 points)
 - a. YES ____ NO ____

Total HUD and CoC Criteria Points: _____

3.	Project Narrative	Maximum points: 96
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1. Describe (in less than ½ page), your proposed project, including services provided, population served, and proposed number served. Please do not describe your organization, but rather the specific project you are proposing. (Not Scored)

2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; these organizations demonstrate intimate knowledge of lived experience of the community. Programs which can effectively respond to the needs of different cultural communities within Clackamas County are important to the overall health and responsiveness of our system. In order to increase culturally specific services, and encourage culturally specific providers to apply, additional points are awarded under this category.

Score Card for New Project Applications

Please select the category appropriate to your program, if applicable (up to 4 points):

2.1 Applicant is a Culturally Specific Organization (4pts) _____

2.2 Applicant is not a Culturally Specific organization, but services provided under this project are Culturally Specific (2pts) _____

3. ***The CoC definition of equity: an on-going process of learning to acknowledge our biases, being flexible, and adapting services and policies to eliminate discrimination and disparities in the delivery of human services. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff.***

3.1 Please provide a brief narrative (no more than 1/2 page) describing your program's policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (11points)

3.2 Please provide a brief narrative (no more than 1/2 page) describing your program's efforts to center individuals with lived experience of homelessness and/or discrimination based on race, gender, or disability in your organization's decision-making. (11 points)

3.3 Please provide a brief narrative (no more than 1/2 page) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (11 points)

Examples include, but are not limited to:

- *Example #1: A program creates a policy to ensure hearing-impaired individuals do not experience barriers accessing and receiving services.*
- *Example #2: A program implements a strategic training plan to increase awareness and competency of racism, implicit bias, ableism, LGBTQIA+ issues, and other held identities experiencing disparities accessing services.*
- *Example #3: An organization maintains a robust employee-lead committee that supports an organizational culture centered on equity and inclusion in the workplace.*
- *Example #4: An organization has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions*
- *Example #5: An organization's board of directors includes representation from more than one person with lived experience*
- *Example #6: An organization has relational process for receiving and incorporating feedback from persons with lived experience*
- *Example #7: New project has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers that exacerbate disparities and outcomes*
- *Example #8: Demonstration of cultural responsiveness: culturally responsive organizations value diversity, understands differences and develops services and supports to meet the unique needs of each community such as having bilingual and bicultural employees.*

4. Please provide a brief narrative (no more than 1 page) describing how your program will work closely with public and private healthcare organizations to meet participant needs. This may include, but is not limited to: assistance with obtaining medical insurance; connecting participants to primary care providers; and connecting to medical homes. If your program does not currently do this, please describe how you plan to establish

Score Card for New Project Applications

collaborative relationships with healthcare providers in order to address healthcare needs, and support permanent housing outcomes. (12 points)

5. **Housing First:** All projects must fully follow a Housing First approach, with limited exception for sober housing projects. Sober housing projects must demonstrate how they prevent denial for, or exit from, housing based on current or past substance use. Projects will be scored based on the quality and completeness of their answer. (10 points maximum)

5.1 Project is committed to using Housing First approach with no service participation or pre-conditions?

YES ___ NO ___

5.2 Describe (in less than 1 page) your experience utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) termination policy. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that participant is terminated in only the most severe cases. Describe what policies and practices you have in place to align with a Housing First approach.

6. **Serving Participants in Rural Clackamas County:** This section will not be scored this year but will likely factor into scoring in future competition years. Information provided will help us strategize shifting CoC funds to rural Clackamas County:

6.1 Please provide a brief narrative (no more than ½ a page) describing your organization’s capacity, and plan to, serve participants outside of the Urban Growth Boundary (UGB)/in rural parts of Clackamas County. Examples may include (but are not limited to), plans to establish satellite office(s) in rural area(s), increased outreach, establishing formalized partnerships with rural agencies, developed/developing relationships with landlords and organizations in rural areas, etc.

6.2 Estimated percentage of funds that you anticipate could be allocated to participants outside of Urban Growth Boundary (UGB)/in rural Clackamas County, by end of project operating year.

0-24% _____

25-49% _____

50-75% _____

6.3 What supports, if any, would your organization need to increase services in rural Clackamas County?

7. Please provide a brief narrative (no more than ½ page) describing your agency’s administrative capacity (data-tracking, software/HMIS) to implement this program. (9 points)
8. Please provide a brief narrative (no more than ½ page) describing your agency’s experience and documented success working with complicated federal grants. Please include information about compliance with federal regulations, ability to draw down all funds, and ability to keep all beds full while complying with federal and local regulations. (8 points)

Score Card for New Project Applications

9. Please provide a brief narrative (no more than 1 page) describing your agency and staff's experience working with homeless populations, including your agency's guiding principles. Please include information about how your agency has demonstrated participant success securing and maintaining permanent housing and increasing cash and non-cash income. (10 points)

10. Please provide a brief narrative (no more than 1 page) describing how your program plans to positively contribute to HUD's System Performance Measures: quickly move people from homelessness to permanent housing; ensure participants exit to/maintain permanent housing (for PSH projects) or retain permanent housing after program completion (for RRH projects); ensure participants graduating programs do not return to homelessness; ensure participants increase income during program participation. (10 points)

Total Project Narrative Points: _____

Total Score: _____

Any project submitting either score card or application through Esnaps after the CoC-imposed deadline will have an automatic penalty of 5 points subtracted from their total score, listed above.

Clackamas County Continuum of Care

New Project Renewal – Projects that are up for renewal, but have not yet started their first project year
 Ranking Criteria– **2022**

Project Name: _____

Date: _____

Assistance Type	Target Population	Number of Units (single site)/ Proposed Project Participation (scattered site)	Households Served

Budget Information:

Amount of HUD CoC Contract/Award: Not including Admin	\$
HUD CoC Admin:	\$
Total Program Budget: Please list all cash funding sources including and beyond stated match	\$

Clackamas County Continuum of Care

New Project Renewal

Project Ranking Criteria – 2022

1. Equity and Local Needs	Maximum points: 59
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1. Describe (in less than ½ page), your proposed project, including services provided, population served, and proposed number served. Please do not describe your organization, but rather the specific project you are proposing. (Not Scored)
2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; these organizations demonstrate intimate knowledge of lived experience of the community. Programs which can effectively respond to the needs of different cultural communities within Clackamas County are important to the overall health and responsiveness of our system. In order to encourage culturally specific organizations to apply, extra points will be awarded to providers and projects which fulfill this criteria.

Please select the category appropriate to your program, if applicable (up to 4 points):

2.1 Applicant is a Culturally Specific Organization (4 points) _____

2.2 Applicant is not a Culturally Specific organization, but services provided under this project are Culturally Specific (2 points) _____

3. **The CoC definition of equity is: *an on-going process of learning to acknowledge our biases, being flexible, and adapting services and policies to eliminate discrimination and disparities in the delivery of human services. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff.***

3.1 Please provide a brief narrative (no more than 1/2 page) describing your program’s policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (11points)

3.2 Please provide a brief narrative (no more than 1/2 page) describing your program’s efforts to center individuals with lived experience of homelessness and/or discrimination based on race, gender, or disability in your organization’s decision-making. (11 points)

3.3 Please provide a brief narrative (no more than ½ page) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (11 points)

Examples include, but are not limited to:

- *Example #1: A program creates a policy to ensure hearing-impaired individuals do not experience barriers accessing and receiving services.*
- *Example #2: A program implements a strategic training plan to increase awareness and competency of racism, implicit bias, ableism, LGBTQIA+ issues, and other held identities experiencing disparities accessing services.*

Clackamas County Continuum of Care

New Project Renewal

Project Ranking Criteria – 2022

- *Example #3: An organization maintains a robust employee-lead committee that supports an organizational culture centered on equity and inclusion in the workplace.*
 - *Example #4: An organization has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions*
 - *Example #5: An organization's board of directors includes representation from more than one person with lived experience*
 - *Example #6: An organization has relational process for receiving and incorporating feedback from persons with lived experience*
 - *Example #7: New project has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers that exacerbate disparities and outcomes*
 - *Example #8: Demonstration of cultural responsiveness: culturally responsive organizations value diversity, understands differences and develops services and supports to meet the unique needs of each community such as having bilingual and bicultural employees.*
4. Please provide a brief narrative (no more than 1 page) describing how your program will work closely with public and private healthcare organizations to meet participant needs. This may include, but is not limited to: assistance with obtaining medical insurance; connecting participants to primary care providers; and connecting to medical homes. If your program does not currently do this, please describe how you plan to establish collaborative relationships with healthcare providers in order to address healthcare needs, and support permanent housing outcomes. (12 points)
5. **Housing First:** All projects must fully follow a Housing First approach, with limited exception for sober housing projects. Sober housing projects must demonstrate how they prevent denial for, or exit from, housing based on current or past substance use. Projects will be scored based on the quality and completeness of their answer. (10 points maximum)
- 5.1 Project is committed to using Housing First approach with no service participation or pre-conditions? YES____ NO____
- 5.2 Describe (in less than 1 page) your experience utilizing a Housing First approach. Include 1) eligibility criteria; 2/ process for accepting new clients; 3) termination policy. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that participant is terminated in only the most severe cases. Describe what policies and practices you have in place to align with a Housing First approach.
6. **Serving Participants in Rural Clackamas County:** This section will not be scored this year but will likely factor into scoring in future competition years. Information provided will help us strategize shifting CoC funds to rural Clackamas County:
- 6.1 Please provide a brief narrative (no more than ½ a page) describing your organization's capacity, and plan to, serve participants outside of the Urban Growth Boundary (UGB)/in rural parts of Clackamas County. Examples may include (but are not limited to), plans to establish satellite

Clackamas County Continuum of Care

New Project Renewal

Project Ranking Criteria – 2022

office(s) in rural area(s), increased outreach, establishing formalized partnerships with rural agencies, developed/developing relationships with landlords and organizations in rural areas, etc.

6.2 Estimated percentage of funds that you anticipate could be allocated to participants outside of Urban Growth Boundary (UGB)/in rural Clackamas County, by end of project operating year.

0-24% _____

25-49% _____

50-75% _____

6.3 What supports, if any, would your organization need to increase services in rural Clackamas County?

Total Equity and Total Needs Points: _____

2.	Project Performance	Maximum points: 31
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Criteria	Possible Points	Points Awarded
Compliance: Steps needed to be incorporated into CHA are complete No steps taken=0, some steps taken-mostly incorporated=2-5, fully incorporated=6	6	
Drawdowns: Projects that are within one month of starting their operating year have hired staff for this project (projects with more than a month until implementation, full points) No steps taken=0 points; job description written, job posted, interviews completed=2-4; staff hired=5	5	
HMIS Data Quality: New staff trained in HMIS policies and procedures. If new staff is responsible for HMIS data entry, also trained in data entry. (projects with more than a month until implementation, full points) Not trained=0, Trained in all aspects required for the position=5	5	

Clackamas County Continuum of Care

New Project Renewal

Project Ranking Criteria – 2022

<p>Bed Utilization: A completed Housing Inventory form has been submitted to HMIS Coordinator, indicating the number and types of beds/units available through this project. Not submitted=0, Submitted, but not finalized=1-4 (depending on how complete), Submitted and finalized=5</p>	5	
<p>Ending Homelessness: The agency participates in CoC and is a voting member (attended at least 3 meetings in the past 12 months). Not attending CoC=0, Attending CoC but not a voting member=2, Voting member of CoC=5</p>	5	
<p>Increased or Maintained Income: At least one staff person is registered or completed SOAR training. Please provide documentation for SOAR Training Did not meet goal=0, met goal=5</p>	5	

Please provide any explanations of project performance measures you would like the CoC Steering Committee to consider when scoring your project (no more than 1 page total).

Total Project Performance Points: _____

3. HUD Criteria	Maximum points: 2
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- Project is 100% Dedicated Chronically Homeless or Dedicated PLUS beds (1 point) _____
- Project increases overall RRH beds (1 point) _____

Total HUD Criteria Points: _____

Total Score: _____

Any project submitting either score card or application through Esnaps after the CoC-imposed deadline will have an automatic penalty of 5 points subtracted from their total score, listed above.

**Clackamas County Continuum of Care
Renewal Project Ranking Criteria– 2022**

Project Name: _____

Date: _____

Assistance Type	Target Population	Number of Units (single site)/ Proposed Project Participation (scattered site)	Households Served

Participant Demographics (pulled from APR):

Gender:		Race:	
Male		White	
Female		Black/African-American	
No Single Gender		Asian	
Questioning		American Indian/Alaska Native	
Transgender		Native Hawaiian/Pac. Islander	
Don't know/refused/missing		Multiple Races	
		Don't know/refused/missing	
Age:			
0-12		Domestic Violence Survivor:	
13-17		Yes	
18-24		No	
25+		Don't know/refused/missing	
62+		Number currently fleeing	
Don't know/refused/missing			
		Veterans	
Ethnicity:			
Hispanic/Latino		Chronically Homeless	
Not Hispanic/Latino		CH households listed on APR	
Don't know/refused/missing		Number who met CH definition before 1/15/16	

Budget Information (Current Application):

Amount of HUD CoC Contract/Award: Not including Admin	\$
HUD CoC Admin:	\$
Total Program Budget: Please list all cash funding sources including and beyond stated match	\$

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

1.	Project Narrative	Maximum points: 59
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1. Describe (in less than ½ page), your proposed project, including services provided, population served, and proposed number served. Please do not describe your organization, but rather the specific project you are proposing. (Not Scored)
2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; these organizations demonstrate intimate knowledge of lived experience of the community. Programs which can effectively respond to the needs of different cultural communities within Clackamas County are important to the overall health and responsiveness of our system. In order to increase culturally specific services, and encourage culturally specific providers to apply, additional points are awarded under this category.

Please select the category appropriate to your program, if applicable (up to 4 points):

- 2.1 Applicant is a Culturally Specific Organization (4pts) _____
- 2.2 Applicant is not a Culturally Specific organization, but services provided under this project are Culturally Specific (2pts) _____
3. **The CoC definition of equity: *an on-going process of learning to acknowledge our biases, being flexible, and adapting services and policies to eliminate discrimination and disparities in the delivery of human services. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff.***
 - 3.1 Please provide a brief narrative (no more than 1/2 page) describing your program’s policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (11points)
 - 3.2 Please provide a brief narrative (no more than 1/2 page) describing your program’s efforts to center individuals with lived experience of homelessness and/or discrimination based on race, gender, or disability in your organization’s decision-making. (11 points)
 - 3.3 Please provide a brief narrative (no more than ½ page) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (11 points)

Examples include, but are not limited to:

- *Example #1: A program creates a policy to ensure hearing-impaired individuals do not experience barriers accessing and receiving services.*
- *Example #2: A program implements a strategic training plan to increase awareness and competency of racism, implicit bias, ableism, LGBTQIA+ issues, and other held identities experiencing disparities accessing services.*
- *Example #3: An organization maintains a robust employee-lead committee that supports an organizational culture centered on equity and inclusion in the workplace.*
- *Example #4: An organization has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions*

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

- *Example #5: An organization’s board of directors includes representation from more than one person with lived experience*
 - *Example #6: An organization has relational process for receiving and incorporating feedback from persons with lived experience*
 - *Example #7: New project has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers that exacerbate disparities and outcomes*
 - *Example #8: Demonstration of cultural responsiveness: culturally responsive organizations value diversity, understands differences and develops services and supports to meet the unique needs of each community such as having bilingual and bicultural employees.*
4. Please provide a brief narrative (no more than 1 page) describing how your program will work closely with public and private healthcare organizations to meet participant needs. This may include, but is not limited to: assistance with obtaining medical insurance; connecting participants to primary care providers; and connecting to medical homes. If your program does not currently do this, please describe how you plan to establish collaborative relationships with healthcare providers in order to address healthcare needs, and support permanent housing outcomes. (12 points)
5. **Housing First:** All projects must fully follow a Housing First approach, with limited exception for sober housing projects. Sober housing projects must demonstrate how they prevent denial for, or exit from, housing based on current or past substance use. Projects will be scored based on the quality and completeness of their answer. (10 points maximum)
- 5.1 Project is committed to using Housing First approach with no service participation or pre-conditions? YES ____ NO ____
- 5.2 Describe (in less than 1 page) your experience utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) termination policy. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that participant is terminated in only the most severe cases. Describe what policies and practices you have in place to align with a Housing First approach.
6. **Serving Participants in Rural Clackamas County:** This section will not be scored this year but will likely factor into scoring in future competition years. Information provided will help us strategize shifting CoC funds to rural Clackamas County:
- 6.1 Please provide a brief narrative (no more than ½ a page) describing your organization’s capacity, and plan to, serve participants outside of the Urban Growth Boundary (UGB)/in rural parts of Clackamas County. Examples may include (but are not limited to), plans to establish satellite office(s) in rural area(s), increased outreach, establishing formalized partnerships with rural agencies, developed/developing relationships with landlords and organizations in rural areas, etc.
- 6.2 Estimated percentage of funds that you anticipate could be allocated to participants outside of Urban Growth Boundary (UGB)/in rural Clackamas County, by end of project operating year.

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

0-24% _____

25-49% _____

50-75% _____

6.3 What supports, if any, would your organization need to increase services in rural Clackamas County?

Total Project Narrative Points: _____

2.	Project Performance	Maximum points: 39
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The following data are based on HUD Performance Measurements and local need. Data sources are APRs for each project's most recently completed program year, local HUD representative, and HMIS.

Criteria	Possible Points	Points Awarded
Compliance: Project <u>does not</u> currently have unresolved HUD monitoring findings or is in process of resolving.	5	
Compliance: Was the APR for the most recently completed program year submitted to HUD on time?	5	
Drawdowns: Project spent all CoC funds in contract year. (from HUD) Less than 90%=0 points, 90-94%=3, 95-100%=6	6	
HMIS Data Quality: Had 0% null/missing on all HMIS data elements on (APR Q6a-6c) More than 8%=0, 6-8%=1, 4-6%= 2, 2-4%= 3, more than 0-2%=4 , 0%=5 All individual elements listed must be less than 5% null.	5	
Bed Utilization: Average bed utilization was at least 99% 70% or less= 0, 71-75%=1 76-80%=2, 81-85%=3, 86-90%=4, 91-95%=5, 96-100%=6 For RRH programs: Proposed project participation vs Households Served	6	

**Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021**

<p>Ending Homelessness: The PSH program meet the local goal of at least 99% of clients remaining in permanent housing placement or exited to permanent housing. (APR Q5a8, Q23a & b) Less than 82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, more than 99%=7 OR The TH program met the local goal of at least 99% of clients exiting to permanent housing Less than 82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, more than 99%=7 OR The RRH program or Joint Component TH-RRH met the local goal of at least 87% of clients who exited the program to permanent housing, maintain permanent housing 6 months after program exit. Less than 69%=0, 69-71%=1, 72-74%=2, 75-77%=3, 78-80%=4, 81-83%=5, 84-86%=6, ≤87%=7</p>	7	
<p>Increased or Maintained Income: All homeless programs met the local goal of at least 80% of adult clients having increased or maintained <u>total income</u> at end of operating year or at exit (APR 19a1 & 19a2). Less than 60%=0, 60-64%=1, 65-69%=2, 70-74%=3, 75-80%=4, more than 80%=5</p>	5	

Please provide any explanations of project performance measures you would like the CoC Steering Committee to consider when scoring your project (no more than 1 page total).

Total Project Performance Points: _____

3.	HUD Criteria	Maximum points: 2
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- Project is 100% Dedicated Chronically Homeless or Dedicated PLUS beds (1 point) _____
- Project increases overall RRH beds (1 point) _____

Total HUD Criteria Points: _____

Total Score: _____

Any project submitting either score card or application through Esnaps after the CoC-imposed deadline will have an automatic penalty of 5 points subtracted from their total score, listed above.

Clackamas County Continuum of Care
 Project Ranking Criteria – Youth Renewal (EXCEPT YHDP)-2022

Project Name: _____

Date: _____

Assistance Type	Target Population	Number of Units (single site)/ Proposed Project Participation (scattered site)	Households Served

Participant Demographics (pulled from APR):

Gender:		Race:	
Male		White	
Female		Black/African-American	
No single gender		Asian	
Questioning		American Indian/Alaska Native	
Transgender		Native Hawaiian/Pac. Islander	
Don't know/refused/missing		Multiple Races	
Age:		Don't know/refused/missing	
0-12			
13-17		Domestic Violence Survivor:	
18-24		Yes	
Over 24		No	
		Don't know/refused/missing	
Don't know/refused/missing		Number currently fleeing	
		Veterans	
Ethnicity:			
Hispanic/Latino		Chronically Homeless	
Not Hispanic/Latino		CH households listed on APR	
Don't know/refused/missing		Number who met CH definition before 1/15/16	

Budget Information (Current Application):

Amount of HUD CoC Contract/Award: Not including Admin	\$
HUD CoC Admin:	\$
Total Program Budget: Please list all cash funding sources	\$

Clackamas County Continuum of Care
Project Ranking Criteria – Youth Renewal- 2021

1.	Equity and Local Needs	Maximum points: 59
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1. Describe (in less than ½ page), your proposed project, including services provided, population served, and proposed number served. Please do not describe your organization, but rather the specific project you are proposing. (Not Scored)
2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; these organizations demonstrate intimate knowledge of lived experience of the community. Programs which can effectively respond to the needs of different cultural communities within Clackamas County are important to the overall health and responsiveness of our system. In order to increase culturally specific services, and encourage culturally specific providers to apply, additional points are awarded under this category.

Please select the category appropriate to your program, if applicable (up to 4 points):

2.1 Applicant is a Culturally Specific Organization (4pts) _____

2.2 Applicant is not a Culturally Specific organization, but services provided under this project are Culturally Specific (2pts) _____

3. **The CoC definition of equity is: *an on-going process of learning to acknowledge our biases, being flexible, and adapting services and policies to eliminate discrimination and disparities in the delivery of human services. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff.***

3.1 Please provide a brief narrative (no more than 1/2 page) describing your program’s policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (11points)

3.2 Please provide a brief narrative (no more than 1/2 page) describing your program’s efforts to center individuals with lived experience of homelessness and/or discrimination based on race, gender, or disability in your organization’s decision-making. (11 points)

3.3 Please provide a brief narrative (no more than ½ page) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (11 points)

Examples include, but are not limited to:

- *Example #1: A program creates a policy to ensure hearing-impaired individuals do not experience barriers accessing and receiving services.*
- *Example #2: A program implements a strategic training plan to increase awareness and competency of racism, implicit bias, ableism, LGBTQIA+ issues, and other held identities experiencing disparities accessing services.*
- *Example #3: An organization maintains a robust employee-lead committee that supports an organizational culture centered on equity and inclusion in the workplace.*
- *Example #4: An organization has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions*
- *Example #5: An organization’s board of directors includes representation from more than one person with lived experience*

Clackamas County Continuum of Care
Project Ranking Criteria – Youth Renewal- 2021

- *Example #6: An organization has relational process for receiving and incorporating feedback from persons with lived experience*
 - *Example #7: New project has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers that exacerbate disparities and outcomes*
 - *Example #8: Demonstration of cultural responsiveness: culturally responsive organizations value diversity, understands differences and develops services and supports to meet the unique needs of each community such as having bilingual and bicultural employees.*
4. Please provide a brief narrative (no more than 1 page) describing how your program will work closely with public and private healthcare organizations to meet participant needs. This may include, but is not limited to: assistance with obtaining medical insurance; connecting participants to primary care providers; and connecting to medical homes. If your program does not currently do this, please describe how you plan to establish collaborative relationships with healthcare providers in order to address healthcare needs, and support permanent housing outcomes. (12 points)
5. **Housing First:** All projects must fully follow a Housing First approach, with limited exception for sober housing projects. Sober housing projects must demonstrate how they prevent denial for, or exit from, housing based on current or past substance use. Projects will be scored based on the quality and completeness of their answer. (10 points maximum)
- 5.1 Project is committed to using Housing First approach with no service participation or pre-conditions? YES___ NO___
- 5.2 Describe (in less than 1 page) your experience utilizing a Housing First approach. Include 1) eligibility criteria; 2/ process for accepting new clients; 3) termination policy. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that participant is terminated in only the most severe cases. Describe what policies and practices you have in place to align with a Housing First approach.
6. **Serving Participants in Rural Clackamas County:** This section will not be scored this year but will likely factor into scoring in future competition years. Information provided will help us strategize shifting CoC funds to rural Clackamas County:
- 6.1 Please provide a brief narrative (no more than ½ a page) describing your organization’s capacity, and plan to, serve participants outside of the Urban Growth Boundary (UGB)/in rural parts of Clackamas County. Examples may include (but are not limited to), plans to establish satellite office(s) in rural area(s), increased outreach, establishing formalized partnerships with rural agencies, developed/developing relationships with landlords and organizations in rural areas, etc.

Clackamas County Continuum of Care
Project Ranking Criteria – Youth Renewal- 2021

6.2 Estimated percentage of funds that you anticipate could be allocated to participants outside of Urban Growth Boundary (UGB)/in rural Clackamas County, by end of project operating year.

0-24% _____

25-49% _____

50-75% _____

6.3 What supports, if any, would your organization need to increase services in rural Clackamas County?

Total Project Narrative: Local Needs Points: _____

2. Project Performance Criteria	Maximum points: 39
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The following data are based on HUD Performance Measurements and local need. Data sources are APRs for each project's most recently completed program year, local HUD representative, and HMIS.

Criteria	Possible Points	Points Awarded
Compliance: Project <u>does not</u> currently have unresolved HUD monitoring findings or is in process of resolving.	5	
Compliance: Was the APR for the most recently completed program year submitted to HUD on time?	5	
Drawdowns: Project spent all CoC funds in contract year. (from HUD) Less than 90%=0 points, 90-94%=3, 95-100%=6 If project is still in the initial contract period – 2 points	6	
HMIS Data Quality: Had 0% null/missing on all HMIS data elements on (APR Q6a-6c) More than 8%=0, 6-8%=1, 4-6%= 2, 2-4%= 3, more than 0-2%=4 , 0%=5 All individual elements listed must be less than 5% null.	5	
Bed Utilization: Average bed utilization was at least 99% 70% or less= 0, 71-75%=1 76-80%=2, 81-85%=3, 86-90%=4, 91-95%=5, 96-100%=6 For RRH programs: Proposed project participation vs Households Served	6	

Clackamas County Continuum of Care
Project Ranking Criteria – Youth Renewal- 2021

<p>Ending Homelessness: The PSH program meet the local goal of at least 99% of clients remaining in permanent housing placement or exited to permanent housing. (APR Q5a8, Q23a & b) Less than 82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, more than 99%=7</p> <p>OR</p> <p>The TH program met the local goal of at least 99% of clients exiting to permanent housing Less than 82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, more than 99%=7</p> <p>OR</p> <p>The RRH program or Joint Component TH-RRH program met the local goal of at least 87% of clients who exited the program to permanent housing, maintain permanent housing 6 months after program exit. Less than 69%=0, 69-71%=1, 72-74%=2, 75-77%=3, 78-80%=4, 81-83%=5, 84-86%=6, ≤87%=7</p>	7	
<p>Income and Education: All youth homeless programs meet the local goal of at least 80% of youth participants having increased or maintained income AND/OR attending high school, post-secondary education, or other training program at end of operating year or at exit (APR Q19a1&2 and Youth spreadsheet). Less than 60%=0, 60-64%=1, 65-69%=2, 70-74%=3, 75-80%=4, more than 80%=5</p>	5	

Please provide any explanations of project performance measures you would like the CoC Steering Committee to consider when scoring your project (no more than 1 page total).

Total Project Performance Points: _____

3. HUD Criteria	Maximum points: 2
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- Project is 100% Dedicated Chronically Homeless or Dedicated PLUS beds (1 points) _____
- Project increases overall RRH beds (1 points) _____

Total HUD Criteria Points: _____

Total Score: _____

Any project submitting either score card or application through Esnaps after the CoC-imposed deadline will have an automatic penalty of 5 points subtracted from their total score, listed above.

**Clackamas County Continuum of Care
Renewal Project Ranking Criteria– 2022**

Project Name: H3S – HOPE Leasing PSH

Date: 8/29/22

Assistance Type	Target Population	Number of Units (single site)/ Proposed Project Participation (scattered site)	Households Served
Permanent Supportive Housing	Chronically homeless	15	18 served

Participant Demographics (pulled from APR):

Gender:		Race:	
Male	16	White	17
Female	4	Black/African-American	1
No Single Gender	0	Asian	0
Questioning	0	American Indian/Alaska Native	0
Transgender	0	Native Hawaiian/Pac. Islander	0
Don't know/refused/missing	0	Multiple Races	0
		Don't know/refused/missing	0
Age:			
0-12	2	Domestic Violence Survivor:	
13-17	0	Yes	5
18-24	0	No	13
25+	14	Don't know/refused/missing	0
62+	4	Number currently fleeing	2
Don't know/refused/missing	0		
		Veterans	0
Ethnicity:			
Hispanic/Latino	0	Chronically Homeless	
Not Hispanic/Latino	20	CH households listed on APR	18
Don't know/refused/missing	0	Number who met CH definition before 1/15/16	n/a

Budget Information (Current Application):

Amount of HUD CoC Contract/Award: Not including Admin	\$292,382
HUD CoC Admin:	\$12,227
Total Program Budget: Please list all cash funding sources including and beyond stated match	\$389,557
OR Emergency Housing Acct funds	\$76,153
County General funds	\$8,795

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

1.	Project Narrative	Maximum points: 59
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1. Describe (in less than ½ page), your proposed project, including services provided, population served, and proposed number served. Please do not describe your organization, but rather the specific project you are proposing. (Not Scored)

HOPE Leasing PSH is a Permanent Supportive Housing program that serves chronically homeless individuals. It is a Housing First program that helps households experiencing homelessness get and keep stable housing long-term. Households in this program have long histories of homelessness and often have complex health needs. HOPE provides a rent subsidy and intensive supportive services to help households gain stability in housing and move forward to accomplish goals they set in other areas of their lives. There is no time limit for participants to exit. Move-on vouchers are available for participants who are able to maintain stability with minimal case management support.

2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; these organizations demonstrate intimate knowledge of lived experience of the community. Programs which can effectively respond to the needs of different cultural communities within Clackamas County are important to the overall health and responsiveness of our system. In order to increase culturally specific services, and encourage culturally specific providers to apply, additional points are awarded under this category.

Please select the category appropriate to your program, if applicable (up to 4 points):

2.1 Applicant is a Culturally Specific Organization (4pts) 0

2.2 Applicant is not a Culturally Specific organization, but services provided under this project are Culturally Specific (2pts) 0

3. **The CoC definition of equity: *an on-going process of learning to acknowledge our biases, being flexible, and adapting services and policies to eliminate discrimination and disparities in the delivery of human services. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff.***

3.1 Please provide a brief narrative (no more than 1/2 page) describing your program’s policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (11points)

CCSSD has an active Equity, Diversity, and Inclusion Group (EDIG), systematically introduced to each new employee. EDIG’s mission is to empower all employees to do their best work, promote the value of diverse perspectives employees bring, identify, challenge, and disrupt workplace practices that impede social justice and cultivate a work environment that immediately welcomes and includes new employees. EDIG has 26 active members including a management team member/liaison and has five teams: Awareness, Training, Check In’s, Interviews and Welcoming. EDIG also has a Racial Trauma support group for staff who identify as people of color and has two affinity groups for employees who identify as Black/African American and Latinx.

EDIG has been instrumental in recommending CCSSD all-staff equity, anti-oppression and anti-bias training. In the past two years, all 180 employees have attended a 9-hour De-Biasing, Cultural Fragility, and Active Bystander/Micro-Aggressions Interruption training and a 2 hour training on LGBTQ+ spectrum

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

and pronouns. CCSSD promotes a culture of learning and funds equity training. CoC housing staff regularly access a pool of training funds. Equity Foundations, Promoting Racial Justice in Decision Making, Poverty, Race, and Consciousness, Suicide Risk Management in LGBTQ + Veteran Community, Civil Rights & Racial Justice in Housing, Mainstreaming of Anti-Semitism in America, Crime-free & Nuisance Property Ordinances and Civil Rights, Providing Affirming Services to LGBTQ+ Youth Experiencing Homelessness, Racial Equity and Source of Income Discrimination, Hoarding Disorder and Fair Housing, Racial Wealth Gap and Economic Justice in Oregon, LGBTQIA+ Fair Housing Protections and Hispanic Interagency Networking Team Equity Forum were some housing staff trainings last year. Conferences attended were the Two Spirit LGBTQ Meaningful Care, Government Alliance for Racial Equity (National), Latino Health Equity and NW Public Employees Diversity. After staff participate in equity related trainings, they are encouraged to share insights, and a training summary with the entire team including leadership.

Clackamas County has an [Equity and Inclusion Office](#) , an [Equity Resolution](#), anti-oppression and anti-bias policies as well as mandatory equity training for management. CCSSD management is engaged in a series of intensive equity trainings with the Athena Group which focus on ensuring a micro-aggression free workplace and applying an equity lens to all hiring, retention and advancement, as well as service delivery. The training contract also includes 12 hours with an equity coach for each team member to support advancing equity in all aspects of the Division. As funding permits, parts of the Division are adding Equity positions, including a Supervisor for Equity, Policy and Innovation that is closing 8/31/22.

3.2 Please provide a brief narrative (no more than 1/2 page) describing your program’s efforts to center individuals with lived experience of homelessness and/or discrimination based on race, gender, or disability in your organization’s decision-making. (11 points)

As the state designated Community Action Agency, CCSSD convenes a Community Action Board (CAB) that makes decisions pertaining to state community action fund allocations, including 13 housing and shelter funding streams totaling \$6.7M in the current year. These funds support CoC and other housing and shelter services. CAB also makes decisions regarding \$16+M in related Community Action funds such as energy assistance. 37.5% of current CAB members identify as BIPOC and 37.5% identify as low-income. CAB actively seeks members from all regions of the county, all races, ethnicities, sexual orientations and cultures. Board members lived experience is valued, including but not limited to living with a low income, being housing insecure or experiencing homelessness, facing food insecurity and limited access to quality healthcare. CAB has an Equity Lens (see 3.3 below) that informs all funding decisions.

CCSSD centers people with lived experience of homelessness and discrimination in several additional ways. For direct communication from active program participants CCSSD has a client feedback process (electronically or on paper) and is requested at annual recertification and exit but can be submitted at any time. Participant feedback is reviewed regularly, and issues are addressed immediately. Feedback patterns result in changes to practices. Staff with lived experience of discrimination based on race, gender and disability who participate in EDIG elevate the experiences of diverse participants and staff to the agency director level, and have been integral in advising on needed trainings, advancing inclusive practices, and other concrete actions to advance equity in the workplace and in programs.

CCSSD strongly advocates for paying people with lived experience for their time, travel and childcare expense and this has been widely implemented across systems including CoC Steering Committee and multiple housing project advisory teams. Elevating the voices of people with lived experience beyond CCSSD, participants are regularly offered opportunities and support to share their perspectives to create meaningful change with the CoC

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

Steering Committee, housing project advisory teams, state legislature, County Commissioners, and through public relations opportunities that help expose the public to the insights and ideas of people experiencing homelessness.

The Supportive Housing Team has 30 members. Twelve (40%) identify as people of color, six (20%) fluent in Spanish and one fluent in Vietnamese. CHA includes two designated bilingual Spanish positions to ensure that Spanish speakers at entry are served in their preferred language. Language interpretation is available at all times with 240+ languages and staff have been trained on respectful communication through interpreters. At least 17% of team members identify as LGBTQ+. Team members offer meaningful input into hiring and all possible program related decisions.

3.3 Please provide a brief narrative (no more than ½ page) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (11 points)

A work group made up of board members with lived experience of poverty or homelessness, program stakeholders and community partners worked collaboratively to draft a Service Equity Plan to insure all decision-making processes use an Equity Lens. Through this Equity Lens, CCSSD is working to identify areas of inequity of access, participation and outcomes. CCSSD is using the Equity Lens below to identify root causes that perpetuate inequalities, and remove barriers to continuously implement and improve a racially equitable service system.

These are the Equity Lens questions:

- A. *What group(s) experience disparities related to this budget, initiative, policy, program, or decision? Are they at the table? (If not, why?)*
- B. *How might the budget, initiative, policy, program, or decision affect the group(s)? How might it be perceived by the group(s)?*
- C. *Does the budget, initiative, policy, program, or decision improve, worsen, or make no change to existing disparities? Please elaborate. Does it result in a systemic change that addresses institutional racism?*
- D. *Does the budget, initiative, policy, program, or decision produce any intentional benefits or unintended consequences for the affected group(s)?*
- E. *Based on the above responses, what are possible revisions to the budget, initiative, policy, program, or decision under review?*

The Equity lens was used recently to inform a new water assistance program, distribute emergency food and shelter funding and to increase diversity in community members accessing aging services. A deeper dive into participant outcomes and disparities is one of the planned next steps as the Equity Lens continues to be applied across CCSSD's broad range of programs and services.

- 4.** Please provide a brief narrative (no more than 1 page) describing how your program will work closely with public and private healthcare organizations to meet participant needs. This may include, but is not limited to: assistance with obtaining medical insurance; connecting participants to primary care providers; and connecting to medical homes. If your program does not currently do this, please describe how you plan to establish collaborative relationships with healthcare providers in order to address healthcare needs, and support permanent housing outcomes. (12 points)

Clackamas County Social Service housing programs are uniquely poised for collaboration with healthcare service providers. County Health centers are located on campus and throughout the urban and rural parts of the county and offer sliding scale medical, dental and behavioral health services. The county has numerous programs that assist with accessing healthcare. These include CCSSD's Transportation Reaching People, free door to door transportation to medical appointments for people with disabilities and people experiencing homelessness, Senior Health Insurance Benefits

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

Assistance (SHIBA) program, WIC, Aging and Disability Resource Connection, walk-in and 24/7 mental health crisis services and a Recovery Navigator to name a few. CCSSD funds COVID rent relief through public health and Providence Health System outreach workers collaborate with Coordinated Housing Access as well as our homeless outreach case manager. Supportive Housing staff can access a multi-disciplinary team to collaborate with county healthcare providers on meeting complex participant needs, and public health staff periodically provide trainings on emergent housing-related issues such as bed bugs. Supportive Housing team members frequently work in partnership with county healthcare providers to coordinate care for shared participants, make referrals for healthcare, establish medical homes, and use as a resource for health related questions.

Because the housing program manager works with the County Emergency Operations Center, housing staff are able to provide participants with up-to-date information and resources related to the pandemic, wildfires, and any other public health emergencies that may have a great impact on the vulnerable households in CCSSD programs. CCSSD housing leadership meets bi-monthly with State DHS District management including Adults and People with Disabilities, Self Sufficiency and Child Welfare. As the gatekeepers for Oregon Health Plan as well as Medicaid, this regular communication keeps information flowing on any emerging needs, changes to eligibility or application process, and enables problem solving at the individual household level if needed.

CCSSD accredited Veteran Service Officers often help veterans enroll in Veterans Administration healthcare. The VA is a regular participant in the CCSSD convened Homeless Veteran Coordination Team (HVCT) meetings, and a system wide Release of Information including the VA and the other members of the HVCT, allows sharing of information pertaining to housing homeless veterans as well as ongoing service needs for formerly homeless veterans and veterans at high risk of homelessness.

During intake, program staff discuss mental and physical health concerns in relation to housing access and stability with each participant, and whether each household member has health insurance. The participant is encouraged to share contact information for any other service providers they wish staff to communicate with and to complete releases of information. If desired by the participant, program staff assist with locating, understanding eligibility for, and enrolling in health insurance coverage and medical and mental health services both directly and through referral to other programs. Program staff are familiar with a wide variety of community healthcare resources including services for low income and/or uninsured households and services that are culturally specific for BIPOC and LEP populations. CCSSD program manuals and our internal fiscal protocol explicitly state the ways that various federal, state and local funds can be used to support healthcare access by helping with office visit co-pays, non-covered health care costs such as prescription glasses, prescription co-pays, and prescribed non-covered medical equipment such as mobility devices.

- 5. Housing First:** All projects must fully follow a Housing First approach, with limited exception for sober housing projects. Sober housing projects must demonstrate how they prevent denial for, or exit from, housing based on current or past substance use. Projects will be scored based on the quality and completeness of their answer. (10 points maximum)

5.1 Project is committed to using Housing First approach with no service participation or pre-conditions? **YES**

5.2 Describe (in less than 1 page) your experience utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) termination policy. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that participant is terminated in only the most severe cases. Describe what policies and practices you have in place to align with a Housing First approach.

All CCSSD housing programs use a Housing First approach, and have been using and refining this approach for many years. Program participants are assessed through Coordinated Housing Access and must meet the basic HUD eligibility criteria (“chronically homeless” for PSH, literally homeless with minor child in household for RRH) and be next on the program referral list. Membership or identification in any marginalized community or protected class, or the presence of a criminal record are never disqualifying factors. Within CCSSD’s Housing First approach, there is a deep acknowledgement of the trauma of homelessness, the reality of mental health and addictions and the disparate impact of homelessness and the criminal justice system on communities of color. CCSSD goes to great lengths to work with participants with kindness, without judgment, and without adding any additional requirements or barriers to entry that the funder has not imposed.

Another aspect of the Housing First approach at CCSSD is helping people meet their basic needs such as food, water, safety off the streets, health related and hygiene as much as possible during the eligibility confirmation and housing search process. These concrete actions help to build trust and rapport and convey kindness and a lack of judgement. HUD requires third party of verification of disability and homeless status, which program staff frequently help people obtain. All households who meet eligibility criteria are enrolled and work with a case manager to develop a housing plan and receive support to overcome barriers and secure housing within 90 days (with the ability to request a reasonable accommodation for more time).

Once enrolled, case managers work to connect participants to resources and support, but participants are not required to engage in any services in order to receive Rental Assistance. The Participant Agreement only requires participation in HUD mandated activities such as reporting income and household composition changes and participating in an annual review. Case managers work with landlords to negotiate avoiding evictions when serious lease violations occur, help tenants move and empty their units when moving is unavoidable, and work with participants to develop a new housing search plan. CCSSD’s Housing First approach accepts that evictions do occasionally happen. Evictions are not reasons for termination.

Termination is rare, and can only occur in consultation with the program manager. Specific reasons for termination are outlined in program manuals and are reviewed with participants at intake. These include a participant not living in their unit, threats, violence, or harassment of county staff, and long-term stays in jail, prison, hospital, or other institution. Participants at-risk of termination have the right to appeal.

The effectiveness of CCSSD’s Housing First approach is demonstrated by the fact that all three CCSSD CoC permanent supportive housing programs either had 100% housing retention (HOPE II) or 100% exits to positive housing destinations (Housing our Heroes and HOPE Leasing) during the most recently completed project year.

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

6. Serving Participants in Rural Clackamas County: This section will not be scored this year but will likely factor into scoring in future competition years. Information provided will help us strategize shifting CoC funds to rural Clackamas County:

6.1 Please provide a brief narrative (no more than ½ a page) describing your organization’s capacity, and plan to, serve participants outside of the Urban Growth Boundary (UGB)/in rural parts of Clackamas County. Examples may include (but are not limited to), plans to establish satellite office(s) in rural area(s), increased outreach, establishing formalized partnerships with rural agencies, developed/developing relationships with landlords and organizations in rural areas, etc.

The connections and foundation for working in rural communities already exist for CCSSD and could easily be increased. The Supportive Housing Team of CCSSD has extensive relationships with landlords across the county including areas outside of the Urban Growth Boundary. A landlord outreach specialist supports all Supportive Housing Team programs and the COVID rent relief effort has also brought in hundreds of new landlords from all areas of the county including rural areas. CCSSD’s Coordinated Housing Access system does outreach to rural areas throughout Clackamas County, and all participants come in through this coordinated entry system. All CCSSD’s HUD programs are scattered site, so participants may choose housing anywhere in Clackamas County, including outside the Urban Growth Boundary. Currently, case managers provide outreach to landlords, coordinate care and support for participants to obtain and maintain housing in the participant’s desired area. CCSSD has a fleet of vehicles that case managers can reserve to travel to rural locations if transporting participants is needed, and CCSSD also pays mileage if staff use their own vehicles to visit participants (but not transport them).

CCSSD has also supported the capacity building of several severe weather shelters in rural parts of Clackamas County; Molalla Hope in Molalla and Zoar Lutheran in Canby. Formalized partnerships exist with both sites. Outreach staff visit these sites during openings and this effort could be expanded to ensure that all guests have the opportunity to be assessed for housing eligibility and other needs. Staff and volunteers at these sites also let outreach workers know about any especially vulnerable guests so that outreach and assessment if desired can be prioritized.

Additional formalized partnerships exist between CCSSD and Ant Farm Youth Services in Sandy and a network of senior meal sites and food distribution hubs including in Sandy, Estacada, Canby, Hoodland and Molalla. Each of these sites has frequent interactions with people experiencing homelessness and are already coordinating with CCSSD around individual and family needs.

6.2 Estimated percentage of funds that you anticipate could be allocated to participants outside of Urban Growth Boundary (UGB)/in rural Clackamas County, by end of project operating year.

25-49%

6.3 What supports, if any, would your organization need to increase services in rural Clackamas County?

In the Housing First model, people get to pick where they want to live, so this would take a higher level of coordination because we need to be sure that people who want to live outside the UGB have adequate funding and support.

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

Total Project Narrative Points: 44.8

2.	Project Performance	Maximum points: 39
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The following data are based on HUD Performance Measurements and local need. Data sources are APRs for each project's most recently completed program year, local HUD representative, and HMIS.

Criteria	Possible Points	Points Awarded
Compliance: Project <u>does not</u> currently have unresolved HUD monitoring findings or is in process of resolving.	5	5
Compliance: Was the APR for the most recently completed program year submitted to HUD on time?	5	5
Drawdowns: Project spent all CoC funds in contract year. (from HUD) Less than 90%=0 points, 90-94%=3, 95-100%=6	6	6
HMIS Data Quality: Had 0% null/missing on all HMIS data elements on (APR Q6a-6c) More than 8%=0, 6-8%=1, 4-6%= 2, 2-4%= 3, more than 0-2%=4 , 0%=5 All individual elements listed must be less than 5% null. HOPE: 0% missing	5	5
Bed Utilization: Average bed utilization was at least 99% 70% or less= 0, 71-75%=1 76-80%=2, 81-85%=3, 86-90%=4, 91-95%=5, 96-100%=6 For RRH programs: Proposed project participation vs Households Served HOPE: 100%	6	6
Ending Homelessness: The PSH program meet the local goal of at least 99% of clients remaining in permanent housing placement or exited to permanent housing. (APR Q5a8, Q23a & b) Less than 82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, more than 99%=7 OR HOPE: 100% The TH program met the local goal of at least 99% of clients exiting to permanent housing Less than 82%=0, 82-84%=1, 85-87%=2, 88-90%=3, 91-93%=4, 94-96%=5, 97-99%=6, more than 99%=7 OR The RRH program or Joint Component TH-RRH met the local goal of at least 87% of clients who exited the program to permanent housing, maintain permanent housing 6 months after program exit. Less than 69%=0, 69-71%=1, 72-74%=2, 75-77%=3, 78-80%=4, 81-83%=5, 84-86%=6, ≤87%=7	7	7

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2021

<p>Increased or Maintained Income: All homeless programs met the local goal of at least 80% of adult clients having increased or maintained <u>total income</u> at end of operating year or at exit (APR 19a1 & 19a2). Less than 60%=0, 60-64%=1, 65-69%=2, 70-74%=3, 75-80%=4, more than 80%=5</p>	5	5
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HOPE 100%

Please provide any explanations of project performance measures you would like the CoC Steering Committee to consider when scoring your project (no more than 1 page total).

Total Project Performance Points: 39

3. HUD Criteria	Maximum points: 2
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- Project is 100% Dedicated Chronically Homeless or Dedicated PLUS beds (1 point) 1
- Project increases overall RRH beds (1 point) 0

Total HUD Criteria Points: 1

Total Score: 84.8

Any project submitting either score card or application through Esnaps after the CoC-imposed deadline will have an automatic penalty of 5 points subtracted from their total score, listed above.

Clackamas County did not reject or reduce any project during the CoC's local competition.

Continuum of Care Application

The CoC submits an annual application to the U.S. Department of Housing and Urban Development (HUD) articulating the CoC's planning efforts and other activities within Clackamas County which relate to homeless people. To get a copy of this application, contact the Clackamas County Community Development Division at 503-655-8591.

The project application deadline is Tuesday, Aug. 30, 2022 at 11: 59 p.m. Applications should be submitted through the ESNAPS portal. They will be reviewed by Clackamas County's CoC Steering Committee.

For more information, please email Raina Smith-Roller at rsmithroller@clackamas.us with your name, agency and email address.

Update 8/24/22: Project application deadline was changed from Aug. 29 to Aug. 30.

NOFA Priority Listing		2021
Consolidated Application		2021
Ranking and Selection Process		2021
Local Priority Listing	2022	2021
Rating and Ranking Score Cards	2022	2021
Scoring Rubric for Narrative Questions	2022	

Clackamas County Continuum of Care FY2022 Priority Listing

Applicant Name	Project Name	Project Type	All - Culturally Specific - Max 4	All - Policies/Training - Max 11	All - Decision Making - Max 11	All - Applies Equity Lens - Max 11	All - Work with Healthcare - Max 11	All - Housing First - Max 10	All - Rural Clackamas County - Max 10	New App 1 - Meags Min Threshold - V/N	New App 2 - Other HUD and CoC Criteria - Max 4	New App 3.7 - Administrative Capacity - Max 9	New App 3.8 - Fed Grants experience - Max 8	New App 3.10 - HUD Measures - Max 10	Youth Renewal 1 - Perform - HUD Compliance - Max 5	Youth Renewal 2 - Perform - APR Compliance - Max 5	Youth Renewal 2 - Perform - Drawdowns - Max 6	Youth Renewal 2 - Perform - HUD Data Quality - Max 5	Youth Renewal 2 - Perform - Bed Utilization - Max 6	New Project Renewal 2 - Perform - Ending Homelessness/TH/RRH - Max 7	New Project Renewal 2 - Perform - HUD Criteria - Max 5	New Project Renewal 2 - Perform - CHA Compliance - Max 7	New Project Renewal 2 - Perform - Drawdowns - Max 6	New Project Renewal 2 - Perform - IHMS Data Quality - Max 5	New Project Renewal 2 - Perform - Bed Utilization - Max 5	Renewal Project 2 - Perform - Ending Homelessness - Max 5	Renewal Project 2 - Perform - Income - Max 5	Renewal Project 2 - Perform - HUD Compliance - Max 5	Renewal Project 2 - Perform - APR Compliance - Max 5	Renewal Project 2 - Perform - Drawdowns - Max 5	Renewal Project 2 - Perform - IHMS Data Quality - Max 5	Renewal Project 2 - Perform - Bed Utilization - Max 6	Renewal Project 3 - HUD Criteria - Max 5	Renewal Project 2 - Perform - Income - Max 2	Total Points 2022	2022 Application Amount	RANK			
H3S	HMIS Renewal	Non-scored																																				N/A	\$70,862.00	1
H3S	CHA CE	Non-scored																																				N/A	\$31,928.00	2
CWS	SSO CE	Non-scored																																				N/A	\$99,401.00	3
CWS	RRH for Survivors of Domestic Violence	Renewal	0.0	9.7	10.3	10.0	10.2	9.3																	5	5	6	5	6	7	3	1					87.50	\$78,411.00	4	
H3S	Hope Leasing PSH Program	Renewal	0.0	7.4	9.8	9.8	10.4	7.4																	5	5	6	5	6	7	5	1					84.80	\$304,609.00	5	
CWS	PSH for DV Renewal	Renewal	0.0	9.7	10.3	10.0	10.2	9.3																	5	5	3	5	6	7	3	0					83.50	\$191,781.00	6	
H3S	Housing our Heroes PSH	Renewal	0.0	7.4	9.8	9.8	10.6	7.4																	5	5	3	5	6	7	3	1					80.00	\$366,681.00	7	
H3S	Hope II PSH	Renewal	0.0	7.4	9.8	9.8	10.4	7.4																	5	5	6	5	1	7	5	1					79.80	\$79,773.00	8	
H3S	Rent Well RRH	Renewal	0.0	7.4	9.8	9.8	10.4	7.4																	5	5	6	5	6	7	0	1					79.80	\$129,405.00	9	
H3S	Housing our Families RRH	Renewal	0.0	7.4	9.8	9.8	10.4	7.4																	5	5	6	5	6	7	0	1					79.80	\$182,644.00	10	
CWS/IRCO	Housing for Survivors-PH-RRH	New Renew	2.0	9.0	9.3	9.2	8.5	9.3											6	5	5	5	5	5	1.0												79.33	\$278,465.00	11	
NHA	NHA RRH Renewal	Renewal	0.0	9.8	9.0	8.8	7.8	9.4																	5	5	6	4	6	7	0	1					78.80	\$164,514.00	12	
CCC	Chez Ami PSH	Renewal	0.0	5.8	8.5	8.0	9.7	7.0																	5	5	6	5	6	7	3	1					77.00	\$235,379.00	13	
DevNW	CoC TH/RRH Joint Component	Youth Renew	0.0	8.5	9.8	9.8	9.3	7.7				5	5	6	4	6	0	1	1																			73.17	\$160,288.00	14
Parrott Cr	HomeSafe Enhancement TH/RRH	New Renew	0.0	7.2	8.2	8.5	8.5	6.2											5	5	5	5	5	5	1												69.50	\$209,652.00	15	
HACC	Shelter + Care PSH	Renewal	0.0	5.7	6.7	7.5	4.2	7.7																	5	5	0	4	5	7	2	0					59.67	\$385,110.00	16	
Subtotal																																							\$ 2,968,903	

2022 Tier 1 Projects

Clackamas County Continuum of Care FY2022 Priority Listing

Applicant Name	Project Name	Project Type	All- Culturally Specific - Max 4	All- Policies/training - Max 11	All- Decision making - Max 11	All- Applies Equity Lens - Max 11	All- Work with Healthcare - Max 11	All- Housing First - Max 10	All- Rural Clackamas County - (not scored)	New App 1 - Meets Min Threshold - V/N	New App 2 - Other HUD and CoC Criteria - Max 4	New App 3.7 - Administrative Capacity - Max 9	New App 3.8 - Fed Grants experience - Max 8	New App 3.9 - Population Experience - Max 8	Youth Renewal 1 - Perform - HUD Measures - Max 10	Youth Renewal 2 - Perform - HUD Compliance - Max 5	Youth Renewal 2 - Perform - APR Compliance - Max 5	Youth Renewal 2 - Perform - Drawdowns - Max 6	Youth Renewal 2 - Perform - HMS Data Quality - Max 5	Youth Renewal 2 - Perform - Bed Utilization - Max 5	Youth Renewal 3 - Perform - Ending Homelessness/TH/RRH - Max 7	New Project Renew 2 - Perform - Income & Education - Max 5	New Project Renew 2 - Perform - CHA Compliance - Max 5	New Project Renew 2 - Perform - Drawdowns - Max 6	New Project Renew 2 - Perform - HMS Data Quality - Max 5	New Project Renew 2 - Perform - Bed Utilization - Max 5	New Project Renew 2 - Perform - Ending Homelessness - Max 5	Renewal Project 3 - HUD Criteria - Max 5	Renewal Project 2 - Perform - Income - Max 5	Renewal Project 2 - Perform - HUD Compliance - Max 5	Renewal Project 2 - Perform - APR Compliance - Max 5	Renewal Project 2 - Perform - Drawdowns - Max 6	Renewal Project 2 - Perform - HMS Data Quality - Max 5	Renewal Project 2 - Perform - Bed Utilization - Max 5	Renewal Project 3 - Perform - End Homelessness/TH/RRH - Max 7	Total Points 2022	2022 Application Amount	RANK
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2022 Tier 2 Projects

HACC	Shelter + Care PSH	Renewal	0.0	5.7	6.7	7.5	4.2	7.7																														5	5	0	4	5	7	2	0	59.67	\$156,258.00	16	
CWS	FY22 RRH Expansion	NEW	0.0	9.7	10.3	10.0	10.2	9.3	Y	4.0	8.5	7.5	9.7	8.8																																88.00	\$199,891.00	17	
CWS	SSO CE FY22 Expansion	NEW	0.0	9.7	10.3	10.0	10.2	9.3	Y	0.0	8.5	7.5	9.7	8.8																																	84.00	\$180,143.00	18
Subtotal																																				\$536,292.00													

Projects that are approved, but not ranked

DevNW	YHDP TH/RRH Joint Component																																																	N/A	\$622,667.00
NWFS	YHDP Replacement Project																																																	N/A	\$250,000.00
H3S	CoC Planning																																																N/A	\$119,935.00	
Subtotal																																				\$992,602.00															

Projects not selected for funding

Clackamas County did not reject or reduce any project during the CoC's local competition.

Combined Application Total

\$4,497,797.00

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 3:17 PM
To: Cook, Rod
Cc: Brown, Vahid; Skinner, Erin
Subject: Clackamas County H3S FY2022 CoC Ranking Results for HMIS and CoC Planning Grant Applications
Attachments: H3S HMIS- Renewal.pdf; H3S- CoC Planning Grant.pdf

Hi Rod,

Thanks for submitting CoC HMIS and CoC Planning Grant Applications for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your applications.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13, 2022

Rodney Cook
Clackamas County Health Housing Human Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for HMIS- Renewal Project

Rodney,

Thank you for submitting an application for CoC funding to support the HMIS renewal Project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the HMIS project to move forward to the HUD application. This application was not scored for points, but reviewed to ensure it met HUD requirements. The Housing Services Steering Committee ranked it at the top because it is a HUD requirement. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13, 2022

Rodney Cook
Clackamas County Health Housing Human Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for CoC Planning Grant

Rodney,

Thank you for submitting an application for CoC funding to support the CoC Planning Grant.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the CoC Planning Grant application to move forward to the HUD application. The CoC Planning Grant application was accepted, but not ranked. A list of all programs will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 3:01 PM
To: Dowd, Amy
Cc: Melissa Erlbaum; Skinner, Erin
Subject: Clackamas Women's Services (CWS) FY 2022 CoC Project Application Results
Attachments: CWS SSO CE Renewal.pdf; CWS-IRCO RRH for DV- Renewal.pdf; CWS CoC Bonus Project FY2022 SSO-CE Expansion.pdf; CWS DV Bonus Project FY2022 RRH.PDF; CWS PSH-Renewal.pdf; CWS RRH- Renewal.pdf

Hi Amy,

Thanks for submitting your applications for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your applications.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13, 2022

Amy Doud
Clackamas Women's Services
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for CWS's SSO Coordinated Entry (CE) Renewal

Amy,

Thank you for submitting an application for CoC funding to support the CWS Supportive Services Only (SSO) Coordinated Entry (CE) Renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected CWS's SSO CE project to move forward to the HUD application. This application was not scored for points, but reviewed to ensure it met HUD requirements. The CoC Steering Committee ranked it near the top because it is a HUD requirement. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Amy Doud
Clackamas Women's Services
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for the CWS PSH Renewal Project

Amy,

Thank you for submitting an application for CoC funding to support the CWS Permanent Supportive Housing (PSH) renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the CWS PSH renewal project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Amy Doud
Clackamas Women's Services
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for the CWS RRH Renewal Project

Amy,

Thank you for submitting an application for CoC funding to support the CWS Rapid Rehousing (RRH) renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected CWS's RRH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Amy Doud
Clackamas Women's Services
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for CWS's RRH for Survivors of DV (New Project)

Amy,

Thank you for submitting an application for CoC funding to support the CWS/IRCO RRH for Survivors of Domestic Violence project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected this RRH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Amy Doud
Clackamas Women's Services
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for the CWS DV Bonus FY2022 RRH Project-Expansion

Amy,

Thank you for submitting an application for CoC funding to support the CWS Rapid Rehousing (RRH) DV Bonus Project, to expand existing RRH Renewal services.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am writing to inform you of the status of your application. The Housing Services Steering Committee selected this application for HUD consideration utilizing DV Bonus funds. Due to the ranking of this project (Tier 2), funding is not guaranteed. HUD will determine whether or not to fund this project with DV Bonus funds based on the overall score of our CoC application. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Amy Doud
Clackamas Women's Services
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for the CWS CoC Bonus FY2022 SSO-CE Project-Expansion

Amy,

Thank you for submitting an application for CoC funding to support the CWS Supportive Services Only-Coordinated Entry (SSO-CE) CoC Bonus Project, to expand existing SSO-CE Renewal services.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am writing to inform you of the status of your application. The Housing Services Steering Committee selected this application for HUD consideration utilizing CoC Bonus funds. Due to the ranking of this project (Tier 2), funding is not guaranteed. HUD will determine whether or not to fund this project with CoC Bonus funds based on the overall score of our CoC application. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 2:58 PM
To: Durbin, Brenda
Cc: Silver, Erika; Skinner, Erin
Subject: Clackamas County H3S Social Services Division FY 2022 CoC Project Application Results
Attachments: H3S CCSS CHA- Renewal.pdf; H3S CCSS HOPE II PSH - Renewal.pdf; H3S CCSS HOPE Leasing- Renewal.pdf; H3S CCSS Housing our Families RRH- Renewal.pdf; H3S CCSS Housing our Heroes PHS- Renewal.pdf; H3S CCSS Rent Well RRH- Renewal.pdf

Hi Brenda,

Thanks for submitting your applications for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your applications.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13th, 2022

Brenda Durbin
Clackamas County Social Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for Coordinated Housing Access- Renewal Project

Brenda,

Thank you for submitting an application for CoC funding to support the Coordinated Housing Access renewal Project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the Coordinated Housing Access project to move forward to the HUD application. This application was not scored for points, but reviewed to ensure it met HUD requirements. The Housing Services Steering Committee ranked it near the top because it is a HUD requirement. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Brenda Durbin
Clackamas County Social Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for HOPE II PSH Renewal Project

Brenda,

Thank you for submitting an application for CoC funding to support the HOPE II Permanent Supportive Housing (PSH) Renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the HOPE II PSH project to move forward to the HUD application. The project ranked in Tier 1, and is likely to be funded by HUD. A list of all projects with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Brenda Durbin
Clackamas County Social Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for HOPE Leasing PSH- Renewal Project

Brenda,

Thank you for submitting an application for CoC funding to support the HOPE Leasing Permanent Supportive Housing (PSH) Renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the HOPE Leasing PSH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Brenda Durbin
Clackamas County Social Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for the Housing our Families RRH Renewal Project

Brenda,

Thank you for submitting an application for CoC funding to support the Housing our Families Rapid Rehousing (RRH) Project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the Housing our Families RRH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Brenda Durbin
Clackamas County Social Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for the Housing our Heroes PSH Renewal Project

Brenda,

Thank you for submitting an application for CoC funding to support the Housing our Heroes Permanent Supportive Housing (PSH) Project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the Housing our Heroes PSH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13th, 2022

Brenda Durbin
Clackamas County Social Services
2051 Kaen Rd.
Oregon City, OR 97045

RE: Continuum of Care Application for Rent Well RRH- Renewal Project

Brenda,

Thank you for submitting an application for CoC funding to support the Rent Well Rapid Rehousing (RRH) renewal Project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the Rent Well RRH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 3:03 PM
To: Misty Sorte
Cc: Katie Higgins Laughlin; Skinner, Erin
Subject: DevNW FY 2022 CoC Project Application Results
Attachments: DevNW YHDP Replacement.pdf; DevNW TH-RRH Project - Renewal.pdf

Hi Misty,

Thanks for submitting your applications for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your applications.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13, 2022

Misty Sorte
Corvallis Neighborhood Housing Services
421 High St, Suite 110
Oregon City, OR 97045

RE: Continuum of Care Application for TH/RRH for Former Foster Youth Renewal Project

Misty,

Thank you for submitting an application for CoC funding to support DevNW's Joint Component Transitional Housing/Rapid Rehousing (TH/RRH) for Former Foster Youth renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected DevNW's TH/RRH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

September 13, 2022

Misty Sorte
Corvallis Neighborhood Housing Services
421 High St, Suite 110
Oregon City, OR 97045

RE: Continuum of Care Application for YHDP TH/RRH Joint Component Project

Misty,

Thank you for submitting an application for CoC funding to support the YHDP TH/RRH Joint Component project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the YHDP TH/RRH Joint Component project to move forward to the HUD application. The YHDP TH/RRH Joint Component project was accepted, but not ranked. A list of all programs will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Thursday, September 15, 2022 4:45 PM
To: EV Armitage
Cc: Skinner, Erin
Subject: FY 2022 CoC NOFO- Project Application results
Attachments: Chez Ami.pdf

Hi E.V.,

Thank you for submitting the Chez Ami Application for consideration for the FY2022 CoC NOFO Competition. Attached please find the results from the Housing Services Steering Committee's review of your application.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13th, 2022

E.V. Armitage
Central City Concern
232 NW Sixth Ave.
Portland, OR 97209

RE: Continuum of Care Application for Chez Ami

E.V.,

Thank you for submitting an application for CoC funding to support CCC's Chez Ami program.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the Chez Ami project to move forward to the HUD application. The project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 3:06 PM
To: Karter, Toni
Cc: Ferron, Ashley; Skinner, Erin
Subject: HACC Shelter + Care FY 2022 CoC Project Application Results
Attachments: HACC Shelter + Care Renewal Project.pdf

Hi Toni,

Thanks for submitting your Shelter + Care Project Application for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your applications.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13, 2022

Toni Karter
Housing Authority of Clackamas County (HACC)
13930 S. Gain Street
Oregon City, OR 97045

RE: Continuum of Care Application for HACC's Shelter + Care PSH Renewal Project

Toni,

Thank you for submitting an application for CoC funding to support the Shelter + Care Permanent Supportive Housing (PSH) renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, October 21st. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am writing to inform you that the Housing Services Steering Committee selected this PSH project to move forward to the HUD application. The project currently straddles Tier 1 and Tier 2. \$385,110 of the Shelter + Care project is within Tier 1, while the remaining \$156,258 is in Tier 2. Tier 1 projects are very likely to be funded by HUD, whereas there is less certainty for projects listed in Tier 2. Funding of Tier 2 projects will be based on our overall CoC application score. A list of all programs with their scores is will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 3:08 PM
To: Peter Tompkins-Rosenblatt
Cc: Skinner, Erin
Subject: NW Housing Alternatives FY2022 CoC Project Application Results
Attachments: NHA HomeBase RRH Project - Renewal.pdf

Hi Peter,

Thanks for submitting your HomeBase Project Application for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your application.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13th, 2022

Peter Rosenblatt
Northwest Housing Alternatives
2316 SE Willard Street
Milwaukie, OR 97222

RE: Continuum of Care Application for NHA's HomeBase RRH Renewal Project

Peter,

Thank you for submitting an application for CoC funding to support the HomeBase Rapid Rehousing (RRH) renewal project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the HomeBase RRH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores and ranking will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 3:10 PM
To: Rose Fuller
Cc: Ernesto Hernandez; Skinner, Erin
Subject: NW Family Services FY2022 CoC Project Application Results
Attachments: NWFS YHDP.PDF

Hi Rose,

Thanks for submitting your YHDP Replacement Project Applications for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your application.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13, 2022

Rose Fuller
Northwest Family Services
6200 SE King Road
Portland, OR 97222

RE: Continuum of Care Application for YHDP Replacement Project

Rose,

Thank you for submitting an application for CoC funding to support the YHDP Replacement Project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, September 8th. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the YHDP Replacement Project to move forward to the HUD application. The YHDP Replacement Project Application was accepted, but not ranked. A list of all programs will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 13, 2022 3:14 PM
To: Kalena Karp
Cc: Simon Fulford (sfulford@pcreek.org); Skinner, Erin
Subject: Parrott Creek FY2022 CoC Project Application Results
Attachments: Parrott Creek HomeSafe Enhancement TH-RRH- Renewal.pdf

Hi Kalena,

Thanks for submitting your HomeSafe Enhancement Project Application for consideration for the FY2022 Continuum of Care (CoC) NOFO competition. Attached please find the results of the Housing Services Steering Committee's review of your application.

Please reach out with questions.

Thanks,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday

September 13, 2022

Kalena Karp
Parrott Creek Child & Family Services
1001 Molalla Ave, Suite 209
Oregon City, OR 97045

RE: Continuum of Care Application for HomeSafe Enhancement TH/RRH- Renewal Project

Kalena,

Thank you for submitting an application for CoC funding to support the HomeSafe Enhancement Joint Component TH/RRH project.

The Housing Services Steering Committee carefully considered all applications, and completed their ranking process on Thursday, October 21st. Notes from this meeting and a write-up of the ranking process will be available here: <https://www.clackamas.us/communitydevelopment/cchp.html> on the Clackamas County Community Development website by September 22nd.

I am happy to inform you that the Housing Services Steering Committee selected the HomeSafe Enhancement Joint Component TH/RRH project to move forward to the HUD application. This project ranked in Tier 1, and is likely to be funded by HUD. A list of all programs with their scores will be posted on the Community Development website by September 14th.

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 95-100) and 24 CFR 578.35.

If you are interested, I would be happy to meet with you to answer any questions you may have, and provide any requested program support.

Sincerely,

Raina Smith-Roller

Raina Smith-Roller, CoC Lead
On behalf of the Housing Services Steering Committee
Phone: 971-352-2684
Email: rsmithroller@clackamas.us

Continuum of Care Application

The CoC submits an annual application to the U.S. Department of Housing and Urban Development (HUD) articulating the CoC's planning efforts and other activities within Clackamas County which relate to homeless people. To get a copy of this application, contact the Clackamas County Community Development Division at 503-655-8591.

The project application deadline is Tuesday, Aug. 30, 2022 at 11: 59 p.m. Applications should be submitted through the ESNAPS portal. They will be reviewed by Clackamas County's CoC Steering Committee.

For more information, please email Raina Smith-Roller at rsmithroller@clackamas.us with your name, agency and email address.

Update 8/24/22: Project application deadline was changed from Aug. 29 to Aug. 30.

<u>NOFA Priority Listing</u>	<u>2022</u>	2021
<u>Consolidated Application</u>	<u>2022</u>	2021
Ranking and Selection Process	2022	2021
Local Priority Listing	2022	2021
Rating and Ranking Score Cards	2022	2021
Scoring Rubric for Narrative Questions	2022	

Tweets Tweets & replies Media Likes

Clackamas County, OR @clackamascounty · 13h

#ClackCo is prepared to submit a Continuum of Care grant application to the federal bureau of Housing and Urban Development for homeless housing. Review the application, list of programs included in the application, scoring and ranking procedures at bit.ly/3Si5wgh

1 Like

Clackamas County, OR @clackamascounty · 16h


#ClackCo commits over \$11M to address homelessness in the first year of the supportive housing services program. We will meet our goal to end prolonged homelessness in the county. clackamas.us/news/2022-09-2...



8:22 AM 9/28/2022

Clackamas County, Oregon ✓ 13h · 🌐

#ClackCo is prepared to submit a Continuum of Care grant application to the federal bureau of Housing and Urban Development for homeless housing. Review the application, list of programs included in the application, scoring and ranking procedures at



CLACKAMAS.US
Clackamas County Continuum of Care | Clackamas County
 The Continuum of Care (CoC) is a consortium of individuals and organizations with the common purpose of planning a housing and services...

2 Reactions

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8:17 AM 9/28/2022

Skinner, Erin

From: SmithRoller, Raina
Sent: Tuesday, September 27, 2022 3:15 PM
Subject: Draft Consolidated Application for FY 2022 CoC Funds available on CoC website

Hello CoC Members,

FY2022 Draft Continuum of Care NOF- Application Update:

Clackamas County is preparing to submit the Continuum of Care (CoC) grant application for housing and support services to the federal bureau of Housing and Urban Development (HUD) on Thursday September 29th, 2022. The application will include 20 programs, plus the CoC Planning Grant to coordinate services and plan for improvements. The total application amount is \$4,497,797.

You can review the Draft Consolidated Application, the list of programs included in the application (Priority Listing), and a write-up of the Housing Services Steering Committee's program review, scoring and ranking procedures on the Clackamas County Community Development, Continuum of Care website:
<https://www.clackamas.us/communitydevelopment/cchp.html#continuumofcareapplication>.

Please reach out with questions!

Thank you,

Raina Smith-Roller (she/her)

Clackamas County Continuum of Care (CoC) Lead

she/her/hers pronouns

Cell: 971-352-2684

[Why pronouns matter](#)

My work hours are 7:00am-5:30pm Monday-Thursday



September 13, 2022

Amy Doud
Clackamas Women's Services
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Commitment to leverage SHS funds to support FY2022 CoC RRH Expansion Project

Dear Ms. Doud:

This letter is to inform you that Clackamas County Housing and Community Development, a Division of Health, Housing, and Human Services (H3S), commits to leveraging Supportive Housing Services (SHS) funds to support Clackamas Women's Services' (CWS) CoC Rapid Rehousing (RRH) Expansion Project Application.

Clackamas County commits to leveraging funds to support 25% of participants in the CWS RRH Expansion Project during the 1-year grant term of the Project. The Grant Term of the project is anticipated to be 10/1/2023 through 9/30/2024. The total dollar amount of this commitment shall not exceed \$50,000. CWS is responsible for providing supportive services, including case management, to these participants in alignment with the SHS program guidelines and values.

This funding commitment shall be void in the event that the CWS RRH Expansion Project is not selected by HUD for funding. Furthermore, this commitment is dependent on CWS being awarded these leverage funds through the forthcoming Housing Placement & Retention Program Offer and the approval of the contract by Clackamas County Board of County Commissioners.

Respectfully,

Vahid Brown

Vahid Brown
Housing Services Manager
Housing and Community Development Division
Clackamas County

Healthy Families. Strong Communities.

2051 Kaen Road, Oregon City, OR 97045 • Phone (503) 742-5300 • Fax (503) 742-5352

www.clackamas.us



256 Warner Milne Road, Oregon City, OR 97045
(503) 655-8600 | www.cwsor.org

September 26, 2022

Clackamas County Continuum of Care
2051 Kaen Rd.
Oregon City, OR 97045

Re: Coordination with Housing and Healthcare for HUD NOFO FY 22

Clackamas Women's Services (CWS) has several partnerships with healthcare providers providing a continuum of services throughout our organization. The following healthcare partnerships and in-house clinical services will support participants in the CWS HUD RRH -Expansion FY 22-CoC Bonus Project application that will serve 9 households.

CWS Counseling and Support Group Program- The CWS Licensed Mental Health Therapists will prioritize referrals for children and adults in the CWS RRH program. This service is funded through non-federal sources at a rate of \$65.00 per hour. We anticipate that the clinical mental health services provided through the CWS Counseling and Support Group Program will total \$5,760 for 12 months of this CWS HUD RRH project.

CWS and Women's Healthcare Associates- Through this partnership Women's Healthcare Associates (WHA) provides reproductive and maternal healthcare services for clients referred from CWS. WHA donates these services to CWS clients, at no-cost to the client. CWS anticipates that services in the amount of \$5,000 will be allocated to this project.

CWS has grant funding provided through CareOregon's Adaptive Fund to provide culturally specific services for households in the CWS Housing Program. Funding supports peer-based advocacy and mentoring through the Promotoras Program, culturally centered licensed mental health therapy and culturally specific case management and housing stabilization support. We anticipate that a minimum of \$5,000 of these funds will be leveraged to support households in the CWS HUD RRH project. We have enclosed our most recent award letter. Our grant is currently under review for renewal with a strong indication of continued funding. We anticipate notice of this award in spring 2023.

CWS has a partnership with Clackamas County Health Centers, Behavioral Health and Public Health Divisions. Through this partnership CWS provides highly skilled advocates out-stationed in the Behavioral Health office and out-stationed through mobile services with the visiting nurse program. Through this partnership Clackamas County Health Centers streamline referrals from CWS directly into healthcare services and CWS streamlines referrals from Clackamas County Health Centers directly into services specifically tailored for victims of domestic and sexual violence. Participants in the CWS HUD RRH Project will have direct access to Clackamas County Health Centers' services through this partnership. The MOUs for this partnership are currently undergoing a signatory process through the County Contract Department. Due to a back-up in County departments, there have been

delays in this process. However, because the agreements have been collaboratively developed and the signature process is a final step, services have begun. Additionally, this partnership is funded through several sources, including the Blueprint grant. A copy of the Blueprint Award letter is enclosed.

Lastly, CWS has a partnership with the School Based Health Centers in the county. Through this partnership CWS provides highly skilled youth advocates out stationed in the School Based Health Centers. Through this partnership Clackamas County Health Centers streamline referrals from CWS directly into healthcare services and CWS streamlines referrals from School Based Health Centers directly into services specifically tailored for victims of domestic and sexual violence. Participants in the CWS HUD RRH Project will have direct access to Clackamas County Health Centers' services through this partnership. The MOU for this partnership is currently undergoing a signatory process by the Superintendents of the school districts as a matter of formal procedure, however, services have begun.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Melissa Erlbaum', written in a cursive style.

Melissa Erlbaum
Executive Director

**Memorandum of Understanding:
Co-Located Domestic Violence Advocates**

Participating Partners

Mental Health Provider – Clackamas County Health Centers – Behavioral Health (CCHC)
DV Service Provider – Clackamas Women’s Services (CWS)

This Memorandum of Understanding (MOU) outlines the commitment of the partner agencies for Clackamas Women’s Services (CWS) to place Co-Located Domestic Violence Advocates in the Behavioral Health offices of Clackamas County Health Centers (CCHC). By entering into this agreement, the partners demonstrate a full commitment to a shared vision and plan to address the needs of individuals experiencing domestic violence and/or sexual assault, and to participate fully in the project-funded activities as described below.

Project Description:

Clackamas Women’s Services will provide and support a qualified and experienced domestic violence advocate who will provide onsite and mobile advocacy to *CCHC – Behavioral Health* clients who are victims of domestic violence and/or sexual assault.

Goals of the Program:

1. To increase capacity for responding to the safety needs of those who are victims and survivors of domestic violence by increasing partners’ mutual understanding of systems, practices, services and resources to recognize and respond to survivors’ emotional and physical safety needs.
2. To improve services to victims and survivors by ensuring that they are consistently identified through CCHC screening and referred to the out-stationed DV Advocate and/or DV/SA agencies for services and support.
3. To increase organizational knowledge through cross-training to better serve survivors who are navigating systems of mental health, particularly those impacted by suicidal ideation.

Roles and Responsibilities:

Clackamas Women’s Services (CWS) operates a non-profit, community-based multi-service domestic violence intervention program. *CWS* services are available to adults and children experiencing and/or leaving domestic violence and/or sexual assault. *CWS* fosters the empowerment of survivors so they can establish lives free of domestic and sexual violence, thereby breaking the generational cycle of these destructive forces. Our vision is to live in a society that no longer tolerates domestic and sexual violence, but rather thrives on mutual respect.

CWS’ service delivery framework is built on trauma-informed best practices that promote safety and self-determination. *CWS* offers comprehensive and sensitive solutions for adults and children impacted by sexual assault, domestic violence, stalking, trafficking, sex industry

exploitation, and elder abuse. These include a 24/7 crisis line, comprehensive shelter resources, and community-based programs. These programs include emergency, transitional, and long-term support and services, referral and advocacy services, mental health counseling, support groups, legal advocacy, youth violence prevention, and community/workplace education.

Clackamas Women's Services will:

- Serve as the lead agency for this collaborative project, accepting full responsibility for documenting the performance and activities of this project, including PSU evaluation components;
- Provide all fiscal and contractual oversight for this project;
- Designate 1.0 FTE DV Advocate to work at the CCHC – Behavioral Health office on a mutually agreed upon schedule
 - The Co-Located DV Advocate will provide services for children, youth, and young adults who are victims of and/or exposed to domestic violence, dating violence, or stalking, including support for non-abusing parents and caretakers.
 - Key services will include: safety planning, accompaniment to court or law enforcement interviews, supporting access to protective orders and providing ongoing emotional support during system navigation and resource connection.
- Provide supervision and support to DV Advocate;
- Facilitate DV-Specific Trainings to CCHC – Behavioral Health on a mutually agreed upon schedule

Clackamas County Health Centers is a division of Health, Housing and Human Services (H3S). CCHC has been serving the Clackamas County community since 1973. Our staff includes behavioral health teams who provide behavioral health assessments and treatment to clients and families of all ages. We provide essential health services regardless of the clients/patient's ability to pay. No client or patient is denied services or subjected to any variation in quality of services because of an inability to pay. Clackamas County Health Centers is actively involved with a countywide Zero Suicide initiative to support those in crisis.

Clackamas County Health Centers – Behavioral Health will:

- Designate a point person who will be available to the DV Advocate in person, by telephone or email. This designee will:
 - Introduce the program to clinicians prior to the DV Advocate's placement in the office, providing an overview of the role of the DV Advocate, information about issues surrounding confidentiality and mandatory reporting and other areas
 - Invite DV Advocate, where appropriate, to meetings and office functions.
- Make referrals to Co-Located DV Advocate utilizing outlined referral and communication plans
- CCHC will arrange for a secure and confidential office space that includes access to computer and phone for the Co-Located DV Advocate to work directly with CCHC referred clients in as timely a manner as possible.
- Provide Suicide Prevention and Intervention Trainings to CWS on a mutually agreed upon schedule

Quarterly Meetings:

CWS and CCHC will meet to discuss the successes, challenges, functionality of the program and PSU Evaluation Process. Meetings are to include Co-Located DV Advocate, Leadership from CWS, CCHC Leadership, and CCHC designated clinicians.

- Meetings are Required Quarterly, at a minimum.
- Meetings are to be scheduled by CWS.
- Minutes are to be taken and documented during each meeting. Responsibility to take minutes falls on CWS, unless otherwise specified

Referrals:

CWS and CCHC will follow the below process for confidentiality and consistency in referrals:

- Option 1 (preferred): Email DV Advocate with: Survivor Name, Safe Contact Information, ROI, any pertinent info
- Option 2: Paper referral including Survivor Name, Safe Contact Information, ROI, any pertinent info

Communication Plan:

For CCHC Clients:

(CCHC can provide any combination of the following):

- CCHC provides clients with the DV Advocate Number – Client to leave message with Name, Safe Number, and they are calling for CCHC Co-Located
- CCHC provides all clients with DV Crisis & Support Line and the DV Text/Chat Line for crisis and support:
 - **24/7 Crisis and Support Line:** 503-654-2288
 - **Chat:** rc.chat/cws (M-F, 9:30am – 4pm)
 - **Text Line:** 503-461-2888 (M-F, 9:30am – 4pm)

For CCHC Clinicians:

- If a CCHC Clinician needs a DV Advocate for CCHC related purposes (such as case staffing, see if they are available to come to CCHC) – CCHC can call CWS's Office – share you are a CCHC clinician and your need for calling

For DV Advocate Absence:

- CWS will provide for back-up for the Co-Located DV Advocate during absences from the regularly assigned CCHC location. CWS will notify CCHC about the back-up plan before back-up is needed, if possible, or immediately once the plan is in place.
 - Communication of back-up plan will include an email from CWS to CCHC at the following email addresses:
 - EKetola@clackamas.us – Emily Ketola
 - EDanehy@clackamas.us – Egan Danehy

Case Specific Staffing and Personnel Concerns:

Throughout working together, there will likely be case questions that arise from CWS or CCHC. We mutually agree to discuss the concern in a timely manner and with appropriate audiences.

Please note: Without a release of information CWS cannot share information regarding case specifics. CWS can answer general questions about policies and practices.

Throughout working together, there may be personnel concerns that arise from CWS or from CCHC. We agree mutually to discuss the concern in a timely manner between management in CCHC and management in CWS.

- CWS point of contact: Catherine Koch, LCSW – Program Director
 - catherinek@cwsor.org
- CCHC point of contact: Emily Kelota, LCSW – Operations Manager
 - EKetola@clackamas.us – Emily Ketola

Timeline

The roles and responsibilities described above are contingent on Clackamas Women’s Services receiving funds requested for the project described in the OHA grant. Responsibilities under this Memorandum of Understanding would coincide with the grant period, anticipated to be 7/30/2020 – 11/30/2021.

Commitment to the Partnership

- The collaboration service area includes Clackamas County, Oregon.
- The partners agree to collaborate and provide a coordinated support services pursuant to the program narrative of the grant application attached to this agreement.
- Compensation for [non-lead] partners' contribution to this project will be provided as outlined in the attached OVW budget detail worksheet.
- We, the undersigned, have read and agree with this MOU. Further, we have reviewed the proposed project and approve it.

Relationship of the Parties

All parties to this MOU are independent contractors and are solely liable for their own acts and omissions as well as the acts and omissions of their officers, agents, and employees. More specific terms regarding indemnity and insurance requirements will be provided in any subsequent contracts between the parties that relate to or arise out of this MOU.

Termination

Each Party shall have the right to terminate the Memorandum of Understanding by giving 30 days written notice in writing to all other parties at any time. Each party agrees to first effectively address issues and attempt to maintain a partnership. The CWS Board of Directors is available to provide mediation support as needed, and CWS agrees to inform the Oregon Health Authority should any Party express interest in terminating the agreement. If the Memorandum of Understanding is terminated by any Party, steps shall be taken to ensure that the termination does not affect any prior obligation, project, or activity already in progress. If the Memorandum of Understanding is terminated, a notice will be sent to the Oregon Health Authority to ensure full disclosure of any concerns regarding the project.

Amendment clause

The Memorandum of Understanding may be modified or amended by a written agreement between the Parties.

Signatures:



Melissa Erlbaum
CWS Executive Director

9/8/2020
Date



Deborah Cockrell
FQHC Director

9/8/2020
Date

April 11, 2022

Clackamas Women's Services
Melissa Erlbaum
256 Warner Milne Road
Oregon City, OR 97045

Award Letter: Blueprint Community Grant

Congratulations! The Clackamas County Public Health Division (CCPHD), Blueprint Community Grant team is pleased to award Clackamas Women's Services Access to Behavioral and Mental Health Services for Survivors of Domestic and Sexual Violence program a Blueprint Community Grant in the amount of **\$72,545** to increase access to behavioral health support services.

The start date of this grant will commence upon signature of this award letter and the end date of this grant will expire at the end of the grant's term, June 30, 2023.

Agreement between the CCPHD and Clackamas Women's Services has been met on the following contracting requirements through June 30, 2023 per the contracting document.

- Agreement on Work plan and Scope of Work
- Agreement on Program Budget
- Agreement on reporting requirements
- Agreement on Monthly Invoicing; Invoices of true and verifiable expenses shall be sent to Clackamas County Public Health on a monthly basis per the contract requirements. Expenses submitted must match the expenses included in the grantee's budget.
- Agreement on all County indemnification requirements
- Return unexpended grant funds to the County

Susan Berns-Norman is your Grant Coordinator for the duration of the grant project; please contact SusanB@Clackamas.us with your questions.

Thank you for your dedication and commitment to serving the residents of Clackamas County.

Best regards,



Philip Mason-Joyner, Director
Clackamas County Public Health Division

Melissa Erlbaum, Executive Director
melissae@cwsor.org
503-341-7115 (cell)
www.cwsor.org
<https://www.facebook.com/cwsor/>

located at A Safe Place Family Justice Center
505-655-8600 (main line)
888-654-2288 (24 hr support line)
256 Warner Milne Road Oregon City, OR 97045



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From: Pamela Colburn <pcolburn@panwpc.com>
Sent: Friday, July 22, 2022 4:48 PM
To: Melissa Erlbaum <melissae@cwsor.org>
Subject: Annual Commitment

Hi Melissa,

We are pleased to renew our partnership with Clackamas Women's Services. We will continue to provide services to referrals from CWS at no charge to your clients. Our total donation amount to cover these costs is \$25,000

Sincerely,
Pam Colburn



