

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 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2024 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 2024 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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 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:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2023 to April 30, 2024:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	Yes	Yes	Yes
30.	State Sexual Assault Coalition	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.				
35.				

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

1B-1a.	Experience Promoting Racial Equity.	
	NOFO Section III.B.3.c.	

Describe in the field below your CoC's experience in effectively addressing the needs of underserved communities, particularly Black and Brown communities, who are substantially overrepresented in the homeless population.

(limit 2,500 characters)

Our CoC has a long history of significant collaboration with underserved communities, including BPOC communities to design and operate programs that equitably benefit them. Culturally specific providers participate in case conferencing, data evaluation, and workgroups focused on system improvements. The CoC also expanded collaboration with culturally specific partners in the Tri-County region and national coalitions, further enhancing racial equity efforts.

Culturally specific organizations play a vital role in system evaluation and improvement. This year, the director of Up and Over, a culturally specific organization serving BIPOC community members, served on the scoring committee for the CoC local competition process, as well as on policy workgroups, in CE improvement efforts, and in inflow and outflow meetings.

Technical assistance services were made available to culturally specific organizations. One culturally specific provider, IRCO, identified business plan priorities to analyze with their technical assistance firm; their areas of focus include analysis of current workflow, software, processes, and internal controls for invoicing and financial reporting, identification of opportunities to increase digitization, and assistance with increasing workflow efficiency for translation and interpretation services.

Up and Over, a culturally specific provider, utilized their capacity-building budget to strengthen their organization by allocating it towards staff training programs focused on cultural humility, trauma-informed care, and understanding the historical and systemic factors impacting Black and Brown communities. IRCO, Up and Over, and other community partners, both culturally specific and non-culturally specific, are currently working with technical assistance firms to assess and refine overall organizational performance.

CoC partnered with Coalition of Communities of Color (CCC), a culturally specific provider, to evaluate the CoC's CE system. This work included extensive engagement w/ underserved community members, particularly Black and Brown community members. The primary goal was to understand and address disparities and gain insight into how the County could better meet the needs of residents with a primary focus on the perspectives of BIPOC, immigrant and refugee, low income, and housing insecure community members. After extensive engagement, CCC gave the CoC a detailed report on its equity analysis with 12 recommendations

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

(limit 2,500 characters)

1. CoC invites new members via the CoC website, social media, personal invitations, community meetings & a weekly CoC Digest emailed to about 400 people interested in CoC updates, making up the CoC's larger membership. Monthly Housing Services Community meetings are attended by 50-80 people, & attendance at these meetings increases via word of mouth, participation in subcommittees, & agencies newly providing housing & supportive services via state, local & federal funding sources. CoC Lead is active throughout the community & invites new members to join the CoC and apply for funding.

2. The CoC ensures effective communication with people with disabilities, including the availability of accessible electronic formats via the county's ADA-accessible website to announce meetings, the NOFO competition deadlines & processes. The CoC accommodates any accessibility requests for meetings, documents, etc., in alternative formats & holds meetings through Zoom to accommodate members regardless of their location or ability to travel; the availability of accommodation is made known on the CoC website. Those with communication needs are encouraged to reach out directly to the CoC Lead or any other staff member.

3. Staff from culturally specific orgs attend CoC meetings & participate in planning & implementation work to ensure equitable access to services. Supporting culturally specific organizations is a primary goal in the county Local Implementation Plan. There has been an increase in culturally specific providers, all playing a role in addressing equity across the system. They participate in case conferencing, Built for Zero, CoC meetings, and CE leadership work. The CoC works to increase engagement with these providers to collaborate on homeless service planning & provision & to apply for funding. We apply system data review, journey mapping & looking for gaps in who enters the system vs. the area population demographics guide outreach. Orgs addressing priority culturally specific needs receive invitations via announcements at community meetings, posts on social media and personal contact. CoC Project scorecards award points to culturally specific agencies and projects. Strategies for wider promotion and solicitation of new culturally specific organizations have been developed as a result of contracting with 2 culturally specific orgs to strengthen engagement.

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

Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. CoC solicits and considers feedback from orgs. & people with knowledge and/or interest in preventing & ending homelessness, including lived homelessness experience (PWLE), through monthly CoC meetings & community meetings; encouraging sharing feedback via in-depth discussion & voting on policies & procedures including to a broad group of community members, which provides input & consultation on homeless services planning. Multi-agency Coordination (MAC) group holds monthly meetings where info is communicated & feedback solicited. Meetings are attended by PWLE, public health, housing, healthcare, youth providers, & behavioral health. CoC is working with consultants on a rural assessment and strategic plan for ensuring effective services in rural areas. Community engagement continues to occur.

2. CoC Lead shares info & solicits feedback at CoC monthly meetings & community meetings via a weekly digest email sent to more than 360 people, & through the CoC website & social media. Five Service Planners focused on street outreach, safety, housing navigation, case management & youth services also share CoC information frequently in meetings & encounters. A survey link is prominently featured on the CoC homepage, asking about communication timeliness & ease of understanding, access to information, satisfaction with services received, whether backgrounds & traditions were respected & allows for open text comments.

3. CoC ensures effective communication w/ people with disabilities virtually on Zoom & accessible electronic formats via the county's ADA-accessible website to announce regular meetings, competition deadlines and processes. CoC accommodates accessibility requests for meetings, documents, etc., in alternative formats.

4. Info obtained in public meetings, the website & other forums is discussed in CoC planning and status meetings & feeds into changes and improvements for preventing & ending homelessness. Ex: 1) a CE evaluation (including input from stakeholders) led to a CE expert contract to better integrate CHA into regional, Built for Zero, trauma-informed, racial equity informed & person-centered practices; 2) a housing needs assessment & strategic plan for homeless services for rural areas. This will identify system-level interim & permanent housing service needs & their capacity to expand to fill identified gaps. This includes input from key partners, leaders, civic groups, faith groups, public safety, providers, & PWLE.

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

	4. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.
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(limit 2,500 characters)

1. CoC NOFO notification is made public via the CoC’s website and county social media channels and explicitly encourages new applications. Frequent COC and NOFO process information sharing happens through multiple public forums, including Community Connect meetings, monthly CoC meetings, and agencies not currently receiving CoC funding are encouraged to apply.

2. The CoC website includes information about the CoC NOFO and the local competition process, including deadlines, scorecards, and a scoring rubric; and instructional information about esnaps. Prospective new applicants are encouraged to contact the CoC Lead directly for support in understanding and completing the application process. A CoC NOFO Q&A session held on 8/19 provided information on the local competition process and CoC NOFO. The session was publicized on the County website and social media channels, through community meetings, and the CoC Digest (which goes out to approximately 360-member list-serve). CoC Lead continues to work with leadership to increase capacity for smaller organizations to apply, including identifying ways for rural partners to work alongside more established CoC funded agencies to expand services into areas less resourced.

3. The process for determining which project applications are submitted to HUD is posted on the CoC website, County Social Media channels (Facebook, Twitter), communicated in CoC meetings, and sent through CoC Digest emails that go to approximately 360 people. This includes information about scoring (scorecards and scoring rubric), an overview of local and HUD priorities, and final priority listing. The new applicant scorecard also outlines the project minimum threshold requirements that must be met to be considered. The process for determining which applications are submitted to HUD was also shared at the Q&A meeting on 8/19. The Housing Services Steering Committee (HSSC) established a Scoring Committee to score and rank proposed projects. The Scoring Committee included 6 members, 3 non-conflicted HSSC members and 4 members who identify as individuals with lived experience of homelessness.

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) 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 V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC’s geographic area.	

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

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

In the chart below select yes or no to indicate whether your CoC:

1.	Consulted with ESG Program recipients in planning and allocating ESG Program funds?	Yes
2.	Provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?	Yes
3.	Ensured local homelessness information is communicated and addressed in the Consolidated Plan updates?	Yes
4.	Coordinated with ESG recipients in evaluating and reporting performance of ESG Program recipients and subrecipients?	Yes

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated?	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure family members are not separated?	Yes
3.	Worked with CoC and ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients?	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance?	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers?	Yes

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

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

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

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

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

(limit 2,500 characters)

Through contracts with the developer and non-profit service provider of a PSH development, the CoC is party to a formal agreement with the Lake Oswego School District to identify and refer students (and their families) experiencing or at risk of experiencing homelessness to units in the new PSH and affordable housing project (Maryhurst Commons). This partnership is formalized in an MOU between the non-profit provider (Mercy Housing) and the School District, and is further formalized in writing in the contract between the county and Mercy Housing.

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. The CoC Lead and Youth Housing Services Program Planner actively engage with McKinney Vento Liaisons throughout the CoC. The Youth Program Planner facilitates monthly meetings with education providers to ensure homeless youth and families are connected to the education services for which they are eligible. Education staff, including MV Liaisons, regularly attend case conferencing meetings using a by-name list and coordinate services to quickly serve those most in need.

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 Liaison meetings include all school district liaisons and are facilitated by the Youth Coordinator member 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. The McKinney-Vento Representative from the state Education Department regularly attends monthly COC meetings, strengthening the Clackamas COC connection to state-level efforts.

The CoC is currently contracting with a consulting firm, Social Finance, to develop a strategy to end family homelessness in the County. This work has involved extensive engagement with school staff, including MV Liaisons, support with family case conferencing, and working to identify necessary additional formalized partnerships. The CoC anticipates a finalized report this fiscal year.

1C-4b.	Informing Individuals and Families Who Have Recently Begun Experiencing Homelessness about Eligibility for Educational Services. NOFO Section V.B.1.d.
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Describe in the field below written policies and procedures your CoC uses to inform individuals and families who have recently begun experiencing homelessness of their eligibility for educational services.

(limit 2,500 characters)

Policies: The COC and ESG Policy Manual includes guidance for all COC programs. The policy on the Education of Children states: “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.” The policy reinforces and references 24 CFR 578.23(C)(7).

Participant choice and self-determination are 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 to share the most updated information with CoC providers, and updates are provided at CoC-wide monthly meetings. Information about eligibility for educational services is available via a variety of methods, including the weekly email digest, sharing in monthly housing services community meetings, during discussions related to contract status check-ins, and in case conferencing meetings. Information is also made available in languages in addition to English to ensure access and to 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, supporting overall stability for households and families with children. The CoCs Youth Housing Coordinator facilitates McKinney-Vento Liaison meetings, where written policies and procedures informing individuals and families who become homeless of their eligibility for educational services are reviewed and updated as necessary.

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

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

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	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	No	No
	Other (limit 150 characters)		
10.			

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

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

	Organizations	
1.	State Domestic Violence Coalitions	Yes
2.	State Sexual Assault Coalitions	Yes
3.	Anti-trafficking Service Providers	Yes
	Other Organizations that Help this Population (limit 500 characters)	
4.		

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

Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:

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

(limit 2,500 characters)

1. CoC collaborates with DV service providers to update CoC-wide policies. Clackamas Women’s Services (CWS), the primary DV partner, has been an active partner in Clackamas County’s CoC since its inception and participates in all updates of CoC-wide policies. CWS helped craft our CoC’s structure, policies, and procedures through a trauma-informed and survivor-centered lens. 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. All housing or culturally specific providers that also offer DV services regularly collaborate through a monthly housing meeting and provide feedback to one another on trauma-informed and survivor-centered best practices. This meeting also provides the space to present and give feedback on CoC-wide policy.

2. CoC collaborates with CWS 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 through weekly CoC Digest emailed to about 400 people interested in CoC updates including community resources, CoC monthly meeting reminders, meeting minutes, and funding opportunities such as the NOFO. In addition to CWS, Immigrant and Refugee Community Organization and Northwest Family Services’ Casa Esperanza 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 the DV providers, as these culturally specific programs have requested. CWS has bilingual/bicultural Housing Case Managers to prioritize these relationships and enhance access to the CoC system. Additional supports launched this year include a CWS pilot project to place Sexual Assault Advocates in Providence Hospital Emergency rooms, and hiring a Community Outreach and Services Director to oversee our co-located partnerships throughout the County. CWS also hired a Latinx Services Coordinator who will expand culturally specific outreach efforts throughout the County.

1C-5b.	Implemented Safety Planning, Confidentiality Protocols in Your CoC’s Coordinated Entry to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC’s coordinated entry addresses the needs of DV survivors by including:	
1.	safety planning protocols; and	
2.	confidentiality protocols.	

(limit 2,500 characters)

1. To prioritize survivor safety and ensure a trauma-informed, survivor-centered system, Clackamas Women’s Services (CWS), CoC’s primary DV provider, plays a principal role in CE system design, implementation, and continuous improvement. Survivors fleeing abuse or seeking safety can access the CHA DV “door” in several ways; calling the CWS 24-hour crisis support line, reaching CWS via the text/chat line, CWS mobile services or walking into A Safe Place-Family Justice Center (ASP-FJC), where they will find CWS certified confidential victim service providers and other supports such as law enforcement, legal advocacy, and culturally specific providers. Survivors can also connect with CWS co-located advocates in the County where they may already receive services including DHS, Sandy Public Health, Behavioral Health, School-Based Health Centers, Clackamas Community College, and Providence emergency rooms.

At each entry point, CWS’ safety planning protocol directs service providers to address safety concerns and provide safety planning before offering 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. 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, is consistently applied, relocating and bifurcating households as appropriate. New providers are trained to implement an ETP.

2. 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 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. CWS adheres to confidentiality provisions in the federal VAWA statute and the Oregon Advocate Privilege statute.

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

In the chart below, indicate how your CoC facilitates training for project staff and coordinated entry staff that addresses best practices on safety planning and confidentiality protocols:

		Project Staff	Coordinated Entry Staff
1.	Training Occurs at least annually?	Yes	Yes
2.	Incorporates Trauma Informed best practices?	Yes	Yes
3.	Incorporates Survivor-Centered best practices?	Yes	Yes

4.	Identifies and assesses survivors' individual safety needs?	Yes	Yes
5.	Enhances and supports collaboration with DV organizations?	Yes	Yes
6.	Ensures survivors' rights, voices, and perspectives are incorporated?	Yes	Yes
	Other? (limit 500 characters)		
7.			

1C-5d.	Implemented VAWA-Required Written Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

	Describe in the field below:
1.	whether your CoC's written policies and procedures include an emergency transfer plan;
2.	how your CoC informs all households seeking or receiving CoC Program assistance about their rights to an emergency transfer;
3.	what your CoC requires households to do to request emergency transfers; and
4.	what your CoC does in response to households requesting emergency transfers.

(limit 2,500 characters)

1. CoC and ESG policy manual includes an Emergency Transfer Plan and is consistently applied, relocating and bifurcating households as appropriate. New providers are trained to implement an ETP. The Policy outlines that all CoC and ESG-funded programs must ensure that the VAWA Lease Addendum is signed between the participant and landlord.

2. The ETP process is presented at intake both verbally and in written form to all participants receiving assistance through the CoC regardless of known survivor status. The potential need for an emergency transfer is identified through the HMIS questions "Are you fleeing now?" and "What is Your Timeline for Fleeing?" Many times, survivors will also self-disclose. A "VAWA Rights" page is included in the participant Coordinated Housing Access packet along with a lease addendum that includes VAWA protections which outlines the rights and process for requesting an emergency transfer.

3. Once a transfer request is made, provider staff reviews the rights that the individual and family have under VAWA. This includes reviewing the certification of domestic violence, dating violence, sexual assault, or stalking. Alternate documentation form, an optional form that the individual or family can use to document the DV incident(s), may be requested by the housing provider.

4. 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).

1C-5e.	Facilitating Safe Access to Housing and Services for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures households experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within your CoC's geographic area.

(limit 2,500 characters)

Clackamas County's CoC ensures that survivors of domestic and sexual violence, trafficking, and/or stalking have access to all housing and services available within the CoC's geographic area, not just those run by victim service organizations. All survivors that enter the system through the CoC CHA DV "door," operated by CWS are added to all waiting lists throughout the entire CoC system 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. A unique number is created in the mainstream HMIS, giving 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.

CWS actively maintains engagement with households on the DV Door waitlist. This includes things such as ongoing safety planning, supportive services, and routinely assessing the needs of the household or changes in eligibility factors to improve access to as many housing options as possible. As the CoC funds new providers, CWS staff work with these providers to coordinate CE procedures, ensure appropriate Release of Information procedures, and continue to ensure maximum choice, safety, and confidentiality. CWS proactively identifies and dismantles barriers. These practices include routine use of the equity lens tool, equity audits, feedback from participants through anonymous surveys, one/one interviews and group listening sessions, provider multi-disciplinary meetings, etc.

CWS and other DV providers attend CoC BNL case conferencing and BFZ leadership meetings. This partnership and coordination help to ensure survivors have access to all housing programs within the CoC. One example of this coordination is being able to identify whether someone showing up on the BNL has already connected with CWS or another DV provider. If not, an outreach worker or another staff member will reach out to see if they are interested in DV housing or support services. Those who are not interested will continue to have access to all housing programs for which they are eligible.

1C-5f.	Identifying and Removing Barriers for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures survivors receive safe housing and services by:

1.	identifying barriers specific to survivors; and
2.	working to remove those barriers.

(limit 2,500 characters)

1. According to the National Network to End Domestic Violence, DV is the 3rd leading cause of homelessness for women and children. CWS has developed a system for CHA screenings to be accommodating, low-barrier, culturally responsive, and trauma-informed. The assessment may be provided through mobile response, walk-in, phone/video, etc. CWS works to mitigate housing barriers systemically and seeks to eliminate housing as a reason for survivors to stay in or return to an abusive relationship. Barriers reported by CWS participants include but are not limited to food insecurity, safe technology, transportation, immigration, educational/vocational access, and more. The CWS case management model addresses these barriers through an array of programming.

2. CWS works to mitigate barriers for Latinx survivors and immigrant communities, such as language, fear of deportation, bias in screening, and lack of representation among service providers. The Latinx Services Program was established to address the lack of culturally specific victim services in Clackamas and provides a pathway for Latinx survivors to access linguistically/culturally appropriate services. CWS also worked closely with the county on the Survivor Housing Services flex fund policy to reduce further barriers to housing program participants. This established a funding source for which we can increase access to resources such as those mentioned above.

Arising from survivor feedback, researching languages in the county, and needs assessments, CWS developed a Language Access Plan and has pay differentials for recruiting bilingual staff. CWS is also partnering with Bridges to reduce communication barriers for Deaf, Hard-of-hearing, and DeafBlind survivors. We continue to learn from our relationship-focused model with participants, cultivating survivor input, outreach activities, and more. CWS then uses this information to develop internal practices and brings this to groups such as MAC, Rural Homelessness Planning Group, CHA/BNL provider group, etc. We also use this to inform our public policy work through the OR Alliance to End Violence Against Women.

CWS serves as the lead applicant for numerous county housing funds including EO-RRH, partnering with identity-specific and rural serving agencies to increase accessibility to housing for survivors. CWS disaggregates outcome data utilizing an equity lens tool to seek the input of the most impacted communities and follow the lead

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

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

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

Describe in the field below:

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

(limit 2,500 characters)

1. The Clackamas County Continuum of Care (CoC) collaborates with LGBTQIA+ organizations to regularly update its anti-discrimination policy, ensuring that all housing and services are trauma-informed and meet the needs of LGBTQIA+ individuals and families. This is supported through partnerships with organizations like The Living Room, Youth ERA, and Avenues for Youth, which offer LGBTQIA+-specific services, such as peer support, gender-affirming care, and drop-in services.

2. To support project-level anti-discrimination efforts, the CoC assists housing providers in developing policies aligned with the CoC-wide anti-discrimination policy. Providers are trained in Equal Access practices, and Clackamas County partners with agencies such as Northwest Family Services, AntFarm, Dev NW, Second Home, and C-TEC to ensure these policies are maintained. These agencies work with the CoC to ensure culturally inclusive practices, including the proper use of pronouns and avoiding binary language.

3. Compliance with the anti-discrimination policy is evaluated through ongoing collaboration with LGBTQIA+-specific organizations and the Youth Housing Strategic Planning Group (YHSPG). The YHSPG is focused on advancing best practices in equity, innovation, and data evaluation. As part of this work, an equity subcommittee has been established and meets monthly. Representatives from The Living Room and Youth ERA actively participate in YHSPG workgroups to ensure continued support for LGBTQIA+ youth. Surveys are being developed to assess how well special populations, including LGBTQIA+ youth, are served in the housing continuum.

4. If noncompliance is identified, the CoC addresses it by working with providers to offer guidance, corrective measures, and additional training to ensure alignment with anti-discrimination policies. In serious cases, disciplinary actions may be taken to ensure all services remain aligned with the CoC’s commitment to providing a discrimination-free, inclusive, and supportive environment for all individuals accessing housing services.

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 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	38%	Yes-Both	Yes

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

Describe in the field below:

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

(limit 2,500 characters)

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, Foster Youth to Independence, Emergency Housing Vouchers, Mainstream Vouchers, and Regional Long Term Rental Assistance (RLRA) programs are federal and local housing voucher types that include a homeless preference and take referrals from CoC. HACC has HCV 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 FY 2023-24, CoC issued 207 new federally funded vouchers of various types, and 39 households leased that self-identified as coming out of homelessness.

In addition to federal vouchers, in FY 23-24 HACC issued 378 locally funded RLRA vouchers, and 382 households moved into housing in that time. RLRA vouchers are only issued to families experiencing or at risk of homelessness, and all participants enter through the CoC’s CE system, most from the CoC’s By Name List. The RLRA program has expanded and deepened the already strong partnership between CoC and PHA to address homelessness in the community.

HACC supported the completion of a newly developed affordable housing project called Los Flores, which is a new project consisting of 9 units of Permanent Supportive Housing (PSH), designed to serve extremely low-income, previously homeless individuals. The development prioritizes specific support services for high-barrier residents. Resident selection for the Los Flores PSH project was conducted through Coordinated Entry (CE).

HACC also supported the completion of Bear Creek Apartments, a newly developed affordable housing project with 8 units of Permanent Supportive Housing (PSH) located in rural Clackamas County. These 8 PSH units are designed to provide housing and support services to extremely low-income individuals experiencing homelessness, with a focus on addressing the unique needs of residents in rural areas. Resident selection for the Bear Creek PSH units was facilitated through CE, ensuring that the most vulnerable community members receive the support they need.

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 V.B.1.g.	

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

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

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

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

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Preventing People Transitioning from Public Systems from Experiencing Homelessness.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the public systems 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.	Prisons/Jails?	Yes
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	Yes
4.	Foster Care?	Yes

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition.	17
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 2024 CoC Program Competition that have adopted the Housing First approach.	16
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 2024 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 V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.
 Describe in the field below:

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

(limit 2,500 characters)

1. The CoC conducts regular check-ins with all providers, at least quarterly and often more frequently, to offer support and ensure projects are meeting the needs of those served. This includes ensuring that they follow a housing first approach. Last year the CoC implemented the HUD published Housing First Assessment Worksheet, which is evaluated during check-ins with plans created to improve in any areas needed.

Additionally, the CoC uses scorecards and bed utilization tracking to ensure fidelity to the Housing First (HF) model. CoC requires projects to use the Coordinated Entry (CE) system for referrals, ensuring projects follow HF policies and practices through program admission. Additionally, the competition score cards are weighted heavily for housing first in project narrative responses. The HF Assessment Worksheet, score cards (mid-year and competition), and bed utilization tracking are used as part of the contract check-ins. Additionally, CoC is assessing learning management systems/technology to evaluate their understanding of HF, ongoing training, and contract requirements assessment.

2. In addition to utilizing the Housing First Assessment Worksheet, monitored and scored performance indicators include length of time (LOT) homeless, 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. With the adoption of the HUD Housing First Assessment Toolkit, projects are evaluated based on all tool components. This evaluation is in collaboration with providers - provider and CoC staff complete an overall evaluation and establish an improvement plan when necessary.

3 & 4. All homeless service providers receive referrals from CE, regardless of funding source. CE ensures that agencies do not “cherry-pick” referrals into their projects. Denied referrals are evaluated to ensure programs are not screening people out of programs due to preconditions. In addition to the CoC competition, projects are evaluated for HF compliance in January using score cards, as described above. Case conferencing through the BNL, and data driven evaluation of inflow and outflow throughout our system, ensure fidelity to HF.

1D-3.	Street Outreach—Data—Reaching People Least Likely to Request Assistance.	
	NOFO Section V.B.1.j.	
	Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.	

(limit 2,500 characters)

The CoC street outreach program is designed to reach individuals experiencing homelessness who are least likely to request assistance by using tailored strategies focusing on our partnerships, trust-building, promoting access to key services, and proactive engagement. Highlighted strategies include:

Proactive Engagement at Key Locations: Outreach is conducted at free laundry events, food banks, community fairs, and multifamily properties. By offering outreach services alongside other supportive services in these spaces, CoC ensures accessibility for those who may be hesitant to contact social services including families with young children, the elderly and individuals with mobility issues.

Building Trust Through Consistent Presence and Trauma-Informed and Equity Approaches: Establishing trust is vital. Outreach workers spend time getting to know individuals, understanding their needs, and demonstrate consistent, nonjudgmental support backed by trauma-informed principles and an equity lens. Outreach staff with lived experience provide effective peer support, enhancing this approach.

Flexible and Immediate Access to Services: Offering flexible and immediate services, such as emergency health care, mental health support, and transportation to shelters or service centers, helps address urgent needs. Culturally specific providers are available at various housing stages, from unsheltered to unstably housed, ensuring populations with mistrust towards larger systems are served by providers that fit their needs.

Outreach-Specific County Email: The CoC created an outreach-specific county email that allows providers to submit questions or requests for outreach support, enhancing area coverage and enabling non-housing partners like Parks and law enforcement to request outreach for vulnerable individuals or clients of concern.

Building Strong Partnerships: Outreach teams develop relationships with key stakeholders in the service area, including local hospitals, code enforcement, behavioral health, probation and parole, regional government, fire departments, and EMS. A partnership between the Housing and Community Development and Public Health divisions equips a Community Paramedic to engage directly with individuals experiencing homelessness at camps, shelters, and areas of known congregation.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	
Select yes or no in the chart below to indicate your CoC's strategies to prevent the criminalization of homelessness in your CoC's geographic area:		

Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness
1. Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	Yes	Yes
2. Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	Yes	Yes
3. Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?	Yes	Yes
4. Other:(limit 500 characters)		

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

	HIC Longitudinal HMIS Data	2023	2024
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	243	365

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

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

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

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	
	Describe in the field below how your CoC:	
	1. works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and	
	2. promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.	

(limit 2,500 characters)

1. The CoC collaborates with Healthcare Services and CCOs to discuss, develop and implement strategies for healthcare services access. Funding for housing case management is embedded in support for county FQHCs. CoC plans to improve bi-directional flow and is working on data sharing agreements with key healthcare organizations. CoC staff meet biweekly with their counterparts in two metro counties; representatives of healthcare services organizations and CCOs to work on regional strategies for housing and healthcare integration. Healthcare partners, including organizations providing SUD and MH treatment, participate in CoC meetings. CoC invests in housing services, group housing, sober living housing and street outreach targeted to populations with mental health and SUDs.

2. All CoC contracted services providers must have SOAR capability. Program staff use SOAR training to build skills to help participants access SSI/ SSDI benefits. CoC includes SOAR as a preferred qualification for all positions hired and supports professional development to obtain training and certification relevant to SOAR. There are currently 12 SOAR certified staff, across seven organizations. Compliance with the contractual requirements related to SOAR is monitored and discussed as part of the monthly program meetings. The CoC has developed a direct referral relationship with ASSIST to provide SSI/SSDI application assistance to participants. ASSIST staff are all SOAR certified.

ID-7.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
	NOFO Section V.B.1.n.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to develop CoC-wide policies and procedures that:	
	1. respond to infectious disease outbreaks; and	
	2. prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1. CoC maintains regular communication with state and local PH, and participates in a County-wide emergency response coordination group, attended by PH, Disaster Management, and other key stakeholders. This group reviews and updates the emergency response plan, including policies and procedures for responding to infectious disease outbreaks. This, in turn, equips the CoC with information on how to respond to outbreaks. During an outbreak, we coordinate to allocate resources such as PPE and other supplies to shelters and encampments and ensure outreach workers and CoC providers receive updated information and training on how to respond to an outbreak including expedited access to services that are easily accessible, effective, culturally appropriate, and trauma-informed for people living unhoused.

2. Two CoC staff are dedicated to health and housing system integration, which will include PH/prevention, behavioral health, and physical health systems integration with CoC programs and services and system overall. Lead agency staff participate in quarterly PH advisory council meetings, where information is shared and discussions and plans for dissemination of information throughout the CoC occur.

Through monthly PH/Street Outreach meetings, training and education on preventive services are provided for Hepatitis A, rabies/animal bites, sexually transmitted infections, mosquito- spread illnesses, flu resources, lead infections, and syringe services. Coordinated educational campaigns for individuals experiencing homelessness are developed to raise awareness about health and hygiene practices. We also discuss and plan for needed supplies (e.g., masks or sanitizer to prevent covid/flu spread, Narcan for OD's). The CoC also partners with community paramedics and local PH to make vaccines accessible to unsheltered individuals.

During a Shigella outbreak this year among individuals experiencing homelessness, the Public Health Division worked with the CoC and Clackamas Fire's community paramedic to distribute hand sanitizer and shigella education. Specifically, Public Health partners printed a waterproof quarter sheet that was double-sided Spanish/English. Clackamas Fire had a ton of hand sanitizer which the info sheets were attached to for distribution to this community.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases. NOFO Section V.B.1.n.	
Describe in the field below how your CoC:		
1.	effectively shared information related to public health measures and homelessness; and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1. Information on infectious diseases (ID), outbreak patterns and other public health concerns (i.e., the impact of climate extremes on health) is shared in quarterly CoC meetings with Public Health (PH). CoC provides data about how/when/where to best reach people experiencing homelessness (PEH) to reduce ID outbreaks among unhoused individuals. CoC provides CE data analysis and estimates of PEH to PH and shares on a public-facing dashboard that includes data points on social determinants of health. CoC Lead coordinates with PH and system partners to share information widely at various community meetings & includes information on protecting PEH & service providers from ID; this information is also shared through the CoC list-serve.

CoC attends tabling events such as local resource fairs, day spaces, and multi-family properties. Booths showcase prevention materials, information on clinic walk-in options in the service area and at-home testing kits (e.g., HIV, Covid) are available.

PH presents at meetings attended by CoC and non-CoC-funded service providers. A CoC staff member participates 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. PH and CoC staff collaborate on a list of providers and locations that would be most helpful for myth-busting and vaccine access.

2. The Clackamas County Community Preparedness & Resilience Coordinator addresses ID outreach and emergency preparedness with a focus on ensuring services are provided and info is shared with our most vulnerable community members & PEH. The Coordinator frequently attends CoC and other community meetings, including outreach meetings, to share information and collaborate on strategies to prevent or limit ID.

PH staff participate in Street Outreach coordination meetings to improve information sharing between PH and service providers focused on unhoused people. The relationships formed through this engagement are invaluable in quickly addressing ID outbreaks now and in the future. PH staff also attend monthly CoC meetings, as well as other community meetings across the county. PH Nurses presented work at shelter sites regarding how to mitigate, screen, or quarantine for an ID.

1D-8.	Coordinated Entry Standard Processes. NOFO Section V.B.1.o.	
Describe in the field below how your CoC's coordinated entry system:		
1.	can serve everybody regardless of where they are located within your CoC's geographic area;	
2.	uses a standardized assessment process to achieve fair, equitable, and equal access to housing and services within your CoC;	
3.	collects personal information in a trauma-informed way; and	
4.	is updated at least annually using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 characters)

1. CoC has a widely-published community hotline, called the CHA (Coordinated Housing Access) line, which is the CoC’s CE system. Contact information is advertised throughout urban & rural Clackamas County; CE assessments can be completed entirely via phone for any population (including veterans, DV survivors, youth, and families). Walk-in appointments are also available at designated sites, and Street Outreach teams regularly conduct CE assessments across the entire CoC geographical area. The local domestic violence provider also operates a phone line for survivors with an added layer of protection through the HMIS comp site. Clackamas County has designated outreach throughout the county to reach people in encampments and connect them to the CoC’s CE system.

2. CHA continues to use a standardized assessment process. Assessments are done via phone and in person. To ensure consistency, the CHA team encourages outreach and other direct service providers who do not regularly complete assessments to simply assist clients in calling the CHA line. Currently, the assessments and prioritization process are the same for all subpopulations. However, the resources available vary by population and the CoC has specific BNLs for youth, families, veterans, single adults, and survivors of DV. CoC also operate population-specific case conferencing for youth, families, veterans, and single adults.

3. CoC CE provides training for assessors on how to ask certain questions, starting with letting participants know they have a choice to not answer a question if they feel uncomfortable, communicating a sense of safety and transparency, and using supportive and empowering language. The entire assessment is person-centered. Active listening allows assessors to gather the necessary information to identify the most evident needs, summarize and confirm understanding of those needs, reflect strengths, and provide potential diversion and housing problem-solving resources and referrals as appropriate. To continually improve the assessment experience, we are working to reduce asking unnecessary questions.

3. This year, CoC established a CHA Core Team, focused on elevating the voices of individuals with lived experience and providers. This group meets 2x/month focusing on improving our CE system. 4out of 11 group members have interacted with the CE system as a client in the past 3yrs. This group gives input on the overall CE, with focus increasing resources connection.

1D-8a.	Coordinated Entry–Program Participant-Centered Approach.	
	NOFO Section V.B.1.o.	
	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 needs and preferences; and	

	4. takes steps to reduce burdens on people seeking assistance.
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(limit 2,500 characters)

1. CE (CHA) reaches people least likely to apply for homeless assistance through calls, street outreach, and in-person assessments completed by day shelter staff serving many long term homeless persons and persons with disabilities. CoC secured \$3.8 million to expand street and site-based outreach to connect more people to CHA and PH, resulting in 205 new SO CHA entries. DV survivors have access to all CHA programs without disclosing identifying information through DV provider partnership. YHDP Diversion has increased outreach to youth in both rural and urban areas. CHA's outreach efforts increased new client volume entering CHA, from 1722 to 3036 year over year.

2. CHA seeks to serve the most vulnerable and uses a combination of factors to prioritize including length of time homeless, disability, need for medical support, past evictions, ER visit and hospitalization history, chronic health conditions, history of substance use, and history of mental health conditions in the household. When identifying referrals, CHA also focuses on equity establishing a process to ensure marginalized groups are represented in housing program referrals at the same or higher rate as they are entering our homeless response system.

3. CHA ensures people most in need of assistance receive timely PH aligned with their preferences. Utilizing BNL and case conferencing, CoC connects those prioritized to wrap-around housing services within 3 business days. All efforts are made to match people with top choices and if multiple openings, clients are given program choice. A medical elevation process has been established for extreme medical circumstances. Individuals that meet this criteria are reviewed weekly and, if approved, are prioritized for the next available referral.

4. CHA reduces user burden by incorporating housing problem solving and connecting individuals to immediately available resources throughout assessment process. Assessment process can be completed during CHA outreach, in-person at a convenient place, by phone, at a scheduled time or with advocates or family. CHA has increased collaboration with culturally specific organizations to expand outreach and assessment. Clackamas County has developed a new screening tool, to be implemented late 2023, with significantly less questions to reduce burden on system users. During the past FY, Assessment process has been simplified by removing additional questions and process steps leading to quicker housing access.

1D-8b.	Coordinated Entry–Informing Program Participants about Their Rights and Remedies–Reporting Violations.	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC through its coordinated entry:

1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and

3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.
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(limit 2,500 characters)

1. The CoC markets its Coordinated Entry (CHA) throughout both rural and urban Clackamas County. CoC has expanded the team answering live CHA calls so that the majority of calls are answered live 7 days per week from 8 am-8 pm. This expansion has been implemented to mitigate barriers to physically getting to a location for an assessment, especially for clients in the rural areas of Clackamas County. CoC offers this option so that outreach workers, even if they are not themselves trained in completing CHA assessments, can call with their client and have an assessment done on the spot. CoC has continued to partner with rural and culturally specific agencies to meet the needs throughout the county. CoC has multiple trained assessors on the CHA team who are bilingual; assessors also have access to the language line to connect with interpreters for languages not spoken by our assessors.

2. The CoC informs program participants of their rights in the initial CHA training and onboarding of staff/new assessors. Fair housing requirements are built into all program contracts. Beginning with the initial CHA assessment, clients are informed of what will be done with their information and that they do not need to answer any questions they do not feel comfortable with. The CoC has been working specifically with agencies to inform participants of their rights. Each agency at intake provides participants with their grievance process and many programs provide clients with their documented rights and responsibilities. The CoC conducts recurring contract check-ins with providers to work with them on their internal policies and procedures for informing participants of their rights, evaluates provider policies and procedures to ensure compliance, and provides training at least annually for providers on participants' rights.

3. Upon intake, each agency that receives referrals through Coordinated Entry must provide participants with their grievance process. Participants may also elevate concerns to the CoC. Department leadership fields any complaints from participants and engages with the relevant jurisdiction to ensure compliance with Fair Housing requirements. The CoC also proactively distributes information to the public and informs landlords of their responsibilities.

1D-9.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.p.	

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.	09/01/2024

1D-9a.	Using Data to Determine if Racial Disparities Exist in Your CoC's Provision or Outcomes of CoC Program-Funded Homeless Assistance.	
	NOFO Section V.B.1.p.	
	Describe in the field below:	
1.	the data your CoC used to analyze whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance; and	
2.	how your CoC analyzed the data to determine whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance.	

(limit 2,500 characters)

1. In September 2024, the CoC completed a comprehensive equity analysis of the Coordinated Housing Access (CHA) and Supportive Housing Services (SHS) systems. The primary objective of this effort was to identify both strengths and areas requiring improvement in the equitable delivery of services. The analysis focused on individuals who completed intake assessments between July 2023 and June 2024, with a particular emphasis on the racial and ethnic characteristics of participants. These groups were analyzed in terms of their access to the CHA system, their exits to permanent housing, and their exits to unstable housing situations. Demographic data were compared against the expected distributions for racial and ethnic groups living in poverty, based on the 2022 American Community Survey (ACS) from the U.S. Census Bureau. It is important to note that historically marginalized populations tend to be disproportionately represented in poverty data, compared to broader County-level census figures.

2. To assess disparities, statistical tests (t-tests) were employed to determine whether specific racial or ethnic groups were either overrepresented or underrepresented within the CHA and SHS data, compared to the anticipated distributions from the ACS data. Although the ACS is considered a reliable data source for this purpose, it is acknowledged that census data includes a margin of error, which may be more pronounced for historically marginalized communities.

Racial and Ethnic Disparities in Homeless Assistance:
 The CoC identified several notable disparities in the access to and outcomes of homeless assistance services. Individuals identifying as Black or African American, American Indian/Alaska Native or Hispanic/Latine were found to access the CHA system at rates higher than expected based on County-wide poverty statistics. In contrast, individuals identifying as Asian accessed the system at rates lower than anticipated. Furthermore, a higher-than-expected number of Black or African American, American Indian/Alaska Native, and Hispanic/Latine participants successfully exited the CHA system to permanent housing, according to census-based predictions. However, these same groups were also overrepresented in exits to temporary or unstable housing situations, again exceeding expectations based on County-wide poverty data. The CoC acknowledges room for continued improvement and believes these results demonstrate a commitment to advancing racial equity.

1D-9b.	Implemented Strategies to Prevent or Eliminate Racial Disparities.	
	NOFO Section V.B.1.p	

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

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	Yes
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	Yes
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes
4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes
5.	Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness?	Yes
6.	Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector?	Yes
7.	Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness?	Yes
8.	Is your CoC 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.	Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness?	Yes
10.	Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system?	Yes
11.	Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness?	Yes
	Other:(limit 500 characters)	
12.		

1D-9c.	Plan for Ongoing Evaluation of System-level Processes, Policies, and Procedures for Racial Equity.	
	NOFO Section V.B.1.p.	

Describe in the field below your CoC's plan for ongoing evaluation of system-level processes, policies, and procedures for racial equity.

(limit 2,500 characters)

CoC Annual Work Plan includes an Advancing Racial Equity goal. A key objective is to direct capacity building investments into culturally specific providers through direct funding allocation and provision of technical assistance services. CoC contracted with four TA firms to offer technical assistance to culturally specific organizations in accounting, human resources, organizational development and strategic planning. Improving Coordinated Entry process and assessment to ensure more equitable housing and services outcomes, another key objective, has led to improvements in accessibility, assessment and systems. Accessibility improvements include increased investment in CHA phone line to ensure 24/7 live access, translated assessment and intake forms, culturally and linguistically specific CHA assessments and enhanced CHA system navigation. Assessment improvements include assessment tool revisions to address inherent racism, bias and language that is not trauma informed and address questions that may deprioritize people that have recently doubled up, couch surfed, or otherwise temporarily started inside of a residence overnight. System improvements include increased funds for rental assistance, and housing resource direct referrals by assessors.

The CHA CORE Team is an advisory group of people with lived experience of homelessness and front-line staff. The CHA CORE Team’s purpose is to guide continuous improvement to the county’s coordinated entry system. Intentional recruitment for the CHA CORE Team resulted in strong representation of members who identify as BIPOC (45%) and members who have lived experience of homelessness and housing instability (73%). Planned CORE Team Focus Areas include enhancing the Housing Needs Assessment to better align with regional Coordinated Entry strategies, ensuring accessibility and centered on the participant experience.

The Program Team is also working to ensure equitable service delivery through culturally responsive policies, standards, and technical assistance. New workgroups have been formed creating policies and protocols that support both participants and staff. The workgroups are developing an action plan policy, a behavior/conduct policy using principles of restorative justice, and an end-of-service protocol for non-engagement. Culturally specific agencies are represented in each workgroup.

1D-9d.	Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities.	
	NOFO Section V.B.1.p.	
	Describe in the field below:	
1.	the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and	
2.	the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.	

(limit 2,500 characters)

1. The CoC is actively working to enhance its processes for evaluating equitable service delivery across its programs. Historically, the CoC conducted an Equity Analysis using Coordinated Entry (CE) data every two years. The race/ethnicity demographic data of participants who complete Coordinated Entry intake assessments, exit to temporary housing destinations, and exit to permanent housing destinations are examined as part of this work. The CoC performs this analysis on an annual basis, having completed evaluations in 2022 and 2023. The most recent analysis was finalized on September 1, 2024. By running these analyses on an annual basis, the CoC aims to provide a more timely and responsive assessment of its system of care, ultimately working to prevent and eliminate disparities in service delivery. Additionally, the Equity Analysis now includes an evaluation of the representation of historically marginalized populations within the CoC’s flagship program, Supportive Housing Services. This involves reviewing demographic data at both entry and exit points, particularly in relation to permanent and unstable housing outcomes for clients served through Coordinated Housing Access (CHA) and Supportive Housing Services. This review is critical to understanding how equitably the CoC serves its clients.

2. As part of its commitment to equitable service delivery, the CoC utilizes data from the Homeless Management Information System (HMIS) as a key tool for analysis. Demographic information collected at program entry and exit, reflecting both positive and negative housing outcomes, is compared to the most recent Census data from the American Community Survey (ACS). The CoC uses ACS data to generate an expected distribution of historically marginalized populations within the general population and among those living below the federal poverty level (FPL) in the CoC’s service area. This expected demographic distribution is then statistically compared to actual program data from HMIS to identify any overrepresentation or underrepresentation of certain groups. In addition to this data analysis, an annual equity survey of staff working in programs is conducted by contracted providers, focusing on staff demographics and pay by position level. This survey was conducted for the second time in 2024. Moving forward, the CoC is increasing its capacity in terms of staffing and software, enabling more detailed analysis and hypothesis testing.

1D-10.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts.	
	NOFO Section V.B.1.q.	

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 decisionmaking processes.

(limit 2,500 characters)

CoC engages people with lived experience of homelessness (PLEH) in leadership roles and decision-making processes. Housing Services Steering Committee (HSSC), the CoC’s governing board, includes 4 designated PLEH positions. This year, HSSC established a Scoring Committee to score and rank proposed projects. The Scoring Committee included 4 members who identify as PLEH. CoC is currently developing an ongoing Lived Experience Board with a non-profit partner expected to begin early 2025. PLEH are recruited through targeted outreach to grassroots and mainstream agencies, a list-serve including 362 agencies and community members, and CoC website postings.

The Coordinated Housing Access (CHA) Core Team ensures diverse community partner voices are represented within priority-setting, decision making and continuous improvement of CHA, including streamlining access, increasing housing placements, increasing connection to supportive services, and improving the human experience utilizing CHA. The CHA Core Team is paid and includes 8 PLEH, 4 who have interacted with the Clackamas County Coordinated Entry as a client in the past 3 years.

Most effective PLEH recruitment is through programs and organizations that work directly with PLEH. Case managers have built trust with those experiencing or recently exiting homelessness and are able to recruit directly for opportunities to help shape programs that serve people with similar experiences to their own. These opportunities often also lead to homeless service as peer-support specialists, case managers, or CoC staff.

CoC hiring practices include minimum requirements that value LE, identifying LE as a preferred qualification, and training hiring panels to recognize the importance of lived experience. Hiring priorities are conveyed through multiple public meetings, including CoC stakeholder meetings and the 360+ member CoC digest.

Youth Action Board (YAB), consisting of YLEH, has established three workgroups—Data, Equity, and Innovation. The Data Workgroup is raising awareness for the 2025 Point In Time Count among youth actively experiencing homelessness, and developing youth housing program participants’ experience surveys. The Equity Workgroup is assessing Youth Housing Continuum’s effectiveness in serving special populations, including LGBTQIA+ youth of color, minors, youth with mental health or substance abuse challenges, among others. The Innovation Workgroup is compiling Youth Housing Rights & Resources

1D-10a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Routinely included in the decisionmaking processes related to addressing homelessness.	15	12
2.	Participate on CoC committees, subcommittees, or workgroups.	20	15
3.	Included in the development or revision of your CoC's local competition rating factors.	15	10
4.	Included in the development or revision of your CoC's coordinated entry process.	20	15

1D-10b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

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)

CoC is committed to working alongside people with lived experience of homelessness, recognizing the value staff with LEH bring to our teams. To increase hiring of staff with LEH, CoC managers and supervisors promote diverse and inclusive workforce by not limiting minimum qualifications to formal educational achievement, but making accommodations for appropriate life experience where relevant, including LEH. These recommendations are being formalized into department policy.

CoC committed match funding for STEP (SNAP Training and Employment Program) which connects people served in CoC programs with recent LEH with employment and professional development opportunities in the housing and homeless services workforce, with the STEP grant paying for a large percentage of the wages and benefits for participants.

The CoC and CoC funded agencies regularly connect with Clackamas Workforce Partnership (CWP) to connect participants to employment and training opportunities. Employment and professional development opportunities are shared through weekly CoC Digest emails, in CWP meetings with providers, in CoC monthly meetings, as well as other community meetings.

Providers are encouraged to partner with Workforce Development. One successful example is YHDP’s Joint TH-RRH program. The lead agency has a direct relationship with CTEC who provides employment and educational training and support for youth and young adults.

CoC collaborates with and connects providers to Children, Family and Community Connections (CFCC), County Division, for employment and training opportunities. CFCC has a number of programs including those accessed by people experiencing homelessness and housing insecurity. These include veterans employment, support navigating training and employment opportunities, 2nd chance employment program, and programs for TANF recipients. Many non-profit housing providers, including CoC funded projects, connect participants to their programs.

The CoC promotes professional development and employment opportunities for PWLEH, including direct allocation of funding for peer-delivered services, and the requirement in some programs to include peer- delivered services in program design and thus in hiring. “Peers” here is inclusive of PWLEH. Funding is provided to outreach providers within the CoC to provide stipends to people with LEH who support outreach, and these paid opportunities have led to employment at some of these outreach providers by participants.

1D-10c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness. NOFO Section V.B.1.q.	
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Describe in the field below:	
1.	how your CoC gathers feedback from people experiencing homelessness;
2.	how often your CoC gathers feedback from people experiencing homelessness;
3.	how your CoC gathers feedback from people who received assistance through the CoC Program or ESG Program;
4.	how often your CoC gathers feedback from people who have received assistance through the CoC Program or ESG Program; and

5.	steps your CoC has taken to address challenges raised by people with lived experience of homelessness.
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(limit 2,500 characters)

The CoC routinely gathers feedback from people experiencing homelessness in a number of ways. CoC has conducted multiple focus groups the past year, including through partnership with Coalitions of Communities of Color (CCC), a culturally-specific organization, to conduct focus groups to improve our CE system. Additionally, CoC holds 4 spots (2 of which are dedicated for YAB) on the Housing Services Steering Committee (CoC Governing Board). YAB members with experience of homelessness significantly contribute to all YHDP and youth projects. PWLEH (People with Lived Experience Homelessness) have served on our Local Implementation Plan (LIP) Steering Committee. The LIP is a requirement of local Supportive Housing Services (SHS) funding and guides CoCs strategies for ending homelessness.

CoC routinely gathers feedback from people who received assistance through CoC or ESG on their experience receiving assistance. CoC- and ESG- funded agencies are expected to establish methods for gathering feedback from program participants, which is reviewed through contract check-ins/monitoring with CoC staff. This past year, CoC held listening sessions with people with lived experience including current and past ESG and CoC program participants.

Once feedback is received, 6 Program Planners (Street Outreach, Safety off the Street, Housing Navigation, Housing Retention, Youth Homelessness, and CoC Lead) work on system improvement. Projects include addressing training needs and programs to ease transition from living unhoused to permanent housing. CoC has also improved outreach methods, case management services and creating stronger links between short- and long-term subsidies. Collaboration with PWLEH resulted in more trauma-informed and effective services, and allowed the CoC to identify a need to develop Step-Up processes for those needing longer-term subsidies. PWLEH feedback also led the CoC to identify a need for a more robust PWLEH board. Work with the YAB resulted in the development of a youth engagement check-list, used by all youth housing providers to ensure that youth voice and choice is embedded in all aspects of program design, implementation, and evaluation. The CoC is currently in the process for procuring for a non-profit organization to support a Lived Experience Counsel, which will partner with the CoC on system planning, implementation, and evaluation. The CoC anticipates that this group will be formed by the Winter of 2025.

1D-11.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.s.	
	Describe in the field below at least two steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1. Over the past 12 months, the CoC Lead Agency has actively engaged with city, county, and state governments across its geographic area to address zoning and land use policies, as well as reduce regulatory barriers that impact housing development. This engagement has included working closely with the Clackamas County Coordinating Committee (C4), a multi-jurisdictional body that facilitates collaboration between county governments, cities, unincorporated communities, and representatives from key infrastructure services such as transit, sewer, water, and safety districts.

One key step in this engagement was participating in C4's annual retreat, where one day was dedicated specifically to housing-related discussions. During the retreat, CoC staff delivered presentations on current housing programs and ongoing development activities. They also contributed to a group dialogue using the Strengths, Weaknesses, Opportunities, and Threats (SWOT) framework to identify challenges and opportunities in the local housing system. Zoning, land use regulations, and other policy barriers were central topics of this discussion, enabling participants to collaborate on actionable strategies to address these issues.

2. Another step involved working with C4 to address the regulatory barriers to housing development at the city and county levels. This work includes regularly updating a "menu" of zoning and regulatory tools available to local jurisdictions, which aims to streamline approval processes and increase the housing supply. CoC staff have been directly involved in supporting municipalities in adopting these tools, coordinating with 16 cities, their mayors, city managers, and planners to align efforts. By creating a unified regional approach, the CoC has helped jurisdictions reform land use policies and regulations, specifically those that previously hindered affordable housing development.

Through these efforts, the CoC has not only influenced local zoning and land use reforms but also facilitated ongoing collaboration to reduce barriers, enabling more housing developments to move forward across the region.

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Advance Public Notice of Your CoC’s Local Competition Deadline, Scoring and Rating Criteria.	
	NOFO Section V.B.2.a. and 2.g.	

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC’s local competition.	08/27/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC’s local competition.	08/27/2024

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

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

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

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
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1E-2a.	<p>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.</p> <p>NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.</p>	
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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?	17
3.	What renewal project type did most applicants use?	PH-RRH

1E-2b.	<p>Addressing Severe Barriers in the Local Project Review and Ranking Process.</p> <p>NOFO Section V.B.2.d.</p>	
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Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	the severe barriers your CoC considered.

(limit 2,500 characters)

1. Project performance, including data outcomes, are evaluated at least quarterly in quarterly contract check-ins, & w/ scorecards during the CoC competition. Scorecard data is taken from APRs for the last completed program year, 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 include 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 analyzed data from HMIS, DV comparable database, and Yardi on how long it takes to house people in PH. Information gathered identifies when people are struggling to access housing. The Navigation Program Planner works with 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 system improvement, using BFZ to support this work.

3. CoC recognizes the vulnerability of people who have experienced abuse, or a history of abuse, DV, and sexual assault. Victim Service Providers (VSPs) encourage new applicants to apply for programs with a focus on DV survivors. The DV provider bonus project and the CE project are designed to address severe needs in our system. Unaccompanied youth are also a vulnerable population. In addition to 2 non-ranked YHDP projects, 2 youth focused projects were ranked.

4. CoC considered the severity of needs & the vulnerabilities of populations 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 providers serving high-needs populations. Access to physical and behavioral healthcare is crucial, so applicants were awarded points for healthcare collaborations. In '24, the COC increased points for demonstrated HF policies and practices. The HF Assessment Tool (HUD Published) was also implemented to ensure fidelity to HF.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	
	Describe in the field below:	
1.	how your CoC used input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;	
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and	

3. how your CoC rated and ranked projects based on the degree that proposed projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and steps the projects took or will take to eliminate the identified barriers.

(limit 2,500 characters)

The CoC obtains input from people of many races, particularly those overrepresented in our homeless population, through CoC meetings, public forums, focus groups, and the Housing Services Steering Committee (HSSC) representation. Six culturally specific housing service agencies were grantees this past year. These agencies used local funds for PSH, Navigation, SO, RRH, and Shelter services. Representatives from these agencies work with the CoC's most vulnerable community members, attend CoC meetings and other community meetings related to homeless services, and provide input on CoC's review and ranking process. The CoC contracts with two culturally specific orgs for engagement and system improvement support, including facilitating focus groups with the BIPOC population over-represented in the local homeless population. The HSSC has primary responsibility for updating project rating factors, reviewing applications, and the selection and ranking of applications. 20% of the HSSC represent the BIPOC community. Two HSSC seats are dedicated to Youth Action Board members, a racially diverse group with lived experience of homelessness (LEH). HSSC members with LEH receive a stipend.

Input from culturally specific providers, people identified as BIPOC, and other groups over-represented in our homelessness community 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 around equity. Next year, a new Lived Experience Board (LEB), 40% BIPOC, will provide input on the ranking process.

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

CoC scoring system includes more questions and points tied to equity; more project scorecard points are also tied to an added question on Housing First. CoC asks how agencies address barriers to participation. Projects scoring lower in key performance measures, such as exits to PH can identify participant barriers and plan steps to remove them. Equity questions focus on policies, outcomes, and organizational leadership structure

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	
	Describe in the field below:	
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year;	
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and	
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.	

(limit 2,500 characters)

1. 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. Manual defines reallocation process of defunding low performing/underutilized projects to create new ones, and how applicants are informed. The Homeless Services Steering Committee (HSSC) considers applicable past performance, equity commitments, Housing First fidelity, and ability to fill service gaps. The CoC Local Competition Scoring Committee scores and ranks projects based on those scores, meeting with the HSSC for final rating and ranking. The resulting rank determines which projects are reallocated to fund new ones. After ranking, HSSC considers issues that warrant reconsideration. CoC Lead notifies agencies how their applications were ranked, informs applicants what was submitted to HUD, and notes projects that were rejected and/or reallocated by HUD's required date. The reallocation process is communicated by publicly posting the HSSC scoring/ranking meeting minutes, and by urging applicants to read the NOFO reallocation guidance that supports decision making. CoC publishes scorecards, ranking process, and mid-year project performance reviews.

CoC conducts additional project evaluation outside of the local competition, through contract check-ins, which occur at least quarterly, sometimes more frequently. Frequent project evaluations help avoid poor performance, support providers, and reduce reallocation. Projects complete scorecards, including SPM (exits to Public Housing and increasing income) and administrative performance (monitoring findings, on-time APR, etc.) data. New project scorecards include a required narrative to describe the program's capacity to run effectively. Bonus points are awarded for meeting local needs, defined by PIT and CE. Programs with low score/rank risk reallocation.

2. CoC did not identify any low performing/underutilized projects for reallocation based on the criteria used for evaluation.

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

4. CoC conducts quarterly project evaluations, giving projects time to make improvements before our annual competition. CoC communicates the importance of project success and meeting target measures to avoid reallocation risk. The CoC did not find a need to make any reallocations this year due to low performance or less needed projects.

1E-4a.	Reallocation Between FY 2019 and FY 2024.	
	NOFO Section V.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	No
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/01/2024
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	<p>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.</p>	10/28/2024
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1E-5d.	<p>Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website.</p>	
	<p>NOFO Section V.B.2.g.</p>	
	<p>You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</p>	

	<p>Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.</p>	10/28/2024
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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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

	Enter the date your CoC submitted its 2024 HIC data into HDX.	05/09/2024
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2A-4.	Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases; and	
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2024 HMIS Data Standards.	

(limit 2,500 characters)

1. CoC and HMIS Leads collaborate with DV housing and service providers to ensure that data is updated in a separate, confidential DV implementation of HMIS. This is a comparable relational database that complies with HMIS Data Standards. The DV HMIS implementation, developed by WellSky (the same vendor as the CoC’s standard HMIS software), ensures that data is managed securely and in line with regulatory requirements. The CoC and HMIS Leads have developed workflow trainings tailored to the specific needs of DV providers and provide ongoing guidance as data standards evolve. The comparable database is used to collect participant data and generates CSV files for APR and CAPER reporting in Sage, as required by HUD. DV providers enter clients using anonymized identifiers instead of names, while still capturing all necessary demographic and program data to produce de-identified, aggregated performance data for each CoC project. DV providers submit this aggregated data to the CoC and HMIS Leads for local reports, including system performance monitoring, equity analysis, and bed utilization reporting, among others.

2. DV providers use a WellSky-developed database that is similar to the CoC’s WellSky system and compliant with the FY 2024 HMIS Data Standards. The CoC itself is also fully compliant with the 2024 HMIS Data Standards. WellSky, as the vendor, continuously updates the database to meet HUD’s evolving requirements and data standards. WellSky Community Services ensures compliance with federal, state, and local regulations, working closely with partners to translate complex policies into effective solutions. Their products offer customizable data visibility, system functionality, and reporting features. The CoC, HMIS Lead, and HMIS support staff and administrators collaborate to ensure data expectations, privacy, and security standards are consistently met. Additionally, the Implementation Lead regularly assesses the vendor’s compliance with all HMIS-related standards.

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

Using the 2024 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	138	60	198	100.00%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	37	0	37	100.00%
4. Rapid Re-Housing (RRH) beds	213	152	365	100.00%
5. Permanent Supportive Housing (PSH) beds	904	65	969	100.00%
6. Other Permanent Housing (OPH) beds	113	0	113	100.00%

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.	
	NOFO Section V.B.3.c.	
	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:	
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and	
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.	

(limit 2,500 characters)

N/A - 100% Bed Coverage

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2024 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST?	No
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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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Enter the date your CoC conducted its 2024 PIT count.	01/30/2024
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2024 PIT count data in HDX.	05/10/2024
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

1. The Youth Housing Program Planner for the CoC collaborates closely with youth service providers to facilitate participation in the Point-in-Time (PIT) count. This enhanced collaboration has led to more effective youth outreach efforts and an increased willingness among youth experiencing homelessness to engage with the housing services system. Youth are more inclined to participate when they have access to youth-specific services, which are perceived as safer and more accessible. Efforts are currently underway to expand the involvement of the Youth Action Board in the design and planning of the youth-specific PIT count. The CoC is working with Portland State University (PSU) to hold a tri-county PIT in 2025, and the Youth Housing Program Planner is involved in these planning processes.
2. Youth services agencies are contacted by the Youth Program Planner to request their support in administering surveys for the PIT count process at the providers' recommended locations. PSU has engaged youth services providers in planning for a youth PIT, with plans to implement in 2025.
3. Due to the absence of an unsheltered count in 2022, the most comparable data to the 2023 PIT count for unsheltered youth comes from the 2019 PIT count. The 2023 results reported 19 unaccompanied youth, reflecting a reduction from the 24 unaccompanied youth recorded in the 2019 count.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;	
	3. describe whether your CoC's PIT count was affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs' geographic; and	
	4. describe how the changes affected your CoC's PIT count results; or	
	5. state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2024.	

(limit 2,500 characters)

1. In comparison to the 2023 sheltered PIT Count, OR-507 CoC reported a decrease of persons in Emergency Shelter from 182 to 156 in 2024. For individuals in Sheltered Transitional Housing, the 2024 PIT Count showed a decreased count of 19 people compared to 50 in the 2023 sheltered PIT Count.

2. OR-507 CoC has not conducted a 2024 unsheltered PIT Count at this time.

In contrast to the 2022 PIT Count, the CoC did conduct an unsheltered PIT Count in 2023. Like the sheltered Count, this was a joint effort between the three counties in the Portland-metro area coordinated by Portland State University and Focus Strategies. As Coordinated Entry data was used to provide unsheltered data in 2022, the methodology for the 2023 unsheltered PIT Count is most like the methods used in the 2019 PIT Count.

3. Implementation and methodology did not significantly contribute to a change in sheltered count numbers from 2023 to 2024. Changes in sheltered numbers year over year are most likely reflective of changing funding (local Supportive Housing Services measure) and improved data quality. OR-507 CoC has not yet conducted an unsheltered PIT Count.

The CoC continues to make strides towards having accurate data due to an increase in funding, staff capacity, and systems to measure housing instability. Although the 2023 unsheltered PIT Count was part of a new tri-county implementation, the methodology for surveying unsheltered individuals did not change dramatically from 2019 to 2023. One data quality change in 2023 is that Portland State University and Focus Strategies worked to compare unsheltered count information between the three counties to identify potential duplicate entries. This effort identified four individuals who would have been counted in Clackamas County while already having a survey completed in Multnomah County. Compared to the 2019 PIT Count, our CoC reported a reduction in unsheltered persons from 223 to 178. This change may be attributable to the influx of funding and resources to our CoC associated with the Supportive Housing Services measure.

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

(limit 2,500 characters)

1. CoC identified key risk factors through extensive stakeholder engagement including with communities of color coalitions, individuals with lived experience of homelessness, housing provider network and the public. Stakeholder engagement was bolstered by data analysis including CE, HMIS, DV Comparable Database, SPM data, and data trend evaluation with specific emphasis on evaluating data from front-end services designed to assist people experiencing housing instability before or shortly after entering homelessness. Key risk factors identified for first-time homelessness are low income, generational poverty and homelessness, single parent families, fleeing DV, large families, and disabling conditions. CoC also recognizes disparities in homelessness exist when comparing BIPOC and White communities caused by systemic racism regardless of other risk factors.

2. CoC uses multiple strategies to address first-time homelessness, including:
 1) Tiered CE assessment designed to assess the ability to divert from homelessness. The assessment includes exploring participant's current strengths and support system while identifying needs to resolve their housing crisis.
 2) Resource Navigation expands CoC's system service capacity to assist first-time homeless. Resource Navigation provides opportunities for in-depth conversations with people experiencing a housing crisis focusing on problem-solving, identifying immediate, safe housing solutions through mediation, negotiation, or connecting people to community resources and support networks.
 3) Landlord-tenant mediation eviction prevention program provides diverse, bi-lingual staff (Spanish and English) who identify and support those facing eviction providing landlord mediation to help reach solutions preventing eviction.
 4) Rapid re-housing (RRH) assists households who are recently or on the verge of homelessness. This programming includes housing search assistance, case management, and short-term rent assistance to help households move from temporary housing or homelessness into permanent housing. Short-term Rent Assistance is a limited-term eviction prevention program that assists households with incomes below 80% of the area median income with rent payments for up to three months.

These key strategies along with many others prevented evictions for 1,228 households (2,679 people) in FY24.

3. The CoC Lead and Steering Committee are responsible for overseeing this strategy.

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

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

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

2C-2.	Reducing Length of Time Homeless—CoC’s Strategy.	
	NOFO Section V.B.5.c.	
	In the field below:	
	1. describe your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;	
	2. describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,500 characters)

1. CoC’s primary strategy to reduce LOT homeless is by prioritizing individuals with longest LOT homeless for available permanent housing with access to supportive housing case management and permanent supported housing. CoC has invested significantly in these approaches, understanding that permanent housing with supportive services is proven to be the most effective type of housing for people with extremely low income, and one or more disabling conditions and are at risk of or are experiencing long-term or frequent episodes of literal homelessness. In FY24, 412 households (775 people) were placed in PSH and housing retention was over 95%, well over the CoC’s 85% goal. Nearly 1000 households have received supportive housing case management services.

2. CoC has developed a comprehensive strategy to identify and house individuals and families with the longest LOT homeless through the BFZ framework including an integrated housing system with the CoC along with other key stakeholders such as HACC, county and local governments, and other stakeholders to work towards homelessness being rare, brief, and non-re-occurring in our County. Using a data-driven approach, the CoC brings together key housing partners for regular case conferencing utilizing comprehensive, real-time BNL, CE, and HMIS data to strategize, coordinate and adapt services to identify, prioritize and address population needs more effectively. Inflow case conference meetings focus on identifying trends, new system entrants, and adapting priorities based on outlined goals. This is a data evaluation heavy meeting attended by various system partners including culturally specific housing providers, and county staff (including leadership). Outflow meetings focus on identifying the challenges of helping individuals obtain housing once they have been referred to a specific program with the goal of reducing the time from identification to move in.

3. COC Lead and Steering Committee oversee this strategy.

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

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

1. CoC has developed a comprehensive strategy to increase the rate that individuals and persons in families in shelter, TH, and RRH exit to PH anchored by the BFZ framework strategically investing in housing and support services across the continuum of care ensuring a balanced system affording opportunities to quickly move individuals and families through the continuum to permanent housing destinations working towards homelessness being rare, brief and non recurring. CoC convenes key leadership across the county and nonprofit housing providers to consistently review and analyze inflow and outflow data identifying opportunities to reallocate resources where needed ensuring this balanced continuum of care. Additionally, in support of this balanced system approach, CoC, in collaboration with PHA, is transitioning all mainstream vouchers into the CE system allowing for better service coordination and prioritization and increasing access to permanent housing for the most vulnerable.

2. CoC strategy to increase the rate that individuals and persons in families residing in PH projects retain their PH or exit to PH destinations is to invest more in housing navigation and placement services, PH with supportive case management, and landlord outreach. CoC has capacity to serve over 600 households to support households into permanent housing providing a full range of services from navigation, placement, to supportive housing case management ensuring continuity of care. Navigators provide connections with long-term support services, help navigate the housing placement process following a Housing First Model, providing engagement, problem solving, relocation assistance and support as needed. Supportive Housing Case Management is dedicated to ensuring participants remain in their housing long-term. Intensive, relationship-based, and trauma-informed one-on-one case management is focused on housing stabilization and lease compliance and is offered with highly flexible services tailored to meet the needs of each household. 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 has achieved a successful exits/retention rate of 95% in FY24.

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

2C-4.	Reducing Returns to Homelessness—CoC's Strategy.	
	NOFO Section V.B.5.e.	

In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;
2.	describe your CoC's strategy to reduce the rate that individuals and families return 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. Anchored by BFZ framework and approach, CoC brings together key housing partners for regular and consistent case conferencing utilizing comprehensive, real-time by-name (BNL) data to identify those who leave and return to the system working towards homelessness being rare, brief, and non-recurring. CoC has also increased their investment “front line” staffing to identify those that may have returned to homelessness including reassessing for services and supporting individuals and families to connect with CE and placed on the BNL. In addition, increased investments in CE have allowed “live answering” of the CE Hotline to expedite identification of homelessness return and connection to services.

2. CoC’s strategy is to invest into key prevention efforts including a) Utility Payment Program offering participants the ability to have their utilities directly paid on their behalf preventing lease violations and eviction notices. b) Supportive Housing Case Management Services provide intensive, relationship-based, and trauma informed one-on-one case management focused on housing stabilization and lease compliance. Services provided are highly flexible and tailored to meet the needs of each household including money management support, landlord mediation and support, problem solving and crisis management; connections to education and employment opportunities, and flexible funding to support housing stability and wellness goals. d) Eviction prevention includes peer support specialists who provide supportive services to prevent evictions. Peer support specialists also plan and coordinate resident community events, resident initiatives, and assist residents with resource referrals and systems navigation. Eviction prevention funding is used for arrears in utility bills and past rent, paying for car repairs or other major expenses to avoid rent arrears. f) Rapid Re-housing (RRH) includes housing search assistance, case management, and short-term rent assistance to help households move from temporary housing or homelessness into permanent housing. CoC also incorporates long-term subsidies (vouchers) for permanent supportive/non-time limited housing subsidies for RRH participants. Short-term Rent Assistance is an eviction prevention program that assists households with incomes below 80% of the area median income with rent payments for up to three months.

3. CoC Lead and HSSC is responsible for overseeing this strategy

2C-5.	Increasing Employment Cash Income–CoC’s Strategy.	
	NOFO Section V.B.5.f.	

In the field below:

1.	describe your CoC’s strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.

(limit 2,500 characters)

1. CoC’s strategy to increase employment income starts with integrating self-sufficiency support expectations into housing services. CoC expects housing providers to reach a goal of 80% of those served increasing or maintaining total income at end of FY or exit. CoC supports underperformers at monthly 1:1 meetings inquiring about barriers, supports needed, and connecting them with high performing agencies for best practices, strategies and resources. CMs also work with participants 1:1 about goals on income and employment opportunities including direct referrals to vocational rehabilitation for those with a disability and interested in employment. In addition, resources are shared between agencies related to employment and educational opportunities at monthly CoC project meetings.

CoC tracks potential employment barriers such as newly identified disabling conditions, recent DV incidences, increase/decrease income, new educational attainment and share with providers during 1:1 check ins and monthly all provider meetings.

2. CoC has an MOU with CWP, the local workforce board, who prioritizes workforce program access for CoC participants. CoC providers leverage resources to support participants’ finding, maintaining and advancing in employment. CoC ensures the providers understand and utilize this partnership by facilitating monthly workforce partnership network meetings. Also, new this year, the CWP partnership expanded with STEP (Training and Employment Program for individuals who have experienced or at risk of homelessness who are receiving Supplemental Nutrition Assistance Program food benefits) providing career counseling, job placement, and training, alongside co-case management with Supportive Housing Case Management. In addition, CoC partners with Children, Family and Community Connections (CFCC), who has specialized employment services for veterans and individuals returning from incarceration, and PHA Family Self Sufficiency (FSS) for people who receive public housing or Section 8 offering employment and education support. Lastly, CoC, with the County’s Behavioral Health Team offers individual and group skills training, including health and wellness, dialectical behavioral therapy (DBT), and employment essentials. The team is developing a "DBT in the Workplace" group and collaborates with providers on the Supportive Employment Advisory Council.

3. CoC Lead and Steering Committee oversee strategy

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

(limit 2,500 characters)

1. CoC's strategy to increase non-employment cash income is through direct referral relationship with Assertive Supplemental Security Income Service Team (ASSIST), who provides disability benefit counseling. ASSIST program provides dedicated staff to do comprehensive SSI/SSDI applications for County residents who are experiencing or at risk of homelessness. Representation is provided through the full adjudicative process. CoC supplements ASSIST with SOAR certified provider staff to assist clients within their programs.

In addition, the State adopted a centralized public benefit application. DHS Representatives regularly present at CoC meetings and community stakeholder meetings providing information related to this centralized process, as well as regularly providing updates on TANF and General Assistance eligibility and application process. In addition, CoC staff review non-employment cash income performance indicators with providers at 1:1 check-in providing support, resources and consultation.

DV survivors 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). DV Advocates are co-located at two county offices who aid survivors apply for benefits and provide wrap-around support services including immediate diversion service access and the Coordinated Housing Assessment and CoC waitlists.

CMs support participants to identify strategies to increase participants' stability, including increased income and referrals to appropriate sources such as ASSIST, TANF as well as seeking child and/or spousal support payments. In addition, CMs work with individuals and families who have wages garnished for child and/or spousal support and advocate for ending garnishment, when appropriate.

CoC also supports veterans accessing their VA benefits with case managers working closely with Veterans Village residents to develop individualized care plans, including working closely with the local VA. Also, CoC is establishing a new service enriched resource center in downtown Oregon City, for people experiencing homelessness to address housing barriers and engage with service providers on site. Planned resources include ID/documentation recovery (often needed for benefits), as well as enrollment in public benefits.

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

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

Project Name	Project Type	Rank Number	Leverage Type
PH-RRH DV Bonus P...	PH-RRH	5	Both
RRH Expansion Pro...	PH-RRH	20	Both
FY2024 Housing th...	PH-PSH	7	Housing

3A-3. List of Projects.

1. What is the name of the new project? PH-RRH DV Bonus Project New FY24
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: 5
5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? RRH Expansion Project FY24
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: 20
5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? FY2024 Housing the People PSH
2. Enter the Unique Entity Identifier (UEI): NVWKAVB8JND6

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your 7
CoC's Priority Listing:

5. Select the type of leverage: Housing

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
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3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.r.	

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 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 Serve Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	Cost Effectiveness of Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

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

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

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

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Did your CoC submit one or more new project applications for DV Bonus Funding?		Yes
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4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.j.	

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 2024 Priority Listing.

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

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

4A-3.	Data Assessing Need for New DV Bonus Housing Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.j.(1)(c) and I.B.3.j.(3)(c)	

1.	Enter the number of survivors that need housing or services:	1,481
2.	Enter the number of survivors your CoC is currently serving:	663
3.	Unmet Need:	818

4A-3a.	How Your CoC Calculated Local Need for New DV Bonus Housing Projects.	
	NOFO Section I.B.3.j.(1)(c)	
	Describe in the field below:	
	1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
	2. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
	3. if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

(limit 2,500 characters)

The CoC calculates the number of DV survivors needing housing through data from Coordinated Housing Access (CHA) intakes and the DV Comp HMIS. Everyone accessing the CoC is asked about DV via the screening tool. All “DV door” participants who are seeking housing and services are recorded in the DV Comp HMIS by Clackamas Women’s Services (CWS). CWS provides 24/7 access to the CHA DV door. Should a survivor needing housing choose not to be transferred to CWS, this individual or family would be recorded on the mainstream HMIS and through CHA screening tools.

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	
	Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.	

Applicant Name
Clackamas Women's...

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

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	

Enter information in the chart below on the project applicant that applied for one or more New DV Bonus housing projects included on your CoC's FY 2024 Priority Listing for New Projects:

1.	Applicant Name	Clackamas Women's Services
2.	Rate of Housing Placement of DV Survivors–Percentage	100%
3.	Rate of Housing Retention of DV Survivors–Percentage	80%

4A-3b.1.	Applicant's Housing Placement and Retention Data Explanation.	
	NOFO Section I.B.3.j.(1)(d)	

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

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

(limit 1,500 characters)

1. The DV Comp HMIS tracks housing placement rate through the date of intake, exit, and when the household exits to safe, stable housing. Reviewing intake date and date household entered a housing placement, identifies the length of time accessing housing and the number of households securing housing placement. Additionally, projected housing placements at the time of application are compared to housing placements in the grant period to determine whether the goal is met. Past two years, the number of actual placements exceeded the number of projected placements projected in the application, demonstrating successful practices.
2. Yes, the rate accounts for exits from initial housing placement to safe housing destinations. The DV Comp HMIS data and case files inform the number of participants who exited the program to permanent housing destinations
3. Housing post-subsidy (post-exit) retention information is gathered through an exit survey, 3-month and 6 month check-in. Housing safety and stability is included at all touch points. Housing retention during the assessment period is compared with initial housing placements and household program exits into safe housing destinations. Within the DV Comp HMIS, individuals and families in each program are tracked so that we can provide project-specific data.
4. HMIS DV Comp Site is the primary data source. This data and client file is compared to ensure data quality assurance.

4A-3c.	Applicant's Experience Housing DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	
	Describe in the field below how the project applicant:	
	1. ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
	2. prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan;	
	3. determined survivors' supportive services needs;	
	4. connected survivors to supportive services; and	
	5. moved survivors from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1. Clackamas Women’s Services (CWS) (a CoC partner & DV “door” for CE), uses a Housing First approach for immediate PH access without readiness requirements or preconditions. Survivors experiencing homelessness are identified & engaged via street outreach, partnerships with shelters, & referrals from other community orgs. A standard CE assessment prioritizes placement based on need & vulnerability. CWS ensures that survivors are quickly connected to safe & stable housing with the support of case managers who provide trauma-informed, wraparound services.
2. Survivors are prioritized in the CoC’s CE processes for BNL case conferencing. The CoC consistently applies an emergency transfer plan, framing processes for quick relocation of DV survivors & facilitating quick transfers via streamlined procedures & partnerships.
3. DV survivors’ needs for supportive services are identified via standard tools & assessments focusing on immediate needs & issues. Based on the assessment, an individualized services plan is developed with the survivor, respecting their autonomy & preferences. Supportive services are designed to mitigate family fragmentation & resettling and address isolation by fostering community connections, address trauma recovery during the transition time entering housing, & provide long-term supports to maintain stability.
4. Survivors are connected to supportive services based on their assessment & via case management - services to retain housing, including financial planning & access to legal assistance. CWS provides a connection to support in the moment of crisis through a 24/7 crisis line, in-person at ASP-FJC, & mobile advocacy. Services include case management, counseling, or support/self-care groups, parenting support, accompaniment & advocacy, navigating systems, basic needs assistance, safety planning & children’s services.
5. Rent reasonableness tools are used throughout the process to assess & plan for sustainability. As survivors progress towards permanent stable housing or show signs of needing longer- term rental assistance, plans are adjusted. This includes discussing goals & resource needs & continually making new iterations & pathways. Once a survivor is safely housed, staff work with them to establish structures to support their self sufficiency & daily life. Case Managers support survivors in achieving economic independence & sustaining goals including pursuing child support, applying for benefits, & assistance w/ IDAs.

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

(limit 2,500 characters)

1. CWS, the CoC’s “DV door” uses a VAWA-compliant database; confidentiality is maintained by CWS standards that follow VAWA statute and Oregon’s Advocacy Privilege. Information is not shared without the explicit release of written, informed, and reasonably time-limited information. A release of information is not a requirement for services and voluntary services are not a requirement for housing. Survivors are notified of what information a program has and how it is used. Any report generated for this project will be done in aggregate.

2. CWS’ crisis line is staffed 24/7, and survivors receive immediate screening once urgent safety concerns are addressed. CWS provides safety planning before CE screening. CE assessments are trauma-informed and require no details about the abuse. Safety planning is a fluid process responsive to changing circumstances.

3. CWS’ Program is a scattered-site model and subsidized rental structure. This ensures that neighborhood-based private or public housing is in a safe area for each circumstance. Services occur at the emergency shelter, the secure Family Justice Center, or through mobile advocacy in locations identified as safe by the survivor. CWS enters data with a unique number created in the DV Comp HMIS to hold all demographic/program data and manage the CoC DV waitlists. A unique number is then created in the mainstream HMIS, giving survivors an anonymized placeholder on homeless housing referral lists they qualify for. This allows choice while maintaining confidentiality.

4. As the CoC funds new providers, CWS staff work with all providers to coordinate CE procedures for DV survivors, ensure appropriate ROI procedures, and continue to ensure maximum choice, safety, and confidentiality. The CoC’s 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.

5. CWS’ shelter is staffed 24/7 with a security gate and cameras. During screening, the survivor learns if the shelter location is safe including dialogue about the abuser’s job or travel patterns that may pose a safety risk (i.e., if the building requires maintenance or if there are family members that may shop near the location, etc.) Other options will be considered if the location is unsafe, like relocating to a motel. CWS offers multiple motel options and uses ReloShare to book stays confidentially.

4A-3d.1.	Applicant’s Experience in Evaluating Its Ability to Ensure DV Survivors’ Safety.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement throughout the project’s operation.

(limit 2,500 characters)

During the initial screening, safety planning is first discussed with a survivor upon contact with CWS. Safety planning is a fluid process that is responsive to changing circumstances and proactive in identifying options for survivors. CWS has in-house experts specializing in high-risk/high-lethality cases where survivor safety is especially tenuous. The CWS Deputy Director hosts comprehensive safety training for staff on de-escalation with program participants, responding to abusers, advanced safety planning, and strangulation signs, symptoms, and response. Staff then receive ongoing training on assessing high danger/lethality cases and applying safety planning through culturally- and population-specific lenses (i.e., Deaf and Hard of Hearing community, human trafficking, LGBTQIA+, youth, rural, individuals living with a disability, severe and persistent mental health, individuals living with addiction, etc.). This knowledge and expertise create a solid and stable foundation for survivors seeking safety. Continuous survivor feedback and evaluation are built into CWS programming. From the onset of the relationship, the staff expressed openness to ongoing feedback. This feedback is cultivated through in-person exit interviews, and an anonymous survey that asks about safety and resources received. CWS' Shelter and Housing Program staff have 105 years combined providing survivor services through CWS. They are the agency's most tenured direct service team. CWS' Shared Advocacy Model ensures that the CWS Shelter and Housing staff are aware of the specific safety needs of every participant. Staff members check in at each shift change and meet as a whole team weekly. The weekly meeting includes time to identify safety needs and barriers to safety to ensure all participants have a consistent experience that centers on their individualized safety needs. The Deputy Director works with the leadership team to conduct a routine safety audit of the agency's services, policies, and practices. In response, CWS has been collaborating with security at site-based programs and providing Ring cameras to participants.

4A-3e.	Applicant's Experience in Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	
	Describe in the field below the project applicant's experience in:	
1.	prioritizing placement and stabilization of survivors;	
2.	placing survivors in permanent housing;	
3.	placing and stabilizing survivors consistent with their preferences; and	
4.	placing and stabilizing survivors consistent with their stated needs.	

(limit 2,500 characters)

1. All CWS Case Managers are trained in the CHA tool and can provide this assessment as quickly as the first point of contact in English, Spanish, or through an interpreter for other languages. This enables CWS to place the survivor on a confidential waitlist for ALL housing programs in Clackamas County and can directly link survivors to the robust CWS Emergency Shelter and Housing Program as needed. Once a survivor is safely housed (and/or in a safe environment of their choice), CWS staff works with them to establish structures to support their self-sufficiency and daily life.

2. Survivors are connected to the CWS Housing Program through partner agencies, the Family Justice Center, the CWS crisis line, or the Coordinated Housing Access (CHA) program. All screening is designed to be a low barrier, culturally responsive, and trauma-informed and is done at first contact so that access to support is not delayed. Once admitted to CWS' Emergency Shelter, participants who have identified housing needs through their intake and services assessment are provided access to CWS' Housing Program. CWS manages multiple federal, state, and county housing grants and has a solid history of stabilizing survivors in permanent housing. For example, CWS' recently funded OVW Housing Project served more households (26) than projected (14); and of the 26 households served, 25 remained housed after the rental subsidy ended.

3. CWS services are voluntary, not time-limited, and not a requirement to obtain housing. This model embraces the autonomy of the survivor as an expert in their own experience with the ability to choose their preferences. Entry into the DV Comp HMIS and then into mainstream HMIS gives survivors an anonymized placeholder on homeless housing referral lists they qualify for, allowing for choice while also maintaining confidentiality. CWS ensures that survivors are quickly connected to safe and stable housing with the support of case managers who provide trauma-informed, voluntary wraparound services.

4. The placement and navigation process is survivor-centered and tailored to the survivors' self-identified safety goals. CWS regularly incorporates survivor feedback and community needs into program development. Furthermore, CWS utilizes a strengths-based model to build on the resiliency and skills of each participant. Staff utilizes strength-based tools and measures leading to well-defined goals and aspirations as articulated by the survivor.

4A-3f.	Applicant's Experience in Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures survivors and staff interactions are based on equality, and minimize power differentials;	
2.	providing survivors access to information on trauma, e.g., training staff on providing survivors with information on the effects of trauma;	
3.	emphasizing survivors' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
4.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	

	5. providing a variety of opportunities for survivors' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
	6. offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. CWS Programs provide victim-centered, trauma-informed services through an equity lens from the first point of contact. The focus is on building relationships regardless of outcomes. The staff and participant relationship is part of social and community integration. If issues arise, this relationship allows staff and participants to work through solutions together. Together, the staff and participant ensure the participant's wishes and stated needs are integral in determining the permanent housing solution. Due to this, CWS has never terminated a participant from the Housing Program. As relationships are the core of CWS, it is natural for services to continue after a participant has graduated from rental assistance and is self-sufficient. Most survivors begin with case management and support around critical needs, but transition into accessing counseling and health support as they become more stable, and often remain engaged in our services for years to come.
2. CWS staff-certified 40+ hours of Domestic Violence Advocacy Training, a range of introductory to advanced level training on DV/SA, and training on co-occurring issues such as housing, mental health, substance misuse, oppression, etc., for staff. All CWS staff receive significant training on trauma-informed practices to ensure safety, transparency and predictability, community, collaboration, voice, and cultural responsiveness in every program. As part of initial engagement and throughout the Case Manager and participant relationship, staff provides information to participants about trauma and how it may be impacting the survivors and their children's lives. Opportunities include, for example, the Trauma Recovery Empowerment Model.
3. Survivor-centered advocacy is at the heart of CWS programs. Engaging survivors in shaping services and defining program goals specific to their communities is essential. CWS' trauma-informed approach aims to provide survivors with culturally responsive support while also advancing racial equity. By creating a strength-based community with survivors who come from many different backgrounds and have a specific shared experience, we can break the isolation of interpersonal violence from a place of respect and dignity. Staff will support program participants in developing individualized goals and identifying resources that may be helpful in their journey. Long-term, multi-faceted services mitigate the impact of trauma and help with recovery.
4. CWS staff receive population-specific training, such as language and disability access, to meet the individualized needs of each survivor seeking services. CWS also offers visual representations, cultural adaptations of services, and consideration of cultural foods, holidays, traditions, rituals, and other cultural practices. CWS has bilingual staff who speak Spanish, Russian, Swahili, French, Kirundi, Kinyarwanda, and Portuguese, along with a Language Access Plan providing in-person and video interpretation services. CWS created training curricula around working with LGBTQIA+ survivors and understanding the intersections between violence and oppression. Additionally, Case Managers can provide ongoing culturally responsive risk assessment and safety planning, emotional support and services, and refer participants to CWS' Latinx support group, or culturally specific partner agencies. Many Promotoras, a peer-based cohort of survivors providing outreach to the Latinx community and informing CWS programming, started as Housing Program participants.
5. Case Managers are dedicated to rebuilding a sense of community. Many survivors do not know whom to trust first and the circle may begin with just their Case Manager. But through relational-focused work, CWS staff collaborates

with participants to expand that circle and reconnect to a safe community, be it through support groups, children’s schools, faith communities, hobbies, or the survivor’s past community that an abuser may have isolated them from. CWS includes community connection activities and wellness programming to support incorporating well-being into individualized service plans and to mitigate the harm caused by the isolation of violence. Participants can also be referred to specialized support groups hosted by CWS such as Parenting Café, Latinx Support groups, and art-based therapy groups for youth survivors.

6. CWS offers multiple opportunities for group connection through trauma-informed support and parenting groups in English and Spanish, such as Making Parenting a Pleasure and Parent Café. Additionally, parents can connect to Camp HOPE Oregon, a week-long summer camp for children impacted by domestic violence—many of whom have parents receiving CWS services. Parents are then able to attend during Camper Caregiver Weekend, a component of Camp HOPE that allows parents to celebrate their strengths alongside their children and allows them to connect with other families in similar circumstances.

4A-3g.	Applicant’s Experience Meeting Service Needs of DV Survivors.	
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NOFO Section I.B.3.j.(1)(d)

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

(limit 5,000 characters)

Participants received voluntary supportive services individualized to their self-identified needs and goals. Participants determine their goals, and Housing Case Managers (HCM) offer support and resources to achieve them. CWS provides various services, including case management and advocacy, ongoing safety planning, assistance filing protective orders, legal advocacy, financial empowerment services, youth programs, community building and wellness activities, parenting support, counseling, support groups, and more. A few examples include:

Advocacy- CWS’s shared advocacy model and 24/7 support line ensure that participants can access support anytime. This includes connecting survivors to legal services for DV-specific needs such as restraining orders. Divorce and custody resources are also available on-site through partners including Legal Aid Services of Oregon and Victim Right Law Center.

CWS Youth Services provided the Camp HOPE and Pathways program and supported enrollment, establishing child-care support, after-school programming, parenting support groups, parenting café, and A Window Between Worlds, an art-based therapy group for youth.

Enhancing Resources—Most survivors CWS works with are unemployed or underemployed, often because the abuse has disrupted or dismantled their opportunities to work. Many rely solely on TANF income or have no income at all. CWS provides tangible support to help them achieve financial independence, whether economic, vocational, or educational. Support included setting budget goals, pursuing child support, TANF, Social Security benefits, assistance with IDAs, and other creative solutions to reduce household costs, such as childcare arrangements, ridesharing, low-cost public transportation, etc. Supportive HCMs work with participants to develop a resource plan. This includes planning for the end of financial assistance and the goal of self-sufficiency through increasing income, obtaining stable employment, or connecting with other supports and resources. CWS partners with Clackamas Community College and Workforce Partnerships to achieve goals.

Trauma Recovery- Licensed therapists provide counseling services to youth and adults and family counseling for children and their safe caregivers. One example is the Latinx Support Groups facilitated in Spanish and consisting of a 20-week culturally specific curriculum.

Housing Stability—HCMs provided housing navigation to guide survivors through evaluating available housing options, helped them enter housing applications, and educated landlords. They also assisted in addressing credit repair needs through strategies such as utilizing flex funds to mitigate a past-due account and assisting with the expungement process. In a high-demand housing market, CWS provided the necessary support to respond quickly to landlord questions and information requests.

Once a survivor is safely housed, our staff works with them to establish the structures that can support their daily life, such as finding a close and affordable grocery store, creating a system so they don’t miss paying new bills, getting kids connected to closer daycare, etc. Highly flexible services included basic (yet essential) activities such as assistance with house cleaning, grocery shopping, fostering communication between property owners and tenants, strategies to manage pets, and more. These small systems allow survivors to move out of survival mode and work on their larger self-identified goals from a place of more stability.

4A-3h.	Applicant's Plan for Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	
	Describe in the field below how the project(s) will:	
1.	prioritize placement and stabilization of program participants;	
2.	place program participants in permanent housing;	
3.	place and stabilize program participants consistent with their preferences; and	
4.	place and stabilize program participants consistent with their stated needs.	

(limit 2,500 characters)

1. New Case Managers are trained in the Coordinated Housing Access tool and provide this assessment as quickly as the first point of contact. Entry into the DV Comp HMIS and then into mainstream HMIS gives survivors an anonymized placeholder on homeless housing referral lists allowing for choice while also maintaining confidentiality. They will be directly linked to the CWS Shelter and Housing Program, then survivors will be placed into rapid rehousing and supported through case management.

2. CWS will ensure participants exit to or maintain permanent housing with 1) safety planning, 2) addressing safety issues/impacts of trauma, and 3) exploring pathways to promote wellness. This success is evidenced by a recent project where CWS served more households (26) than projected (14), and 25 remained permanently housed after the 12–24-month rental subsidy ended. CWS will use those tools for this new project. The new RRH project will move survivors into housing using a Housing First Model, with the goal of placement becoming permanent after the subsidy ends. Case managers will work with participants to address any barriers to housing, and to identify goals and aspirations that will enable them to stay housed. If not possible, CWS will provide a pathway into longer-term solutions such as PSH or project-based vouchers.

3. Services will begin immediately upon award through CWS' existing program and will offer a detailed list of support available to mitigate barriers. Our Case Management model prioritizes the survivor's preference, and staff will use strength-based tools leading to well-defined goals articulated by the survivor. For example, CWS' scattered-site tenant-based model supports survivors to make their own decisions on housing and where they will feel safely placed.

4. CWS' navigation is designed to meet a survivor's stated needs so they can move into housing as quickly as possible. This new project is available to all survivors with a focus on trafficking victims. CWS will break isolation through our assessment model centered on relationships, culturally responsive services, and working with the survivor as a whole person with unique needs. For instance, while CWS offers additional services available to housing participants, such as counseling, legal services, applying for benefits, etc., we will ensure that engagement in services is not mandatory to receive housing and that the survivor will have the autonomy to choose based on their own needs.

4A-3i.	Applicant's Plan for Administering Trauma-Informed, Survivor-Centered Practices in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	

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

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

(limit 5,000 characters)

1. CWS Programs will provide trauma-informed services through an equity lens from the first point of contact. The focus of this new project is building relationships regardless of outcomes, with relationships between staff and participants as part of social and community integration. If issues arise, this will allow staff and participants to work through solutions together. Staff will ensure the survivor's stated needs are integral in determining the permanent housing solution. CWS partner Safety Compass (SC) will provide referrals and advocacy that is relationship-based and individualized to meet the unique needs of each participant and their household.

2. CWS and SC staff are trained in the state-mandated 40-hour Domestic Violence Advocacy Training, as well as co-occurring issues such as housing, commercial sex exploitation trafficking, mental health, substance misuse, oppression, etc. Additionally, direct service staff will receive training on trauma-informed practices to ensure safety, transparency and predictability, community, collaboration, voice, and cultural responsiveness. As part of the initial engagement and throughout the relationship, case managers and counselors will provide information to participants about trauma and how it may impact the survivors and their children's lives. Options will include, for example, the Trauma Recovery Empowerment Model group.

3. In this new project, CWS will utilize strength-based advocacy such as the Asset-based community development (ABCD) model. This supports participants in developing individualized goals, talents, problem-solving abilities, and resources that may be helpful in their journey. Case Managers will work with participants to explore their personal, relational, and community strengths (all self-defined) and incorporate them into case plans. By exploring these goals and aspirations with their Case Manager, it is natural for services to continue after a participant has graduated from rental assistance and is self-sufficient. This new project will support this continued effort as an integral part of healing by training Case Managers in strength-based methods of assessing the survivor's identified hopes and needs.

4. New CWS Case Managers will receive population-specific training, such as language and disability access, to meet the individualized needs of each survivor seeking services. CWS will continue to offer visual representations, cultural adaptations of services, and consideration of cultural foods, holidays, traditions, rituals, and other cultural practices. CWS has bilingual staff who speak Spanish, Russian, Swahili, French, Kirundi, Kinyarwanda, and Portuguese, along with a Language Access Plan providing in-person and video interpretation services. CWS creates training curricula around working with LGBTQIA+ survivors and understanding the intersections between violence and oppression. SC will offer culturally specific peer-based services provided by advocates with lived experience and partners with culturally/linguistically responsive agencies to expand their ability to serve survivors of diverse backgrounds. Additionally, CWS Case Managers will provide ongoing culturally responsive risk assessment and safety planning, emotional support and services, and refer participants to CWS' Latinx support group, or culturally specific partner agencies. For example, many Promotoras, a peer-based cohort of survivors providing outreach to the Latinx community and informing CWS programming, started as Housing Program participants. This new project will continue to support bridging these relationships across programs.

5. Case Managers are dedicated to rebuilding a sense of community. Many

survivors do not know whom to trust first and the circle may begin with just their Case Manager. CWS staff will continue collaborating with participants to expand that circle and reconnect to a safe community through support groups, children’s schools, faith communities, hobbies, or the survivor’s past community that an abuser may have isolated them from. CWS will include community connection activities and wellness programming to support incorporating well-being into individualized service plans and to mitigate the harm caused by the isolation of violence. Participants will also be referred to specialized support groups hosted by CWS.

6. CWS will continue offering opportunities for group connection through trauma-informed support and parenting groups in English and Spanish, such as Making Parenting a Pleasure and Parent Café. Additionally, parents can connect to Camper Caregiver Weekend through Camp HOPE Oregon, a week-long summer camp for children impacted by domestic violence—many of whom with parents receiving CWS services.

4A-3j.	Applicant’s Plan for Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New DV Bonus Housing Project(s).	
NOFO Section I.B.3.j.(1)(f)		
Describe in the field below how the new project will involve survivors:		
1.	with a range of lived expertise; and	
2.	in policy and program development throughout the project’s operation.	

(limit 2,500 characters)

CWS incorporates feedback from individuals with a range of lived expertise into practices and policies. All program participants are invited for an interview, a relational process for cultivating feedback, and invited to participate in listening sessions that include multiple modalities. Survivors are also offered anonymous feedback forms. CWS works with 2 groups of survivors in project development, implementation, and evaluation. VOICES is a survivor-led committee that supports each other and incoming clients, identifies gaps in services, and provides feedback on service delivery and policies from their lived expertise. The CWS Promotoras program conducts outreach to Latinx populations and informs the development of culturally specific services. Promotoras' community outreach model trains community members to become peer specialists who create and inform equitable access to services. CWS is developing a Youth Advisory Board gathering youth survivors' input to develop programming. CWS began an Affinity Group for LGBTQIA+ staff as another way to create a culture of belonging and a beloved community for staff, volunteers, and survivors.

CWS staff and board members bring experiences actively utilized in program and policy planning and implementation. Forty percent of CWS staff are bilingual/bicultural and CWS offers pay differentials for bilingual staff. CWS staff represent many communities: 35% identify as Latinx, 25% BIPOC, 10% from the immigrant community, 42% identify as living with a disability, 20% are single parents, 20% have experienced homelessness, 70% are survivors of domestic or sexual violence, and 50% are LGBTQIA+. The CWS Leadership Team includes representation from the LGBTQIA+ community, individuals living with a disability, the Latinx community, and the Native American community. Over 75% of current Board members have lived experience with DV/SA or homelessness.

CWS staff reviews participant feedback, survivor input, and project data to assess progress, discuss lessons learned, identify areas of improvement, implement changes, and review how changes have been working. Assessments have led to shifts in CWS programs to continue effectively meeting survivor needs and the needs of homeless individuals. CWS partners with Safety Compass, a provider serving trafficking survivors, on a Transitional Housing project that receives feedback from participants relating to the continuum of care and the Human Trafficking MDT response.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	10/30/2024
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	10/30/2024
1D-10a. Lived Experience Support Letter	Yes	Lived Experience ...	10/27/2024
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	10/29/2024
1E-2. Local Competition Scoring Tool	Yes	FY2024 Local Comp...	10/28/2024
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	10/25/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	10/03/2024
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	10/30/2024
1E-5b. Local Competition Selection Results	Yes	Local Competition...	10/28/2024
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting—CoC-A...	10/28/2024
1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	10/28/2024

2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	2024 HDX Competit...	10/02/2024
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	10/30/2024
3A-2a. Healthcare Formal Agreements	No	Healthcare Levera...	10/30/2024
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Lived Experience Support Letter

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: FY2024 Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: Web Posting–CoC-Approved Consolidated Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application Maximum Size:

Attachment Details

Document Description: 2024 HDX Competition Report

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Leverage Commitments

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/13/2024
1B. Inclusive Structure	10/29/2024
1C. Coordination and Engagement	10/30/2024
1D. Coordination and Engagement Cont'd	10/30/2024
1E. Project Review/Ranking	10/29/2024
2A. HMIS Implementation	10/29/2024
2B. Point-in-Time (PIT) Count	10/30/2024
2C. System Performance	10/30/2024
3A. Coordination with Housing and Healthcare	10/29/2024
3B. Rehabilitation/New Construction Costs	10/29/2024
3C. Serving Homeless Under Other Federal Statutes	10/29/2024

4A. DV Bonus Project Applicants	10/30/2024
4B. Attachments Screen	10/30/2024
Submission Summary	No Input Required

ADMINISTRATIVE PLAN

FOR THE HOUSING AUTHORITY OF CLACKAMAS COUNTY

HOUSING CHOICE VOUCHER PROGRAM

Effective: January 2024

4-III.C. SELECTION METHOD

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

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

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

HACC Policy

Households applying from outside of Clackamas County must live in Clackamas County one (1) year with the voucher before being allowed to transfer (port out).

Vouchers will only be issued to those who have not left any type of subsidized housing in bad standing in the last 5 years, do not owe money to any PHA or have any EIV program violations that would otherwise exclude them from the program. No Sex Offenders will be allowed to participate in the program.

Preferences 1-5 will be served before any other preferences. Preference households will be served based on date and time of application. 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 qualify for a reasonable accommodation or VAWA transfer and 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, disposition, 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 VAWA 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. Definition of Work-focused Household: Work-focused household is a household in which neither the head, spouse, nor cohead is a senior or a person with disabilities. All households that do not meet the definition of a senior and people with disabilities household are considered work-focused households. Work-focused households will be given preference when over 75% of households served are at or below 30% AMI. **GENERAL PREFERENCE**

7. Households residing in Clackamas County The term “residence” includes shelters and other dwelling places where homeless families may be living or sleeping. Applicants who are working or have been notified that they were hired to work in Clackamas County will be treated as residents of Clackamas County. Graduates of, or active participants in, education and training programs in Clackamas County will be treated as residents of Clackamas County if the education or training program is designed to prepare individuals for the job market. The PHA defines training program as “a learning process with goals and objectives, generally having a variety of components, and taking place in a series of sessions over a period to time. It is designed to lead to a higher level of proficiency, and it enhances the individual’s ability to obtain employment. It may have performance standards to measure proficiency. Training may include but is not limited to: (1) classroom training in a specific occupational skill, (2) on-the-job training with wages subsidized by the program, or (3) basic education”. Employment, education, or training programs would include active participation in any of the following: GED or high school diploma, employment readiness programs, short term or long-term training programs that will result in a certification; or a degree-seeking program at a college or university with a minimum enrollment requirement of six credit hours. The previous list is not inclusive of all eligible employment, education, or training programs. Third-party verification of active participation or graduation from such program within the past year will be required to receive a preference. **GENERAL PREFERENCE**

8. 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, and have some income (cannot be zero income). **MOVING ON STRATEGY**

9. 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 through the CHA and provided supportive services. Preference status must be met at time of application. **GENERAL PREFERENCE**

10. 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 meet the

requirements set forth above during a fiscal year (July 1st to June 30th). If at the time more families meet this preference than there are slots available, families will be selected within the preference category based on the date and time of their application to the Housing Authority for housing assistance. Unused Disaster Vouchers do not carry over to the next fiscal year. **GENERAL PREFERENCE**

11. FYI households that are disabled and unable to fully afford rent at time of voucher sunset will be offered a preference voucher referral due to risk of returning to homelessness. **LIMITED PREFERENCE**

12. RLRA households that as a reasonable accommodation need to live outside the Metro region will be offered a preference voucher referral that meets their needs. Any voucher type that meets their need will be considered. Given RLRA client met homeless status at intake all types of vouchers can be considered (Mainstream, EHV, FYI, VASH, or regular voucher). **LIMITED PREFERENCE**

13. Disabled homeless or at risk of homeless families that are extremely low income will be given preference for the following special purpose vouchers: MS, SPC, FYI, EHV and RLRA. **LIMITED PREFERENCE**

B. Description of Preference

Here are all of our HCV Administrative Plan preferences as an excerpt and of those, 6, 7, 8, 9, 10, 11, 12, 13 apply to the unhoused community:

4-III.C. SELECTION METHOD

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

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

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

HACC Policy

All preferences must be referred directly by a referring service provider that enters into an Memorandum of Understanding (MOU) with the Housing Authority to serve families entered on the Coordinated Housing Access (CHA) or referred as an existing Housing Authority tenant or applicant. Households applying from outside of Clackamas County must live in Clackamas County one (1) year with the voucher before being allowed to transfer (port out).

Vouchers will only be issued to those who have not left any type of subsidized housing in bad standing in the last 5 years, do not owe money to any PHA or have any EIV program violations that would otherwise exclude them from the program. No Sex Offenders will 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. **Limited Preference**

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. **Limited Preference**

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. **Moving on Strategy**

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. **Moving on Strategy**

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. **General Preference**

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. **General Preference**

12. 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 meet the requirements set forth above during a fiscal year (July 1st to June 30th). If at the time more families meet this preference than there are slots available, families will be selected within the preference category based on the date and time of their application to the Housing Authority for housing assistance. Unused Disaster Vouchers do not carry over to the next fiscal year. 12. FYI households that are disabled and unable to fully afford rent at time of voucher sunset will be offered a preference voucher referral due to risk of returning to homelessness. **Limited Preference**

13. RLRA households that as a reasonable accommodation need to live outside the Metro region will be offered a preference voucher referral that meets their needs (either Mainstream, EHV, or regular voucher). **General Preference**

Link to the entire HCV Admin Plan and ACOP is here:

<https://www.clackamas.us/housingauthority/plansandreports.html>

10/26/2024

To Whom It May Concern;

This letter is to certify that we, lived experience members of Clackamas County's FY 2024 CoC Local Competition Scoring Committee, have participated in evaluating and setting local priorities for CoC funding. As part of this work, we have evaluated and scored project applications in the FY 2024 local CoC competition process – identifying which projects will be proposed for funding by HUD, and where they are placed on the priority listing. We additionally serve on other committees and workgroups for Clackamas County's CoC, with the goal of improving systems and processes across the continuum.

Sincerely,

Print Name: Kenzie Meyer, Former YAB Member, Current Lived Experience CoC Member

Signature: 

Date: 10/27/2024

Print Name: Domi Ramos, Former YAB Member, Lived Experience CoC Committee Member, Youth Housing Services Strategic Planning Group Member

Signature: 

Date: 10/27/2024

Print Name: Eric Gibson, CHA Core Team Member, Lived Experience CoC Committee Member

Signature: 

Date: 10-26-24

Clackamas County Continuum of Care- FY 2024 Ranking Process

This year HSSC made several changes to the application submission and rating and ranking process. HSSC developed a new “survey” option for agencies to submit their applications; however, also allowed agencies to submit through the current scorecard form. HSSC also established a Scoring Committee to score and rank proposed projects. The Scoring Committee met with 3 non-conflicted members of the HSSC on September 19th to finalize rating and ranking. Out of 6 Scoring Committee members, 4 have lived experience of homelessness.

This year’s competition included significant revisions to the score cards to better align with local and HUD priorities, improve applicant understanding of CoC expectations and provide clarity for reviewing and scoring applications. **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. Scorecard Revisions are outlined below:

All Scorecards Instructions were added to scorecards to provide more clarity to applicants establishing that narrative responses should focus on the specific project being proposed and not their organization. In previous years, some agencies focused on their organization with limited information on the specific project making it difficult for HSSC to appropriately evaluate the project. The instructions also clarified that narrative responses must also describe how sub-recipients, if any, will meet the standards established in each question. Many of the applications submitted includes sub-recipients and HSSC wants to ensure that all agencies involved in a project meet the criteria established in the score card. Additionally, the definition of culturally specific organization, culturally specific project, equity and Housing First were enhanced for clarity and understanding. HSSC also added a sub-question related to LGBTQIA+ community under the equity question to further align with HUD priorities. To accommodate new questions, we revised the number of points awarded across narrative response and project performance criteria. Points assigned to each narrative response and project performance criteria are provided below in the tables.

New Project Renewal, Renewal and First Year Renewal New questions related to consumer engagement and people with lived experience of homelessness engagement were added to these scorecards to further align with HUD and Local priorities. A new question related to cross-system collaboration was included in the **Youth New Applicant and Youth Renewal** scorecards to align with HUD and local priorities.

The following table includes qualitative and quantitative elements that are used to rate and rank each project based on project type. **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. There are several criteria that all projects are rated and ranked upon including culturally specific organization/culturally specific project; consumer/youth engagement; Equity; Healthcare organization engagement and collaboration; and Housing First. The remaining criteria are tailored towards specific project type it is assigned. Potential bonus points were awarded to projects that met each of the following criteria:

- The project increased the number of 100% Dedicated Chronically Homeless beds or Dedicated PLUS beds, intended to serve participants with severe barriers.
- The project increased to the number of total RRH beds.

- The applicant is a Culturally Specific Organization and/or the project is culturally specific.

Score Card (Project) Type/Criteria	New Applicant	New Project Renewal	First Year Renewal	Renewal	Youth New Applicant	Youth Renewal
Minimum Project Threshold Requirements (such as HMIS, CE, and Equal Access)	X				X	
HUD Application Requirements (such as eligible activities, project type)	X				X	
Increasing RRH and dedicated CH beds and projects that served non-chronic single adults.	X				X	
Bonus Points for Culturally specific organization and/or culturally specific project (4 points and 2 points)	X	X	X	X	X	X
Consumer/Youth Engagement – Collecting and using participant feedback (10 points – New Question)	X	X	X	X	X	X
Equity including policies and training; centering individuals with lived experience of homelessness; applying anti-racist/equity lens to project; centering individual from the LGBTQIA+ community (LGBTQIA+ sub-question is new this year (12 points)	X	X	X	X	X	X
People/Youth With Lived Experience of Homelessness Engagement – NEW QUESTION (10 points)		X	X	X		X
Healthcare Organization Engagement and Collaboration (12 points for New Applicant, Youth New Applicant; 10 points for Youth Renewal; 9 points for New Project Renewal and First Year)	X	X	X	X	X	X
Commitment to using Housing First Approach (12 points for all except Youth Renewal; 8 points for Youth Renewal)	X	X	X	X	X	X
Cross-System Collaboration – NEW QUESTION (7 points)					X	X
Agency Administrative Capacity (10 points)	X				X	
Federal Grant Experience and Documented Success (10 points)	X				X	
Agency and Staff Homelessness Experience (12 points)	X				X	
Positively Contribute to HUD’s System Performance Measures (12 points)	X				X	
Bonus Points for Projects increasing the number of 100% Dedicated Chronically Homeless beds or Dedicated PLUS beds,		X	X	X		X

intended to serve participants with severe barriers or increasing the total number of RRH beds. (2 points)						
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Project Performance Criteria All existing projects are also rated and ranked based on project performance. **Reviewers used up-to-date past performance data** for all applications for which the data was available, including all renewal projects. Data was pulled by our team for individual projects based on recently completed program year. New applicant projects do not have project performance criteria and are excluded from this table. The table below shows the project performance criteria by project type.

Project Performance Criteria	New Project Renewal	First Year Renewal	Renewal	Youth Renewal
Compliance: Steps needed to be incorporated into CHA are complete (6 points)	X			
Compliance: Project does not currently have unresolved HUD monitoring findings or is in process of resolving. (5 points for Youth Renewal; 4 points for Renewal)			X	X
Compliance: Was the APR for the most recently completed program year submitted to HUD on time? (5 points for Youth Renewal and 4 points for Renewal)			X	X
Compliance: Project has made progress on creating a project manual (10 points)		X		
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) (6 points)	X			
Drawdowns: Project spent all CoC funds in contract year. (from HUD) (6 points)			X	X
Expended Funds: Project is on track to expend all funds by the end of the Program Year. Calculate percent spent, prorated based on program year progress. (from HUD) (6 points)		X		
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) (7 points)	X			
HMIS Data Quality: Had 0% null/missing on all HMIS data elements on (Data Quality (Local 0260) v12.1.) (5 points for Youth Renewal; 6 points for Renewal)			X	X
HMIS Data Quality: Had less than 4% null/missing on all HMIS data elements (Data Quality (Local 0260) v12.1.) (5 points for First Year)		X		X
Performance- Utilization: At the end of last operating year, did you serve the number of households indicated in your grant agreement? * (6 points for Youth Renewal and First Year; 7 points for Renewal)		X	X	X
Bed Utilization: A completed HMIS Project Request form has been submitted to HMIS Data Team, hmisadmin@clackamas.us , indicating the number and types of beds/units available through this project. (7 points)	X			

Ending Homelessness: The agency participates in CoC and is a voting member (attended at least 3 meetings in the past 12 months). (7 points)	X			
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) OR The TH program met the local goal of at least 99% of clients exiting to permanent housing OR 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. (7 points)		X	X	X
Ending Homelessness: The PSH program met the local goal of leasing up the first participant within three months after the first staff person hired. OR The RRH program met the local goal of leasing up the first participant within one month after first staff person hired. (7 points)		X		
Increased or Maintained Income: At least one staff person is registered or completed SOAR training. Please provide documentation for SOAR Training (5 points for First Year; 6 points for New Project Renewal)	X	X		
Increased or Maintained Income: All homeless programs met the local goal of at least 80% of adult clients having increased or maintained total income at end of operating year or at exit (APR 19a1 & 19a2). (6 points for Renewal; 5 points for Youth Renewal)	X		X	X

Our scorecard measured performance utilization rates, exits to permanent housing destinations, and increasing participant income as factors to achieving positive housing outcomes and improving system performance that were explicitly evaluated using the attached score card. This ensured projects followed **24 CFR part 578**, eLOCCS drawdown rates and timely APR submittal are considered, while funds recaptured by HUD and monitoring/audit findings are included in the score. The score card was completed by CoC staff using HMIS and project application data, and project staff provided answers to the narrative section.

Each of the score cards used by the review team are attached below. Our team submitted all new and renewal project applications through Esnaps to the CoC by the deadline set by the CoC, September 9th, 2024. The projects included in our FY2024 CoC Application were reviewed and scored by the HSSC

Scoring Subcommittee on September 17th, 2024. The HSSC monitored, evaluated, reviewed, accepted, and ranked on September 19th, 2024. Minutes of this and other HSSC meetings are available to the public.

New Project Applications: CWS RRH-Latinx New Project (DV Bonus), CWS SSO CE Expansion, CWS RRH Expansion, and H3S Housing the People PSH (CoC Bonus)

Extensive outreach was done by the CoC to encourage new applicants. This included information shared through the county website, information sent out to an approximately 360 member CoC list-serve, technical assistance open office hours, community meetings, monthly CoC meetings, and 1:1 conversation with prospective agencies considering applying. Unfortunately, no new agencies chose to apply. We did receive the following four new project applications from existing service providers:

PH-RRH DV Bonus Project: Clackamas Women’s Services (CWS) and Safety Compass (SC) will collaborate to provide safe, stable housing and appropriate trauma-informed, victim-centered services to increase autonomy, self-sufficiency, safety, and well-being. SC is a survivor-led advocacy organization mainly serving survivors of commercial sexual exploitation/sex trafficking. They are recognized as an expert in the field offering specialized advocacy, web and phone-based support for families of missing and chronically exploited youth and adults, and training for professionals and community members. With CWS as the lead applicant and SC as the sub-recipient, we will increase housing and support services for individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking. Additionally, victims of human trafficking face unique barriers to accessing housing. This project will leverage the extensive population-specific and culturally responsive expertise of CWS and SC to increase access to housing and support services for victims of human trafficking with rental assistance and wrap-around supportive services. Services are voluntary and participants determine their own goals with skilled direct service staff offering support in achieving those goals. Consequently, services often look very different for each participant. To help participants make informed decisions about the services they choose to access, the Housing Case Managers share the array of support available from the collaborative partner and the larger community, all while maintaining non-judgmental support, unconditional positive regard, and transparent and honest communication. CWS and SC are both collaborative partners and active participants in A Safe Place-Family Justice Center. These agencies are currently collaborating to provide transitional housing to trafficking survivors through the OVC FY2022 grant award. Even before the award, SC worked closely with CWS to reduce barriers for participants to access housing services. This collaborative project will benefit from the well-established infrastructure of CWS’ robust Shelter and Housing Program, which utilizes both public and private funding sources to provide flexibility to meet the individual needs of victims of domestic and sexual violence, stalking, elder abuse, and trafficking.

RRH Expansion Project (DV): This project will provide rapid rehousing (RRH) assistance and supportive services through a scattered-site tenant model for households experiencing domestic or sexual violence or trafficking and who are homeless or fleeing. In addition to financial assistance, CWS Housing Case Managers (HCM) support survivors throughout their

time in the RRH program and beyond, from identifying available housing and offering help with housing applications to providing follow-up support. Program participants work with an HCM to identify and apply to a full-market rental of their choice, with the lease in their name.

Engagement with CWS is voluntary and has no time limit, and we frequently leverage other resources to provide ongoing wrap-around support services after the rental assistance ends.

Every RRH participant is presented with a range of tailored voluntary supportive services, including information and referrals for CWS services, such as counseling, legal services, support groups, and youth and children's services; assistance navigating services and service delivery systems; accompaniment to appointments and advocacy with other providers; information and referrals to other providers offering emergency services, public benefits, and youth services; ongoing risk assessments and safety planning; and emotional support. CWS also leverages resources to support RRH participants in meeting their basic needs, such as clothing vouchers, transportation, assistance in furnishing and household items, and moving services, as needed and available

Housing the People New PSH Project: The House the People (HTP) Program in Clackamas County will be a newly launched project designed to provide Permanent Supportive Housing (PSH) to 19 households who are chronically homeless. This program will follow the Housing First approach, emphasizing the immediate need for stable housing as a foundation for addressing other life challenges. Participants in this program will have extensive histories of homelessness and will experience complex health issues, such as mental illness, substance use, and physical disabilities. Through HTP, eligible households will receive a rent subsidy coupled with intensive, person-centered supportive services aimed at fostering housing stability and helping participants achieve personal milestones in health, employment, and other areas of their lives. A key element of the program is that there is no imposed time limit for participants, allowing them to remain in the program for as long as necessary to ensure sustained housing stability. HTP will operate without any sub-recipients, ensuring streamlined services and direct oversight. The program will be supported by a dedicated team, including one full-time Case Manager. This Case Manager will provide intensive, ongoing case management services to the 20 households, ensuring that participants receive consistent and comprehensive support to address their individual needs and reach their goals. The HTP Program is grounded in a data-driven approach to addressing homelessness. According to FY 23-24 data from Clackamas County's Coordinated Housing Access, the by-name list has identified the highest number of chronically homeless individuals in need of PSH as 2,218 single adults and 635 families (head of household only). The HTP Program aims to address this critical need, focusing on providing long-term housing solutions, fostering self-sufficiency, and improving the overall well-being of participants. The program empowers participants to not only secure stable housing but also maintain it while making progress in other aspects of their lives.

Renewal Project Applications:

Ten Ranked and Scored Renewal Projects: The HSSC received ten renewal applications. Each project was evaluated by the scoring review team based on performance, as well as the providers' ability to positively contribute to local and HUD priorities and meet the needs of the community.

Note on ranking expansion projects in Tier 2: This year, the CoC Scoring Committee and Housing Services Steering Committee (CoC Governing Body) opted to score expansion projects in Tier 2 based on local priorities.

Four Projects Ranked but Not Scored: There were four 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 Renewal and Expansion (new application) and Homeless Management Information System (HMIS)** could not be evaluated by the review team in a meaningful way to compare with the other projects because these projects are system administrative functions and do not serve participants in the same 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 FY2024-FY2025 CoC NOFO, two YHDP Renewal 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 officially rejected or reduced during the FY2024 Ranking Process. The CoC initially received applications for CoC Bonus funds equaling more than the allowable dollar amount for which our CoC could apply. In an effort to determine collaboratively, with the support of the Scoring and Steering Committees, a discussion was had between H3S Social Services and Clackamas Women's Services (CWS), the two agencies applying for Bonus Funds, to determine how to proceed. Initially Social Services intended to apply to expand their Housing our Families project. They opted to not submit an application to expand the project at this time but rather invest more funds into the new PSH project, Housing the People. CWS opted to decrease the amount for which they were applying to expand projects, in order to support the House the People PSH project. The Scoring and Steering Committees both approved this decision.

Year Round Project Evaluation

Clackamas County CoC monitors project performance through contract check-in (occurring at minimum quarterly), during APR review prior to submission, through regularly scheduled data quality and performance utilization reports, and as part of the evaluation, review, scoring and ranking process. Coordinated Entry, PIT count, and equity analysis data are used by the CoC to determine local needs. The score cards used for the CoC ranking process are developed and overseen by the Housing Services Steering Committee (HSSC), the steering committee charged with overseeing the CoC, as part of mid-year program and system performance. 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 a comparable database.

Score Card for New Applicant Applications

(Including bonus and reallocation)

Project Name: _____ **Date:** _____

Scorecard Instructions When responding to the Section 1 Equity and Local Needs questions, responders should focus their response on the specific project being proposed and **not** your organization. Responders with a subrecipient(s) must also describe how the subrecipient(s) will meet the standards established in each question. Responders will have additional writing space to provide information regarding subrecipients. 700 characters for 1-3 subrecipients and 1000 characters for 4 or more subrecipients.

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 Coordinated Housing Access (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 FY2024 NOFO: YES ___ NO ___
 - b. All Budget Line Items must be allowable under the FY2024 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 ___
9. The average cost per household served is reasonable, meaning that the cost for housing and services provided by the project are consistent with the population the project plans to serve: 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 (2500 Characters maximum), 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

Score Card for New Project Applications

proposing. Please describe any subrecipients and their role in this project. (See scorecard instructions for additional information related to subrecipient responses.) (Not Scored)

2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; use language, structures and settings familiar to the culture of the target population to create an environment of belonging and safety in which services are delivered; 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. Culturally specific organizations also have a culturally focused organizational identity and environment, a positive track record of successful community engagement, and recognition from the community served as advancing the best interests of that community.

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 (**4 points maximum**):

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

2.2 Lead Applicant is not a Culturally Specific organization, but services are provided in collaboration with a culturally specific organization under this contract. (2pts) ____

3. **NEW QUESTION: Consumer Engagement:** Please describe how you collect and use participant feedback. How has this feedback improved programming over the past year? If feedback has not been collected or used, describe concrete actions you will take in the next year to implement such processes. Please provide at least one issue that arose from participant feedback, and how your agency responded to the feedback, and how this response was communicated back to participants. Please describe any specific consumer engagement activities you conduct that you would consider being innovative or exceptional or are otherwise effective and meets best practice standards. (5000 Characters maximum) (**12 pts maximum**)

If you are not currently doing this, please clearly identify actions you will take within the next year to engage consumers.

Include a brief narrative of how your subrecipient(s) engage consumers. If subrecipient(s) is not currently doing this, describe actions subrecipients will take within the next year to engage consumers. (See scorecard instructions for additional information related to subrecipient responses.)

4. **Equity:** *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. Recognizing that marginalized and underrepresented communities do not start from the same place and systems and providers must acknowledge that difference and adjust services and supports to overcome the resulting barriers and disparities. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff. (12 points maximum)*

3.1 Please provide a brief narrative (2500 characters maximum) describing your program's policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (3 points)

3.2 Please provide a brief narrative (2500 characters maximum) 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. (3 points)

Score Card for New Project Applications

3.3 Please provide a brief narrative (2500 Characters maximum) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (3 points)

3.4 Please provide a brief narrative (2500 characters maximum) describing your efforts to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meet best practices. (3 points)

3.4.1 If you are not currently doing this, please clearly identify actions you will take within the next year to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making.

Include a brief narrative of your subrecipient(s) efforts for each equity question. (See scorecard instructions for additional information related to subrecipient responses.)

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.*

5. Healthcare Organization Engagement: Please provide a brief narrative (5000 Characters maximum) 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 to address healthcare needs and support permanent housing outcomes. **(12 points maximum)**

6. 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. **(12 points maximum)**

Score Card for New Project Applications

Project is committed to using Housing First approach with no service participation or pre-conditions. YES____
NO__

Each Agency must answer each part to the question affirmatively in to be considered fully in alignment with Housing First:

- Does the project quickly move participants into permanent housing (without preconditions or extra steps required to be met)? Yes or No
- Are you able to respond affirmatively to all of the following statements:
 - This project does not screen out for reasons related to income (Having too little or no income)
 - This project does not screen out for active or history of substance use (including requirements for participation in treatment once enrolled, sobriety or intention to become/remain sober)
 - This project does not screen out for having a criminal record of any kind with exceptions only for state-mandated restrictions. If restrictions in place related to criminal record, please list what they are and corresponding state mandate) If no, please list criminal history screening criteria and mandate requiring it
 - This project does not screen out for having a history of domestic violence (e.g. lack of protection order, period of separation from abuser, or law enforcement involvement, etc.)
 - This project does not screen out based on an individual's "housing readiness" or "motivation to change" or any other similar criteria.
 - This project does not screen out based on previous rental history (evictions, damages, etc.)
- Are you able to respond affirmatively that none of the following are reasons for program termination:
 - Failure to participate in supportive services
 - Failure to make progress on a service plan
 - Loss of income or failure to improve income
 - Domestic violence
 - Any other activity not covered in a lease agreement typically found in the project's geographic area.
- Does the project have written eligibility criteria specific to this project, which are in alignment with Housing First principles and are provided to participants? Yes, attach or No

If you answered 'no' to any of these questions, how do you do everything in your power to support the participant and prevent the participant from losing housing? (2500 Characters maximum)

Describe (5000 characters maximum) 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. Please provide a copy of these policies and procedures.

Score Card for New Project Applications

Include a brief narrative of how your subrecipient(s) utilize Housing First approach. If the subrecipient does not use Housing First approach, how does the subrecipient(s) do everything in our power to support the participant and prevent the participant from losing housing? (See scorecard instructions for additional information related to subrecipient responses.)

Project has completed a Housing First Evaluation, such as the Housing First Assessment Tool, within the past 12 months, and reviewed with CoC Lead? YES ___ NO ___ (not scored)

7. Please provide a brief narrative (2500 Characters maximum) describing your agency's administrative capacity (data-tracking, software/HMIS) to implement this program. **(10 points maximum)**
8. Please provide a brief narrative (2500 Characters maximum) 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. **(10 points maximum)**
9. Please provide a brief narrative (5000 Characters maximum) 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. **(12 points maximum)**
10. Please provide a brief narrative (5000 Characters maximum) 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 to do return to homelessness; ensure participants increase income during program participation. **(12 points maximum)**

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– **2024**

Scorecard Instructions When responding to the Section 1 Equity and Local Needs questions, responses should focus their response on the specific project being proposed and **not** your organization. Responders with a subrecipient(s) must also describe how the subrecipient(s) will meet the standards established in each question. Responders will have additional writing space to provide information regarding subrecipients. 700 characters for 1-3 subrecipients and 1000 characters for 4 or more subrecipients.

Project Information (to be completed by CoC Lead, reviewed by provider)

Lead Agency Name	
Sub-recipient agencies, if applicable.	
Assistance Type (TH-RRH, RRH, PSH, SSO-CE)	
Target Population (CH, Youth, HH w/children, etc.)	
Number of Units (single site)/ Proposed Project Participation (scattered site)	
Number of households that will be served	
Lead Agency Contact Information	

HUD Budget Information:

Clackamas County Continuum of Care
 New Project Renewal
 Project Ranking Criteria – 2024

Amount of HUD CoC Contract/Award: Not including Admin or match	\$
HUD CoC Admin:	\$
Match	\$
Total Program Budget: HUD CoC Contract, admin, and match	\$

1.	Equity and Local Needs	Maximum points: 59
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1. Describe (2500 characters maximum), 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. Please describe any subrecipients and their role in this project. (See scorecard instructions for additional information related to subrecipient responses.) (Not Scored)

2. Culturally specific organizations serve a particular cultural community and is primarily staffed and led by members of that community; use language, structures and settings familiar to the culture of the target population to create an environment of belonging and safety in which services are delivered; 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. Culturally specific organizations also have a culturally focused organizational identity and environment, a positive track record of successful community engagement, and recognition from the community served as advancing the best interests of that community.

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 **(4 points maximum)**:

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

2.2. Lead Applicant is not a Culturally Specific organization, but services are provided in collaboration with a culturally specific organization under this contract. (2pts) _____

3. **NEW QUESTION: Consumer Engagement:** Please describe how you collect and use participant feedback. How has this feedback improved programming over the past year? If feedback has not been collected or used, describe concrete actions you will take in the next year to implement such processes.

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New Project Renewal

Project Ranking Criteria – 2024

Please provide at least one issue that arose from participant feedback, and how your agency responded to the feedback, and how this response was communicated back to participants. Please describe any specific consumer engagement activities you conduct that you would consider being innovative or exceptional or are otherwise effective and meets best practice standards. (5000 Characters maximum) **(12 pts maximum)**

If you are not currently doing this, please clearly identify actions you will take within the next year to engage consumers.

Include a brief narrative of how your subrecipient(s) engage consumers. If subrecipient(s) are not currently doing this, describe actions subrecipients will take within the next year to engage consumers. (See scorecard instructions for additional information related to subrecipient responses.)

- 4. Equity:** *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. Recognizing that marginalized and underrepresented communities do not start from the same place and systems and providers must acknowledge that difference and adjust services and supports to overcome the resulting barriers and disparities. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff. (12 points maximum)*

- 4.1 Please provide a brief narrative (2500 characters maximum) describing your program’s policies and trainings addressing equity, anti-oppression, anti-bias, and/or cultural specificity. (3 points)
- 4.2 Please provide a brief narrative (2500 characters maximum) 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 (3 points)
- 4.3 Please provide a brief narrative (2500 characters maximum) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. Character (with spaces) limit: (3 points)
- 4.4 Please provide a brief narrative (2500 characters maximum) describing your efforts to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meet best practices. (3 points)
- 4.4.1 If you are not currently doing this, please clearly identify actions you will take within the next year to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making.

Include a brief narrative of your subrecipient(s) efforts for each equity question. (See scorecard instructions for additional information related to subrecipient responses.)

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.*

Clackamas County Continuum of Care

New Project Renewal

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- *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.*

NEW QUESTION: People With Lived Experience of Homelessness (PWLEH) Engagement: Providers should provide ways for participants to contribute to the operations of the agency and program. Clackamas CoC strongly encourages roles with lived experience requirement at multiple levels of your organization to ensure successful program design and implementation. How do you involve PWLEH in your service planning and delivery? How does this happen for this project specifically, and for your agency overall? In what ways does the project provide opportunities for participants to contribute directly to the day-to-day operations or programming? (Including but not limited to) (5000 Characters maximum) **(10 points maximum)**

- Weekly on-site meetings, tenant council or participant advisory group, or similar*
- Agency employment opportunities for participants*
- Volunteer projects or similar for participants*
- Peer Leadership/Mentorship opportunities for participants*
- Program improvement specific focus groups with participants (working alongside of participants to improve systems – Action Plans – engagement around service delivery and processes, forms etc.*
- Participant – strategic planning and annual planning*

Please describe any engagement efforts that you would consider innovative or exceptional or are otherwise effective and meets best practice.

If you are not currently doing this, please clearly identify actions you will take within the next year to involve PWLEH.

Include a brief narrative of how your subrecipient(s) engage PWLEH. If subrecipient(s) is not currently doing this, describe efforts subrecipients will take within the next year to involve PWLEH. (See scorecard instructions for additional information related to subrecipient responses.)

Clackamas County Continuum of Care

New Project Renewal

Project Ranking Criteria – 2024

- 5. Healthcare Organization Engagement** Please provide a brief narrative (5000 Characters maximum) 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 to address healthcare needs and support permanent housing outcomes. **(9 points maximum)**

Include a brief narrative of how your subrecipient(s) engage healthcare organizations. (See scorecard instructions for additional information related to subrecipient responses.)

Do you have any current/planned commitments from a health care organization(s) to provide health care resources to project -participants. YES___ NO___ If yes, is the commitment a formal written agreement? YES ___ NO ___ If yes, does the formal written agreement include the value of the commitment? YES___ NO___ and dates the healthcare resources will be provided? YES___ NO___. If yes, please provide the written form agreement with commitment value and service dates.

- 6. 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. **(12 points maximum)**

Project is committed to using Housing First approach with no service participation or pre-conditions. YES___ NO _____

Each Agency must answer each part to the question affirmatively in to be considered fully in alignment with Housing First:

- Does the project quickly move participants into permanent housing (without preconditions or extra steps required to be met)? Yes or No
- Are you able to respond affirmatively to all the following statements:
 - This project does not screen out for reasons related to income (Having too little or no income)
 - This project does not screen out for active or history of substance use (including requirements for participation in treatment once enrolled, sobriety or intention to become/remain sober)
 - This project does not screen out for having a criminal record of any kind with exceptions only for state-mandated restrictions. If restrictions in place related to criminal record, please list what they are and corresponding state mandate) If no, please list criminal history screening criteria and mandate requiring it
 - This project does not screen out for having a history of domestic violence (e.g. lack of protection order, period of separation from abuser, or law enforcement involvement, etc.)
 - This project does not screen out based on an individual’s “housing readiness” or “motivation to change” or any other similar criteria.
 - This project does not screen out based on previous rental history (evictions, damages, etc.)
- Are you able to respond affirmatively that none of the following are reasons for program termination:

Clackamas County Continuum of Care

New Project Renewal

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- Failure to participate in supportive services
- Failure to make progress on a service plan
- Loss of income or failure to improve income
- Domestic violence
- Any other activity not covered in a lease agreement typically found in the project’s geographic area.
- Does the project have written eligibility criteria specific to this project, which are in alignment with Housing First principles and are provided to participants? Yes, attach or No

If you answered ‘no’ to any of these questions, how do you do everything in our power to support the participant and prevent the participant from losing housing? (2500 Characters maximum)

Describe (5000 Characters maximum) 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.

Include a brief narrative of how your subrecipient(s) utilize Housing First approach. If the subrecipient does not use Housing First approach, how does the subrecipient(s) do everything in our power to support the participant and prevent the participant from losing housing? (See scorecard instructions for additional information related to subrecipient responses.)

NEW QUESTION: Project has completed a Housing First Evaluation, such as the Housing First Assessment Tool, within the past 12 months, and reviewed with CoC Lead? YES___ NO___ (not scored)

2.	Project Performance	Maximum points: 39
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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=2-9, fully incorporated=10	10	

Clackamas County Continuum of Care
 New Project Renewal
 Project Ranking Criteria – 2024

<p>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=2-8; staff hired=9</p>	9	
<p>HMIS Data Quality: New staff trained in HMIS policies and procedures. If new staff are 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</p>	5	
<p>Bed Utilization: A completed HMIS Project Request form has been submitted to HMIS Data Team, hmisadmin@clackamas.us, 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) _____

Clackamas County Continuum of Care

New Project Renewal

Project Ranking Criteria – 2024

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– 2024**

Project Name: _____

Date: _____

Scorecard Instructions When responding to Section 1 Project Narrative: Equity and Local Needs questions, responses should focus on the specific project being proposed and **not** your organization. Responders with a subrecipient(s) must also describe how the subrecipient(s) will meet the standards established in each question. Responders will have additional writing space to provide information regarding subrecipients. 700 characters for 1-3 subrecipients and 1000 characters for 4 or more subrecipients.

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

Participant Demographics (pulled from APR):

HUD Budget Information (Current Application):

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	

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
Renewal Project Ranking Criteria– 2024**

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	

1.	Project Narrative: Equity and Local Needs	Maximum points: 59
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1. Describe (2500 characters maximum), 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. Please describe any subrecipients and their role in this project. (See scorecard instructions for additional information related to subrecipient responses.) (Not Scored)

2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; use language, structures and settings familiar to the culture of the target population to create an environment of belonging and safety in which services are delivered; 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. Culturally specific organizations also have a culturally focused organizational identity and environment, a positive track record of successful community engagement, and recognition from the community served as advancing the best interests of that community.

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 **(4 points maximum)**:

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

2.2. Lead Applicant is not a Culturally Specific organization, but services are provided in collaboration with a culturally specific organization under this contract. (2pts) _____

3. **NEW QUESTION: Consumer Engagement:** Please describe how you collect and use participant feedback. How has this feedback improved programming over the past year? If feedback has not been collected or used, describe concrete actions you will take in the next year to implement such processes. Please provide at least one issue that arose from participant feedback, and how your agency responded to the feedback, and how this response was communicated back to participants. Please describe any specific consumer engagement activities you conduct that you would consider being innovative or exceptional or are otherwise effective and meets best practice standards. (5000 Characters maximum) **(12 pts maximum)**

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024

If you are not currently doing this, please clearly identify actions you will take within the next year to engage consumers.

Include a brief narrative of how your subrecipient(s) engage consumers. If subrecipient(s) are not currently doing this, describe actions subrecipients will take within the next year to engage consumers. (See scorecard instructions for additional information related to subrecipient responses.)

4. Equity: 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. Recognizing that marginalized and underrepresented communities do not start from the same place and systems and providers must acknowledge that difference and adjust services and supports to overcome the resulting barriers and disparities. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff. (12 points maximum)

4.1 Please provide a brief narrative (2500 characters maximum) describing your program’s policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (3 points)

4.2 Please provide a brief narrative (2500 characters maximum) 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. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meets best practices. (3 points)

4.3 Please provide a brief narrative (2500 characters maximum) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (3 points)

4.4 NEW QUESTION Please provide a brief narrative (2500 characters maximum) describing your efforts to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meet best practices. (3 points)

4.4.1 If you are not currently doing this, please clearly identify actions you will take within the next year to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making.

Include a brief narrative of your subrecipient(s) efforts for each equity question. (See scorecard instructions for additional information related to subrecipient responses.)

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
Renewal Project Ranking Criteria – 2024

- *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.*

5. NEW QUESTION: People With Lived Experience of Homelessness (PWLEH) Engagement: Providers should provide ways for participants to contribute to the operations of the agency and program. Clackamas CoC strongly encourages roles with lived experience requirement at multiple levels of your organization to ensure successful program design and implementation. How do you involve people with lived experience of homelessness (PWLEH) in your service planning and delivery? How does this happen for this project specifically, and for your agency overall? In what ways does the project provide opportunities for participants to contribute directly to the day-to-day operations or programming? (Including but not limited to) (5000 Characters maximum) **(10 points maximum)**

- a. *Weekly on-site meetings, tenant council or participant advisory group, or similar*
- b. *Agency employment opportunities for participants*
- c. *Volunteer projects or similar for participants*
- d. *Peer Leadership/Mentorship opportunities for participants*
- e. *Program improvement specific focus groups with participants (working alongside of participants to improve systems – Action Plans – engagement around service delivery and processes, forms etc.*
- f. *Participant – strategic planning and annual planning*

Please describe any engagement efforts that you would consider innovative or exceptional or are otherwise effective and meets best practices.

If you are not currently doing this, please clearly identify actions you will take within the next year to involve PWLEH.

Include a brief narrative of how your subrecipient(s) engage PWLEH. If subrecipient(s) is not currently doing this, describe efforts subrecipients will take within the next year to involve PWLEH. (See scorecard instructions for additional information related to subrecipient responses.)

6. Healthcare Organization Engagement: Please provide a brief narrative (2500 Characters maximum) 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 to address healthcare needs and support permanent housing outcomes. **(9 points maximum)**

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024

Include a brief narrative of how your subrecipient(s) engage healthcare organizations. (See scorecard instructions for additional information related to subrecipient responses.)

Do you have any current/planned commitments from a health care organization(s) to provide health care resources to project participants. YES ___ NO ___ If yes, is the commitment a formal written agreement? YES ___ NO ___ If yes, does the formal written agreement include the value of the commitment? YES ___ NO ___ and dates the healthcare resources will be provided? YES ___ NO ____. If yes, please provide the written formal agreement with commitment value and service dates.

- 7. 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. **(12 points maximum)**

Project is committed to using Housing First approach with no service participation or pre-conditions. YES ___ NO ___

Each Agency must answer each part to the question affirmatively in to be considered fully in alignment with Housing First:

- Does the project quickly move participants into permanent housing (without preconditions or extra steps required to be met)? Yes or No
- Are you able to respond affirmatively to all of the following statements:
 - This project does not screen out for reasons related to income (Having too little or no income)
 - This project does not screen out for active or history of substance use (including requirements for participation in treatment once enrolled, sobriety or intention to become/remain sober)
 - This project does not screen out for having a criminal record of any kind with exceptions only for state-mandated restrictions. If restrictions in place related to criminal record, please list what they are and corresponding state mandate) If no, please list criminal history screening criteria and mandate requiring it
 - This project does not screen out for having a history of domestic violence (e.g. lack of protection order, period of separation from abuser, or law enforcement involvement, etc.)
 - This project does not screen out based on an individual's "housing readiness" or "motivation to change" or any other similar criteria.
 - This project does not screen out based on previous rental history (evictions, damages, etc.)
- Are you able to respond affirmatively that none of the following are reasons for program termination:
 - Failure to participate in supportive services
 - Failure to make progress on a service plan
 - Loss of income or failure to improve income
 - Domestic violence
 - Any other activity not covered in a lease agreement typically found in the project's geographic area.

**Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024**

- Does the project have written eligibility criteria specific to this project, which are in alignment with Housing First principles and are provided to participants? Yes, attach or No

If you answered ‘no’ to any of these questions, how do you do everything in your power to support the participant and prevent the participant from losing housing? (2500 Characters maximum)

Describe (5000 characters maximum) 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. Please provide a copy of these policies and procedures.

Include a brief narrative of how your subrecipient(s) utilize Housing First approach. If the subrecipient does not use Housing First approach, how does the subrecipient(s) do everything in our power to support the participant and prevent the participant from losing housing? (See scorecard instructions for additional information related to subrecipient responses.)

NEW QUESTION: Project has completed a Housing First Evaluation, such as the Housing First Assessment Tool, within the past 12 months, and reviewed with CoC Lead? YES___ NO___ (not scored)

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	

**Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024**

<p>Drawdowns: Project spent all CoC funds in contract year. (from HUD) Less than 90%=0 points, 90-94%=3, 95-100%=6</p>	6	
<p>HMIS Data Quality: Had 0% null/missing on all HMIS data elements on (Data Quality (Local 0260) v12.1.) 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.</p>	5	
<p>Performance- Utilization: At the end of last operating year, did you serve the number of households indicated in your grant agreement? 70% or less= 0, 71-75%=1 76-80%=2, 81-85%=3, 86-90%=4, 91-95%=5, 96-100%=6 Proposed project participation vs Households Served</p>	6	
<p>Ending Homelessness: The PSH program met 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) _____

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024

Total HUD Criteria Points: _____

Total Score: _____

Any project submitting an 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

**First Year Renewal - Projects that have started, but not completed their first project year
Project Ranking Criteria– 2024**

Project Name: _____

Date: _____

Scorecard Instructions When responding to the Section 1 Project Narrative: Equity and Local Needs questions, responders should focus their response on the specific project being proposed and **not** your organization. Responders with subrecipient(s) must also describe how the subrecipient(s) will meet the standards established in each question. Responders will have additional writing space to provide information regarding subrecipients. 700 characters for 1-3 subrecipients and 1000 characters for 4 or more subrecipients.

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

Clackamas County Continuum of Care

First Year Renewal - Projects that have started, but not completed their first project year
Project Ranking Criteria– 2024

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	

HUD 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	\$

1.	Project Narrative: Equity and Local Needs	Maximum points: 59
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- Describe (2500 characters maximum) 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. Please describe any subrecipients and their role in this project. (See scorecard instructions for additional information related to subrecipient responses. (Not Scored)

Clackamas County Continuum of Care

First Year Ranking Criteria – 2024

2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; use language, structures and settings familiar to the culture of the target population to create an environment of belonging and safety in which services are delivered; 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. To encourage culturally specific organizations to apply, extra points will be awarded to providers and projects which fulfill these criteria. Culturally specific organizations also have a culturally focused organizational identity and environment, a positive track record of successful community engagement, and recognition from the community served as advancing the best interests of that community.

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 **(4 points maximum)**:

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

2.2 Lead Applicant is not a Culturally Specific organization, but services are provided in collaboration with a culturally specific organization under this contract (2 points) _____

3. **NEW QUESTION: Consumer Engagement:** Please describe how you collect and use participant feedback. How has this feedback improved programming over the past year? If feedback has not been collected or used, describe concrete actions you will take in the next year to implement such processes. Please provide at least one issue that arose from participant feedback, and how your agency responded to the feedback, and how this response was communicated back to participants. Please describe any specific consumer engagement activities you conduct that you would consider being innovative or exceptional or are otherwise effective and meets best practice standards. (5000 Characters) **(12 pts maximum)**

If you are not currently doing this, please clearly identify actions you will take within the next year to engage consumers.

Include a brief narrative of how your subrecipient(s) engage consumers. If subrecipient(s) is not currently doing this, describe actions subrecipients will take within the next year to engage consumers. (See scorecard instructions for additional information related to subrecipient responses.)

4. **Equity:** *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. Recognizing that marginalized and underrepresented communities do not start from the same place and systems and providers must acknowledge that difference and adjust services and supports to overcome the resulting barriers and disparities. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff. (12 points maximum)*

4.1 Please provide a brief narrative (2500 characters maximum) describing your program's policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (3 points)

Clackamas County Continuum of Care

First Year Ranking Criteria – 2024

- 4.2 Please provide a brief narrative (2500 characters maximum) 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. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meets best practices. (3 points)
- 4.3 Please provide a brief narrative (2500 characters maximum) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (3 points)
- 4.4 Please provide a brief narrative (2500 characters maximum) describing your efforts to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meet best practices. (3 points)
- 4.4.1 If you are not currently doing this, please clearly identify actions you will take within the next year to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making.

Include a brief narrative of your subrecipient(s) efforts for each equity question. (See scorecard instructions for additional information related to subrecipient responses.)

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.*

5. **NEW QUESTION: People With Lived Experience of Homelessness (PWLEH) Engagement:** Providers should provide ways for participants to contribute to the operations of the agency and program. Clackamas CoC strongly encourages roles with lived experience requirement at multiple levels of your organization to ensure successful program design and implementation. How do you involve people with lived experience of homelessness (PWLEH) in your service planning

Clackamas County Continuum of Care

First Year Ranking Criteria – 2024

and delivery? How does this happen for this project specifically, and for your agency overall? In what ways does the project provide opportunities for participants to contribute directly to the day-to-day operations or programming? (Including but not limited to) (5000 Characters) **(10 points Maximum)**

- a. *Weekly on-site meetings, tenant council or participant advisory group, or similar*
- b. *Agency employment opportunities for participants*
- c. *Volunteer projects or similar for participants*
- d. *Peer Leadership/Mentorship opportunities for participants*
- e. *Program improvement specific focus groups with participants (working alongside of participants to improve systems – Action Plans – engagement around service delivery and processes, forms etc.*
- f. *Participant – strategic planning and annual planning*
- g. *Consumer satisfaction survey*

Please describe any engagement efforts that you would consider innovative or exceptional or are otherwise effective and meets best practices.

If you are not currently doing this, please clearly identify actions you will take within the next year to involve PWLEH.

Include a brief narrative of how your subrecipient(s) engage PWLEH. If subrecipient(s) is not currently doing this, describe efforts subrecipients will take within the next year to involve PWLEH. (See scorecard instructions for additional information related to subrecipient responses.)

- 6. Healthcare Organization Engagement:** Please provide a brief narrative (5000 characters) 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 to address healthcare needs and support permanent housing outcomes. **(9 points maximum)**

Include a brief narrative of how your subrecipient(s) engage healthcare organizations. (See scorecard instructions for additional information related to subrecipient responses.)

Do you have any current/planned commitments from a health care organization(s) to provide health care resources to project -participants. YES___ NO___ If yes, is the commitment a formal written agreement? YES ___ NO___ If yes, does the formal written agreement include the value of the commitment? YES___ NO___ and dates the healthcare resources will be provided? YES___ NO____. If yes, please provide the written formal agreement with commitment value and service dates.

- 6. 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. **(12 points maximum)**

Project is committed to using Housing First approach with no service participation or pre-conditions. YES___ NO___

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First Year Ranking Criteria – 2024

Each Agency must answer each part to the question affirmatively in to be considered fully in alignment with Housing First:

- Does the project quickly move participants into permanent housing (without preconditions or extra steps required to be met)? Yes or No
- Are you able to respond affirmatively to all of the following statements:
 - This project does not screen out for reasons related to income (Having too little or no income)
 - This project does not screen out for active or history of substance use (including requirements for participation in treatment once enrolled, sobriety or intention to become/remain sober)
 - This project does not screen out for having a criminal record of any kind with exceptions only for state-mandated restrictions. If restrictions in place related to criminal record, please list what they are and corresponding state mandate) If no, please list criminal history screening criteria and mandate requiring it
 - This project does not screen out for having a history of domestic violence (e.g. lack of protection order, period of separation from abuser, or law enforcement involvement, etc.)
 - This project does not screen out based on an individual's "housing readiness" or "motivation to change" or any other similar criteria.
 - This project does not screen out based on previous rental history (evictions, damages, etc.)
- Are you able to respond affirmatively that none of the following are reasons for program termination:
 - Failure to participate in supportive services
 - Failure to make progress on a service plan
 - Loss of income or failure to improve income
 - Domestic violence
 - Any other activity not covered in a lease agreement typically found in the project's geographic area.
- Does the project have written eligibility criteria specific to this project, which are in alignment with Housing First principles and are provided to participants? Yes, attach or No

If you answered 'no' to any of these questions, how do you do everything in your power to support the participant and prevent the participant from losing housing? (2500 Characters maximum)

Describe (5000 characters maximum) 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. Please provide a copy of these policies and procedures.

Include a brief narrative of how your subrecipient(s) utilize Housing First approach. If the subrecipient does not use Housing First approach, how does the subrecipient(s) do everything in our power to support the participant and prevent the participant from losing housing? (See scorecard instructions for additional information related to subrecipient responses.)

Clackamas County Continuum of Care

First Year Ranking Criteria – 2024

Project has completed a Housing First Evaluation, such as the Housing First Assessment Tool, within the past 12 months, and reviewed with CoC Lead?

YES___ NO___ (not scored)

Total Equity and Total Needs Points: _____

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.

2.	Project Performance	Maximum points: 39
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This section is based on HUD’s Performance Criteria, as articulated in the competition NOFA.

Criteria	Possible Points	Points Awarded
Compliance: Project has made progress on creating a project manual	10	
Expended Funds: Project is on track to expend all funds by the end of the Program Year. Calculate percent spent, prorated based on program year progress. (from HUD) Less than 31%=0 points, 31%-45%= 1,46%-55%=2, 56-65%=3, 66-75%=4, 76-85=5, more than 86%=6 All projects operating for fewer than 3 months= 5 points	6	
HMIS Data Quality: Had less than 4% null/missing on all HMIS data elements (Data Quality (Local 0260 v12.1.)) More than 10%=0, 8-9%=1, 6-7%= 2, 5-6%= 3, 4-5%=4, fewer than 4%=5	5	
Performance Utilization: At the end of last operating year, did you serve the number of households indicated in your grant agreement? 70% or less= 0, 71-75%=1 76-80%=2, 81-85%=3, 86-90%=4, 91-95%=5, 96-100%=6	6	

Clackamas County Continuum of Care

First Year Ranking Criteria – 2024

Proposed project participation vs Households Served		
Ending Homelessness: The PSH program met the local goal of leasing up the first participant within three months after the first staff person hired. Did not meet goal=0, met goal=7 All projects operating for fewer than 3 months= 7 points OR The RRH program met the local goal of leasing up the first participant within one month after first staff person hired. Did not meet goal=0, met goal=7 All projects operating for less than 1 month= 7 points	7	
Increased or Maintained Income: At least one staff person at agency is registered or completed SOAR training. Did not meet goal=0, met goal=5	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).

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.

Youth Score Card for New Project Applications

(Including bonus and reallocation)

Project Name: _____ **Date:** _____

Scorecard Instructions When responding to the Section 1 Equity and Local Needs questions, responders should focus their response on the specific project being proposed and **not** your organization. Responders with subrecipient(s) must also describe how the subrecipient(s) will meet the standards established in each question. Responders will have additional writing space to provide information regarding subrecipients. 700 characters for 1-3 subrecipients and 1000 characters for 4 or more subrecipients.

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 Coordinated Housing Access (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 ___
9. The average cost per household served is reasonable, meaning that the cost for housing and services provided by the project are consistent with the population the project plans to serve: 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 (2500 Characters maximum), 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

Score Card for New Project Applications

proposing. Please describe any subrecipients and their role in this project. (See scorecard instructions for additional information related to subrecipient responses.) (Not Scored)

- 2. *Culturally specific organizations*** serve a particular cultural community and is primarily staffed and led by members of that community; use language, structures and settings familiar to the culture of the target population to create an environment of belonging and safety in which services are delivered; 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. Culturally specific organizations also have a culturally focused organizational identity and environment, a positive track record of successful community engagement, and recognition from the community served as advancing the best interests of that community.

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 (**4 points maximum**):

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

2.2 Lead Applicant is not a Culturally Specific organization, but services are provided in collaboration with a culturally specific organization under this contract. (2pts) ____

- 3. NEW QUESTION: Youth Engagement:** Please describe how you collect and use youth feedback. How has this feedback improved programming over the past year? If feedback has not been collected or used, describe concrete actions you will take in the next year to implement such processes. Please provide at least one issue that arose from youth feedback, and how your agency responded to the feedback, and how this response was communicated back to youth. Please describe any specific consumer engagement activities you conduct that you would consider being innovative or exceptional or are otherwise effective and meets best practice standards. (5000 Characters maximum) (**12 pts maximum**)

If you are not currently doing this, please clearly identify actions you will take within the next year to engage youth.

Include a brief narrative of how your subrecipient(s) engage youth. If subrecipient(s) is not currently doing this, describe actions subrecipients will take within the next year to engage youth. (See scorecard instructions for additional information related to subrecipient responses.)

- 4. *Equity:*** 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 youth and staff. (**12 points maximum**)

3.1 Please provide a brief narrative (2500 characters maximum) describing your program's policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (3 points)

3.2 Please provide a brief narrative (2500 characters maximum) 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. (3 points)

Score Card for New Project Applications

3.3 Please provide a brief narrative (2500 characters maximum) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and youth outcomes. (3 points)

3.4 Please provide a brief narrative (2500 characters maximum) describing your efforts to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meet best practices. (3 points)

3.4.1 If you are not currently doing this, please clearly identify actions you will take within the next year to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making.

Include a brief narrative of your subrecipient(s) efforts for each equity question. (See scorecard instructions for additional information related to subrecipient responses.)

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.*

5. Healthcare Organization Engagement: Please provide a brief narrative (5000 Characters maximum) describing how your program will work closely with public and private healthcare organizations to meet youth needs. This may include but is not limited to assistance with obtaining medical insurance; connecting youth 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 to address healthcare needs and support permanent housing outcomes. **(12 points maximum)**

6. 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

Score Card for New Project Applications

current or past substance use. Projects will be scored based on the quality and completeness of their answer. **(12 points maximum)**

Project is committed to using Housing First approach with no service participation or pre-conditions. YES____
NO__

Each Agency must answer each part to the question affirmatively in to be considered fully in alignment with Housing First:

- Does the project quickly move youth into permanent housing (without preconditions or extra steps required to be met)? Yes or No
- Are you able to respond affirmatively to all of the following statements:
 - This project does not screen out for reasons related to income (Having too little or no income)
 - This project does not screen out for active or history of substance use (including requirements for participation in treatment once enrolled, sobriety or intention to become/remain sober)
 - This project does not screen out for having a criminal record of any kind with exceptions only for state-mandated restrictions. If restrictions in place related to criminal record, please list what they are and corresponding state mandate) If no, please list criminal history screening criteria and mandate requiring it
 - This project does not screen out for having a history of domestic violence (e.g. lack of protection order, period of separation from abuser, or law enforcement involvement, etc.)
 - This project does not screen out based on an individual's "housing readiness" or "motivation to change" or any other similar criteria.
 - This project does not screen out based on previous rental history (evictions, damages, etc.)
- Are you able to respond affirmatively that none of the following are reasons for program termination:
 - Failure to participate in supportive services
 - Failure to make progress on a service plan
 - Loss of income or failure to improve income
 - Domestic violence
 - Any other activity not covered in a lease agreement typically found in the project's geographic area.
- Does the project have written eligibility criteria specific to this project, which are in alignment with Housing First principles and are provided to youth? Yes, attach or No

If you answered 'no' to any of these questions, how do you do everything in your power to support the youth and prevent the youth from losing housing? (2500 Characters maximum)

Describe (5000 characters maximum) 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 youth is terminated in only the most severe cases. Describe what policies and practices you have in place to

Score Card for New Project Applications

align with a Housing First approach. Please provide a copy of these policies and procedures.

Include a brief narrative of how your subrecipient(s) utilize Housing First approach. If the subrecipient does not use Housing First approach, how does the subrecipient(s) do everything in our power to support the youth and prevent the youth from losing housing? (See scorecard instructions for additional information related to subrecipient responses.)

Project has completed a Housing First Evaluation, such as the Housing First Assessment Tool, within the past 12 months, and reviewed with CoC Lead? YES ___ NO ___ (not scored)

7. NEW QUESTION: Cross-System Collaboration

7.1 No one system can prevent or end homelessness alone. Improving cross-systems collaboration and coordination helps address the root causes of homelessness among youth. Describe (5000 characters maximum) your current efforts at cross-system collaboration with child welfare, juvenile justice, behavioral health and education (secondary and post-secondary) systems. Please describe any specific efforts taken that you would consider innovative or exceptional or otherwise effective and meets best practices. If your program does not currently do this, please describe your plan to establish cross-system collaborations with these systems to address the root causes of homelessness. **(4 points maximum)**

7.1.1 Include a brief narrative of how your subrecipient(s) efforts at cross-system collaboration.

7.1.2 If your subrecipients are not currently doing this, please describe your subrecipients plan to establish cross-system collaborations with these systems to address the root causes of homelessness. (See scorecard instructions for additional information related to subrecipient responses.)

7.2 Please provide a brief narrative (2500 characters maximum) describing your efforts to center “Systems-Involved” youth in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or otherwise effective and meets best practices. If your program does not currently do this, please describe your plan to center “Systems Involved” youth in your policies, trainings, services and organizational decision-making. **(3 points maximum)**

7.2.1 Include a brief narrative of how your subrecipient(s) center “Systems-Involved” youth in their policies, trainings, services and organizational decision-making.

7.2.2 If your subrecipients are not currently doing this, please describe your subrecipients’ plan to center “Systems Involved” youth in their policies, trainings, services and organizational decision-making. (See scorecard instructions for additional information related to subrecipient responses.)

“Systems involved” means youth that are connected to public systems including child welfare, juvenile justice, behavioral health and other youth-serving systems.

8 Please provide a brief narrative (2500 Characters maximum) describing your agency’s administrative capacity (data-tracking, software/HMIS) to implement this program. **(10 points maximum)**

9 Please provide a brief narrative (2500 Characters maximum) describing your agency’s experience and documented success working with complicated federal grants. Please include information about compliance with federal

Score Card for New Project Applications

regulations, ability to draw down all funds, and ability to keep all beds full while complying with federal and local regulations. **(10 points maximum)**

- 10 Please provide a brief narrative (5000 Characters maximum) 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 youth success securing and maintaining permanent housing and increasing cash and non-cash income. **(12 points maximum)**
- 11 Please provide a brief narrative (5000 Characters maximum) describing how your program plans to positively contribute to HUD's System Performance Measures: quickly move people from homelessness to permanent housing; ensure youth exit to/maintain permanent housing (for PSH projects) or retain permanent housing after program completion (for RRH projects); ensure youth graduating programs to do return to homelessness; ensure youth increase income during program participation. **(12 points maximum)**

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
Project Ranking Criteria – Youth Renewal (EXCEPT YHDP)-2024

Project Name: _____

Date: _____

Scorecard Instructions When responding to the Section 1 Equity and Local Needs questions, responses should focus on the specific project being proposed and **not** your organization. Responders with subrecipient(s) must also describe how the subrecipient(s) will meet the standards established in each question. Responders will have additional writing space to provide information regarding subrecipients. 700 characters for 1-3 subrecipients and 1000 characters for 4 or more subrecipients.

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

Youth Demographics (pulled from APR):

HUD Budget Information (Current Application):

Clackamas County Continuum of Care
Project Ranking Criteria – Youth Renewal- 2024

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	

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

1.	Equity and Local Needs	Maximum points: 59
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1. Describe (2500 characters maximum), 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. Please describe any subrecipients and their role in this project. (See scorecard instructions for additional information related to subrecipient responses.) (Not Scored)
2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; use language, structures and settings familiar to the culture of the target population to create an environment of belonging and safety in which services are delivered;

Clackamas County Continuum of Care
Project Ranking Criteria – Youth Renewal- 2024

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. Culturally specific organizations also have a culturally focused organizational identity and environment, a positive track record of successful community engagement, and recognition from the community served as advancing the best interests of that community.

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 **(4 points maximum)**:

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

2.2. Lead Applicant is not a Culturally Specific organization, but services are provided in collaboration with a culturally specific organization under this contract. (2pts) ____

3. **NEW QUESTION: Youth Engagement:** Please describe how you collect and use youth feedback. How has this feedback improved programming over the past year? Provide at least one issue that arose from youth feedback, and how your agency responded to the feedback, and how this response was communicated back to youth. Describe any specific consumer engagement activities you conduct that you would consider being innovative or exceptional. If feedback has not been collected or used, describe concrete actions you will take in the next year to implement such processes. (5000 Characters maximum) **(8 pts maximum)**

If you are not currently doing this, please clearly identify actions you will take within the next year to engage youth.

Include a brief narrative of how your subrecipient(s) engage youth. If subrecipient(s) is not currently doing this, describe actions subrecipients will take within the next year to engage youth. (See scorecard instructions for additional information related to subrecipient responses.)

4. **Equity:** *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. Recognizing that marginalized and underrepresented communities do not start from the same place and systems and providers must acknowledge that difference and adjust services and supports to overcome the resulting barriers and disparities. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program youth and staff. (12 points)*

4.1 Please provide a brief narrative (2500 characters maximum) describing your program's policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (3 points)

Clackamas County Continuum of Care
Project Ranking Criteria – Youth Renewal- 2024

- 4.2 Please provide a brief narrative (2500 characters maximum) describing your program’s efforts to center youth with lived experience of homelessness and/or discrimination based on race, gender, or disability in your organization’s decision-making. (3 points)
- 4.3 Please provide a brief narrative (2500 characters maximum) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and youth outcomes. (3 points)
- 4.4 Please provide a brief narrative (2500 characters maximum) describing your efforts to center youth from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional. (3 points)
 - 4.4.1 If you are not currently doing this, please clearly identify actions you will take within the next year to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making.

Include a brief narrative of your subrecipient(s) efforts for each equity question. (See scorecard instructions for additional information related to subrecipient responses.)

Examples include, but are not limited to:

- *Example #1: A program creates a policy to ensure hearing-impaired youth 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-led 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.*

- 5. NEW QUESTION: Youth With Lived Experience of Homelessness (YWLEH) Engagement:** Providers should provide ways for youth to contribute to the operations of the agency and program. How do you involve youth with lived experience of homelessness (YWLEH) in your service planning and delivery? How does this happen for this project specifically, and for your agency overall? In what ways does the project provide opportunities for youth to contribute directly to the day-to-day operations or programming? (Including but not limited to) (5000 Characters maximum) **(10 points maximum)**

a. *Weekly on-site meetings, tenant council or youth advisory group, or similar*

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Project Ranking Criteria – Youth Renewal- 2024

- b. Agency employment opportunities for youth*
- c. Volunteer projects or similar for youth*
- d. Peer Leadership/Mentorship opportunities for youth*
- e. Program improvement specific focus groups with youth (working alongside of youth to improve systems – Action Plans – engagement around service delivery and processes, forms etc.*
- f. Youth – strategic planning and annual planning*

Please describe any engagement efforts that you would consider innovative or exceptional or are otherwise effective and meets best practice.

If you are not currently doing this, please clearly identify actions you will take within the next year to involve YWLEH (need to identify points and examples).

Include a brief narrative of how your subrecipient(s) engage YWLEH. If subrecipient(s) is not currently doing this, describe efforts subrecipients will take within the next year to involve YWLEH. (See scorecard instructions for additional information related to subrecipient responses.)

- 6. Healthcare Organization Engagement:** Please provide a brief narrative (5000 characters maximum) describing how your program will work closely with public and private healthcare organizations to meet youth needs. This may include but is not limited to assistance with obtaining medical insurance; connecting youth 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 to address healthcare needs and support permanent housing outcomes. **(10 points maximum)**

Include a brief narrative of how your subrecipient(s) engage healthcare organizations. (See scorecard instructions for additional information related to subrecipient responses.)

Do you have any current/planned commitments from a health care organization(s) to provide health care resources to project youth YES___ NO___
If yes, is the commitment a formal written agreement? YES ___ NO ___ If yes, does the formal written agreement include the value of the commitment? YES___ NO___ and dates the healthcare resources will be provided? YES___ NO___. If yes, please provide the written formal agreement with commitment value and service dates.

- 7. 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. **(8 points maximum)**

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Project is committed to using Housing First approach with no service participation or pre-conditions. YES____ NO__

Each Agency must answer each part to the question affirmatively in to be considered fully in alignment with Housing First:

- Does the project quickly move youth into permanent housing (without preconditions or extra steps required to be met)? Yes or No
- Are you able to respond affirmatively to all of the following statements:
 - This project does not screen out for reasons related to income (Having too little or no income)
 - This project does not screen out for active or history of substance use (including requirements for participation in treatment once enrolled, sobriety or intention to become/remain sober)
 - This project does not screen out for having a criminal record of any kind with exceptions only for state-mandated restrictions. If restrictions in place related to criminal record, please list what they are and corresponding state mandate) If no, please list criminal history screening criteria and mandate requiring it
 - This project does not screen out for having a history of domestic violence (e.g. lack of protection order, period of separation from abuser, or law enforcement involvement, etc.)
 - This project does not screen out based on an individual’s “housing readiness” or “motivation to change” or any other similar criteria.
 - This project does not screen out based on previous rental history (evictions, damages, etc.)
- Are you able to respond affirmatively that none of the following are reasons for program termination:
 - Failure to participate in supportive services
 - Failure to make progress on a service plan
 - Loss of income or failure to improve income
 - Domestic violence
 - Any other activity not covered in a lease agreement typically found in the project’s geographic area.
- Does the project have written eligibility criteria specific to this project, which are in alignment with Housing First principles and are provided to the youth? Yes, attach or No

If you answered ‘no’ to any of these questions, how do you do everything in your power to support the youth and prevent the youth from losing housing? (2500 Characters maximum)

Describe (5000 characters maximum) 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 youth is terminated in only the most severe cases. Describe what policies and practices you have in place to align with a Housing First approach. Please provide a copy of these policies and procedures.

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Include a brief narrative of how your subrecipient(s) utilize Housing First approach. If the subrecipient does not use Housing First approach, how does the subrecipient(s) do everything in our power to support the youth and prevent the youth from losing housing? (See scorecard instructions for additional information related to subrecipient responses.)

NEW QUESTION: Project has completed a Housing First Evaluation, such as the Housing First Assessment Tool, within the past 12 months, and reviewed with CoC Lead? YES___ NO___ (not scored)

8. NEW QUESTION: Cross-System Collaboration

- a. No one system can prevent or end homelessness alone. Improving cross-systems collaboration and coordination helps address the root causes of homelessness among youth. Describe (5000 characters maximum) your current efforts at cross-system collaboration with child welfare, juvenile justice, behavioral health and education (secondary and post-secondary) systems. Please describe any specific efforts taken that you would consider innovative or exceptional or otherwise effective and meets best practices. If your program does not currently do this, please describe your plan to establish cross-system collaborations with these systems to address the root causes of homelessness. **(4 points maximum)**
 - i. Include a brief narrative of how your subrecipient(s) efforts at cross-system collaboration. (See scorecard instructions for additional information related to subrecipient responses.)
 - ii. If subrecipient(s) is not currently doing this, describe efforts subrecipients will take within the next year for cross-systems collaboration. (See scorecard instructions for additional information related to subrecipient responses.)

- b. Please provide a brief narrative (2500 characters maximum) describing your efforts to center “Systems-Involved” youth in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or otherwise effective and meets best practices. If your program does not currently do this, please describe your plan to center “Systems Involved” youth in your policies, trainings, services and organizational decision-making. **(3 points maximum)**
 - i. Include a brief narrative of how your subrecipient(s) center “Systems-Involved” youth in their policies, trainings, services and organizational decision-making. (See scorecard instructions for additional information related to subrecipient responses.)
 - ii. If subrecipient(s) is not currently doing this, describe efforts subrecipients will take within the next year to center “Systems-Involved” youth in their policies, training, services and organizational decision-making. (See scorecard instructions for additional information related to subrecipient responses.)

“Systems involved” means youth that are connected to public systems including child welfare, juvenile justice, behavioral health and other youth-serving systems.

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Project Ranking Criteria – Youth Renewal- 2024

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	
Performance- Utilization: At the end of last operating year, did you serve the number of households indicated in your grant agreement? 70% or less= 0, 71-75%=1 76-80%=2, 81-85%=3, 86-90%=4, 91-95%=5, 96-100%=6 Proposed project participation vs Households Served	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 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 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	7	

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<p>Income and Education: All youth homeless programs meet the local goal of at least 80% of youth 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	
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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– 2024**

Project Name: RRH Renewal Project FY24

Date: August 2024

HUD-RRH- OR0249L0E072104

10-01-2022 - 09-30-2023

Scorecard Instructions When responding to Section 1 Project Narrative: Equity and Local Needs questions, responses should focus on the specific project being proposed and **not** your organization. Responders with a subrecipient(s) must also describe how the subrecipient(s) will meet the standards established in each question. Responders will have additional writing space to provide information regarding subrecipients. 700 characters for 1-3 subrecipients and 1000 characters for 4 or more subrecipients.

Assistance Type	Target Population	Number of Units (single site)/ Proposed Project Participation (scattered site)	Households Served
Rapid Rehousing	Survivors of Domestic Violence	3 units in application. A 4 th unit was added through a budget amendment approved by HUD	28 Served / 21 Moved into housing

Participant Demographics (pulled from APR):

HUD Budget Information (Current Application):

Gender:		Race:	
Male	26	White	34
Female	49	Black/African-American	13
No single gender		Asian	3
Questioning		American Indian/Alaska Native	1
Transgender		Native Hawaiian/Pac. Islander	
Don't know/refused/missing		Multiple Races	24
Age:		Don't know/refused/missing	
0-12	39		
13-17	7	Domestic Violence Survivor:	
18-24	3	Yes	29
Over 24	26	No	0

Amount of HUD CoC Contract/Award: Not including Admin	\$78,411
HUD CoC Admin:	\$0
Total Program Budget: Please list all cash funding sources	\$78,411
Match	\$19,602.75

**Clackamas County Continuum of Care
Renewal Project Ranking Criteria– 2024**

		Don't know/refused/missing	
Don't know/refused/missing		Number currently fleeing	
		Veterans	0
Ethnicity:			
Hispanic/Latino	22	Chronically Homeless	
Not Hispanic/Latino	53	CH households listed on APR	1
Don't know/refused/missing		Number who met CH definition before 1/15/16	

1.	Project Narrative: Equity and Local Needs	Maximum points: 59
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1. Describe **(1635/2500 characters maximum)**, 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. Please describe any subrecipients and their role in this project. (See scorecard instructions for additional information related to subrecipient responses.) (Not Scored)

This project will provide rapid rehousing (RRH) assistance and supportive services through a scattered-site tenant model for households experiencing domestic or sexual violence or trafficking and who are homeless or fleeing. In addition to financial assistance, CWS Housing Case Managers (HCM) support survivors throughout their time in the RRH program and beyond, from identifying available housing and offering help with housing applications to providing follow-up support. Program participants work with an HCM to identify and apply to a full-market rental of their choice, with the lease in their name. Engagement with CWS is voluntary and has no time limit, and we frequently leverage other resources to provide ongoing wrap-around support services after the rental assistance ends. Every RRH participant is presented with a range of tailored voluntary supportive services, including information and referrals for CWS services, such as counseling, legal services, support groups, and youth and children’s services; assistance navigating services and service delivery systems; accompaniment to appointments and advocacy with other providers; information and referrals to other providers offering emergency services, public benefits, and youth services; ongoing risk assessments and safety planning; and emotional support. CWS also leverages resources to support RRH participants in meeting their basic needs, such as clothing vouchers, transportation, assistance in furnishing and household items, and moving services, as needed and available.

2. **Culturally specific organizations** serve a particular cultural community and is primarily staffed and led by members of that community; use language, structures and settings familiar to the culture of the target population to create an environment of belonging and safety in which services are delivered; 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. Culturally specific organizations also have a culturally focused organizational identity and environment, a positive track record of successful community engagement, and

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Renewal Project Ranking Criteria – 2024

recognition from the community served as advancing the best interests of that community.

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 **(4 points maximum)**:

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

2.2. Lead Applicant is not a Culturally Specific organization, but services are provided in collaboration with a culturally specific organization under this contract. (2pts) X

3. NEW QUESTION: Consumer Engagement: Please describe how you collect and use participant feedback. How has this feedback improved programming over the past year? If feedback has not been collected or used, describe concrete actions you will take in the next year to implement such processes. Please provide at least one issue that arose from participant feedback, and how your agency responded to the feedback, and how this response was communicated back to participants. Please describe any specific consumer engagement activities you conduct that you would consider being innovative or exceptional or are otherwise effective and meets best practice standards. **(4809/5000 Characters maximum) (12 pts maximum)**

If you are not currently doing this, please clearly identify actions you will take within the next year to engage consumers.

CWS' strategic plan for 2024-2028 was recently rolled out and the 12-month process to development the plan involved input from partner agencies such as schools, LEA, culturally specific programs, youth-serving organizations, medical providers, mental health practitioners, and others. Direct input from current and former survivors/participants across CWS programs was cultivated through interviews, listening sessions and surveys. Youth from the community also participated in listening sessions, interviews and surveys. CWS staff were engaged through planning teams, surveys and interviews; 70% of CWS staff have lived experience. Additionally, VOICES, a survivor-led committee that volunteers their time to help others through advocacy, education, and empowerment, partnered with CWS in the development of our 2024 Strategic Plan. VOICES also routinely evaluates CWS practices. We worked with a strategic planning consultant to determine goals and focus areas for agency development over the next 5 years. CWS compiled the data to identify areas for growth and several sub-committees, comprised of CWS staff from various programs, have been formed to determine action steps and strategies to accomplish these goals.

We also conducted Community Partner Interviews with key partners from A Safe Place-Family Justice Center (ASP-FJC) Staff Surveys, Participant Interviews, and a Participant Listening Session. Staff engagement included multiple points of input over the year, such as surveys, planning retreats, facilitated sessions at All Staff meetings, and the work of the core and goal teams. Strategies to meet community needs include developing services specific to survivors of trafficking, expanding sexual assault services to youth participants, and scaling in-person hospital response. In response, CWS created three Hospital-Based Sexual Assault Advocate positions to be based in the emergency room and will be creating a Youth Advisory Board to continue informing the needs of youth survivors. Feedback from survivors and participants will continue to be operationalized as we develop these goals further. Other recent assessments have led to shifts in CWS programs and larger systems of delivery to effectively meet the needs of survivors, especially from marginalized communities. To address the underutilization of housing screening by BIPOC communities disproportionately impacted by

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housing insecurity and poverty, CWS has prioritized housing resources for survivors from immigrant and refugee, BIPOC, Latinx, and other marginalized communities. Staff reviews project data and participant and stakeholder feedback to assess progress, discuss lessons learned, identify areas of improvement, implement changes as needed, and review how the changes have been working.

Surveys are available to participants during services and may be requested anonymously. Upon exiting a program, we have multiple paths for participants to provide exit feedback. In-person, an exit feedback form is provided at the end of the service, along with a confidential envelope for privacy. Survivors are assured that their feedback is confidential and given context for how the feedback is used to develop programming, refine services, and ensure we are meeting their needs and the community's. Staff collect the form from the survivor, or there are lock boxes to place the completed form directly if they choose to. For virtual services or if a survivor prefers, there is an online survey link with the same form so they can complete it electronically. Feedback forms are available in multiple languages and can be printed in any size font, etc. needed to accommodate the survivor. We have adapted to the changing landscape of services by adding an online survey and remote feedback options.

A Housing Program participant gave CWS insightful feedback, sharing that it felt unfair to be put on a last-chance status and be required to do a program agreement after violating her lease and being evicted from the apartment that was supported through housing assistance. We responded by including in the agreement the voluntary support CWS will offer to prevent future evictions, as well as the things she agreed to do to maintain housing. Additionally, we planned to meet regularly to offer more case management. We responded to the participant's feedback by meeting to discuss that the agreement was intended to offer an extra chance at housing rather than the program ending. As a result, she ended up being rehoused in another apartment and did not return to homelessness. Rehousing participants doesn't happen very often, but when these situations arise, feedback and dialogue is a key component to a participant's comfort and willingness to work with us to find a solution and take the steps to continue being housed.

Include a brief narrative of how your subrecipient(s) engage consumers. If subrecipient(s) are not currently doing this, describe actions subrecipients will take within the next year to engage consumers. (See scorecard instructions for additional information related to subrecipient responses.) – N/A

4. Equity: 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. Recognizing that marginalized and underrepresented communities do not start from the same place and systems and providers must acknowledge that difference and adjust services and supports to overcome the resulting barriers and disparities. The goal of equity is to provide opportunity and outcomes free from biases and favoritism for all program participants and staff. (12 points maximum)

4.1 Please provide a brief narrative (**2494/2500 characters maximum**) describing your program's policies and trainings for staff to address the subjects of equity, anti-oppression, anti-bias, and/or cultural specificity. (3 points)

CWS believes that oppression is the root cause of domestic and sexual violence, and that anti-oppression and anti-racism work is fundamental to its eradication. CWS approaches intervention and prevention work through social and racial justice, intersectionality, health and well-being, and equity lenses. We believe in community accountability and take a social-ecological model approach. This means understanding the influence on a survivor's health and well-being and offering programs that advance equitable outcomes at individual, community, and societal levels. Staff are encouraged to attend culturally- and population-specific training. This year the Housing Staff has trained on supporting survivors with severe and

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persistent mental health, Creating Greater Access for disabled and LEP survivors, and attended the Oregon Housing Conference on Addition and Homelessness. Bridges Oregon, a nonprofit that serves Deaf, DeafBlind, and Hard-of-hearing Oregonians will be providing training to CWS on serving survivors with communication barriers.

CWS works with the Leadership Training Institute (LTI) to further our equity journey. This includes a Culture of Belonging Assessment, leadership coaching/consultations available to all staff, affinity groups, equity assessments of agency policies and practices, and training for board and staff. LTI has reviewed our HR manual and processes. CWS implemented many of their recommended changes. Agency policies regarding promotions and hiring were updated to be more equitable, build a culture of inclusivity, and add diverse voices to leadership. CWS strives to deepen our understanding of DEI and continues to work with trainers and coaches from LTI. This has deepened our practices and provided ongoing agency-wide training to build an authentic and informed anti-racism culture.

CWS continues to hold monthly affinity groups for BIPOC staff, white allies, and the Board. Topics of discussion have included power and privilege, unlearning anti-blackness, and understanding internalized racism. CWS is developing an affinity group for staff who identify as LGBTQIA+, beginning September 2024. LTI assists CWS with identifying leadership development opportunities, expanding bilingual spaces, culturally specific spaces for staff. Quarterly, CWS hosts All Staff meetings where LTI conducts training. CWS supervisors engaged in an 8-hour Trauma-Informed Supervision training. We believe trauma-informed and equity approaches are intertwined.

- 4.2 Please provide a brief narrative **(2493/2500 characters maximum)** 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. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meets best practices. (3 points)

Building a diverse board and staff is a priority to ensure that the voices of those with lived experience and intersectional identities are amplified in program and policy planning. Our staff represents many communities: 40% of are bilingual/bicultural, 35% identify as Latinx, 25% from communities of color, 10% from the immigrant community, and 42% identify as living with a disability. The CWS Leadership Team includes representation from the LGBTQIA+ community, individuals living with a disability, the Latinx community, and the Native American community. Over 75% of current Board members have lived experience with domestic or sexual violence or homelessness. Diversification of the CWS Board is a strategic priority and we are making great progress. The three most recent recruits to the CWS Board are in the younger age demographic, survivors, and one identifies as LGBTQ+. CWS has updated our board prospectus to focus on recruiting members who reflect our community. To us, the most important qualifications are a desire for social change, eagerness for heart-centered leadership, commitment to healthy collaboration, and enthusiasm for supporting our staff.

CWS' Latinx Leadership Team meets monthly and is comprised of staff from across all programs, led by the Latinx Services Manager. This group has set goals including outreach plans to connect with the community in culturally relevant ways. Initiatives like the monthly Latinx Provider Chat, hosted by CWS and facilitated in Spanish, provide staff from other agencies with the opportunity to convene for learning and collaboration. The CWS *Promotoras* program is a peer learning group comprised of community members who are survivors of DV/SA, bringing lived experience to this work and the ability to disseminate information widely within the Latinx community on the diverse array of resources that CWS has to offer;

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often referring friends and community members. The Latinx Leadership Team and *Promotoras* facilitate connections within the community, inform CWS programming, and provide culturally inclusive outreach.

68% of the survivors served in CWS housing programs identified as having one or more disabilities. During intake, survivors' needs are assessed to individualize services and reduce barriers. Deaf or hard-of-hearing survivors are provided with interpretation and tools to access services. CWS is partnering with Bridges Oregon to enhance access to services for survivors by mitigating communication barriers.

- 4.3 Please provide a brief narrative (**2363/2500 characters maximum**) describing how your program applies an anti-racist/equity lens to its projects, caseloads, and participant outcomes. (3 points)

CWS applies an equity lens to all aspects of its programming, operations, and community engagement strategies. We acknowledge that each of us carries our own biases that can perpetuate systems of white supremacy. CWS has established systems and collaborative approaches to ensure that our services are equitable and culturally responsive. We regularly audit program data using a racial equity lens developed in partnership with the Center for Equity and Inclusion. CWS disaggregates outcome data to ensure that policies and practices have positive impacts on marginalized communities and do not cause harm. An equity lens tool is used in all new program planning and evaluation to ensure that decision-makers seek the input of the most impacted communities, follow the lead of the populations served, and surface biases.

CWS serves victims from traditionally underserved populations at a higher percentage than our community's general population. Within the last year, culturally specific service offerings at CWS have doubled. Across the agency, culturally specific positions are embedded in each team to support the Latinx community, and all services are provided in Spanish. In our Housing Program, participants are matched with a case manager who identifies as the same race/culture if we can do so. CWS has bilingual/bicultural staff who speak Spanish, Russian, Kirundi, Kinyarwanda, Swahili, French, and Portuguese along with a comprehensive and robustly funded Language Access Plan that prioritizes providing in-person and video-conference interpretation services (telephonic as a final option). CWS also works toward cultural competence through visual representations, and cultural adaptations of services (not simply direct translations), consideration of cultural foods, holidays, traditions, rituals, and other practices.

Survivor-centered advocacy is at the heart of all CWS programs. Our trauma-informed approach aims to provide survivors with culturally responsive support while also advancing racial equity. By creating a community with survivors who come from many different backgrounds and have a specific shared experience, we can break the isolation of interpersonal violence from a place of respect and dignity. Staff support program participants in developing individualized goals and identifying resources that may be helpful in their journey.

- 4.4 NEW QUESTION Please provide a brief narrative (**2405/2500 characters maximum**) describing your efforts to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making. Please describe any specific efforts taken that you would consider innovative or exceptional or are otherwise effective and meet best practices. (3 points)

4.4.1 If you are not currently doing this, please clearly identify actions you will take within the next year to center individuals from the LGBTQIA+ community in your policies, trainings, services and organizational decision-making.

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We consider it essential to engage survivors and team members in shaping services and defining program goals and outcomes specific to their communities. Approximately 50% of CWS staff identify as LGBTQIA+, and our Leadership Team includes representation from the LGBTQIA+ community. Staff in programs with significant LGBTQIA+ representation have a leadership role in selecting, and in many cases writing and developing, the curriculum for these programs. CWS is developing an Affinity Group to begin later this month for staff who identify as LGBTQIA+. We view this project as another way to build on our efforts to create a culture of belonging and a beloved community for staff, volunteers, and participants. Arising from our 2024-2028 Strategic Plan, the goal of Improving Access to Services was established to ensure our services are accessible, responsive, and easy to navigate for historically underserved populations. This goal team of CWS staff members is discussing methods to expand access to LGBTQIA+ survivors.

CWS provides certified 40+ hour Domestic Violence Advocacy Training, a range of introductory to advanced level training on DV/SA, and training on co-occurring issues such as housing, mental health, substance misuse, etc., for staff and community partners. CWS has made a significant effort to create training curricula and sessions around working with LGBTQIA+ survivors and understanding the intersections between violence and oppression. This training includes a comprehensive session dedicated to Working with the LGBTQ+ Community. Additionally, one of our co-located advocates has volunteered to provide the Forensic Nurse Examiners at Providence Willamette Falls with LGBTQIA+ education as part of our collaborative Hospital-Based Sexual Assault Advocacy project.

CWS is partnering with the Northwest Health Foundation as a recipient of the Justice Reinvestment and Equity Program grant. This opportunity allows us to work with the Latino Coalition for Community Learning as a technical assistance provider helping CWS to be more intentional in our data collection and storytelling from an inclusive and culturally responsive lens. Gatherings with other grantees have allowed us to build connections with LGBTQIA+-led organizations throughout the state that are actively involved in advancing community safety and working to eliminate disparities in the criminal justice system.

Include a brief narrative of your subrecipient(s) efforts for each equity question. (See scorecard instructions for additional information related to subrecipient responses.) – N/A

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*

Clackamas County Continuum of Care
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- *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.*
- 5. NEW QUESTION: People With Lived Experience of Homelessness (PWLEH) Engagement:** Providers should provide ways for participants to contribute to the operations of the agency and program. Clackamas CoC strongly encourages roles with lived experience requirement at multiple levels of your organization to ensure successful program design and implementation. How do you involve people with lived experience of homelessness (PWLEH) in your service planning and delivery? How does this happen for this project specifically, and for your agency overall? In what ways does the project provide opportunities for participants to contribute directly to the day-to-day operations or programming? (Including but not limited to) **(3691/5000 Characters maximum) (10 points maximum)**
- a. *Weekly on-site meetings, tenant council or participant advisory group, or similar*
 - b. *Agency employment opportunities for participants*
 - c. *Volunteer projects or similar for participants*
 - d. *Peer Leadership/Mentorship opportunities for participants*
 - e. *Program improvement specific focus groups with participants (working alongside of participants to improve systems – Action Plans – engagement around service delivery and processes, forms etc.*
 - f. *Participant – strategic planning and annual planning*

Please describe any engagement efforts that you would consider innovative or exceptional or are otherwise effective and meets best practices.

If you are not currently doing this, please clearly identify actions you will take within the next year to involve PWLEH. – **N/A**

Intentionally seeking information ensures that our programming reflects community needs. The most significant way we engage participants who identify as homeless is through our feedback surveys and strategic planning process. This feedback helps us to best understand the needs of community members as we are continually listening and learning. We recognize that needs do change over time, and this helps us to understand evolving needs. Additionally, we collaborate with numerous culturally specific organizations that work with homeless populations. These community partners provide referrals to us, and because CWS serves as the Coordinated Housing Access “door” for DV survivors, many referrals for homeless individuals come through us. Through our collaboration with culturally specific partners, we are reaching survivors with the highest needs, as often immigrants and refugees face additional barriers to accessing housing.

As previously mentioned, survivors are actively engaged in decision making processes and informing our programming here at CWS. One notable process has been through our Strategic Planning (see Q3). Additionally, CWS is planning to change the name of our agency to be more inclusive and reflective of the communities served. Survivors and program participants will be actively engaged in this process through surveying, interviews, focus groups, within the Latinx support group and through the *Promotoras* program. An invitation for interviews to inform this important change is also going out to current and former participants throughout agency programs. In addition, there is a listening session occurring specifically for both

Clackamas County Continuum of Care
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current and former Latinx Support Group attendees and *Promotoras* cohorts. The VOICES committee will also be an active part of this process. CWS also will be implementing a Youth Advisory Board this year to further inform our programming from the perspective of young survivors. On-site at The Village Emergency Shelter, weekly check-in meetings are hosted in which participants can share feedback.

Additionally, some of our *Promotoras* have been referred to the program after being Housing Program participants, and now have an advisory role in CWS' service delivery. They provide culturally inclusive outreach, facilitate connections within the community, and act as liaisons between CWS and the Latinx community, often referring peers, relatives, and friends to our programs. *Promotoras* serve as leaders within their communities, engage with fellow community members to define cultural norms of healthy relationships and identify desired resources when these relational needs are not met. They are compensated for their participation through \$25 gift cards attending *Promotoras* meetings and one-on-one supervision with the Latinx Services Manager and are provided \$50 gift cards for attending community outreach events.

Employment and volunteer opportunities are also open to program participants, for example, Camp HOPE counselors and volunteers were often campers themselves at one point. Both Camp HOPE counselors and the *Promotoras* receive extensive training in trauma-informed care and facilitate community-building activities to break the isolation of DV/SA. Notably, we offer a 5-session, 15-hour training to participants to become certified *Promotoras*. Furthermore, *Promotoras* have the opportunity to take the 40-hour DV/SA Advocacy training to become state-certified Confidential Advocates. Over the last 5 years, we have hired 2 *Promotoras* and 3 Camp HOPE counselors/campers into staff positions. The CWS Board of Directors and Ambassador Council includes membership from former program participants.

20% of CWS staff identify as formerly homeless. The Housing Program staff who will be working directly on this project are the agency's most tenured direct service team, with 75% having worked with people experiencing homelessness for over five years. Notably, Housing Case Managers conduct follow-up work with participants to ensure they are not facing additional housing barriers and discuss any additional resources needed. 70% of staff identify as survivors of domestic and/or sexual violence.

Include a brief narrative of how your subrecipient(s) engage PWLEH. If subrecipient(s) is not currently doing this, describe efforts subrecipients will take within the next year to involve PWLEH. (See scorecard instructions for additional information related to subrecipient responses.) – N/A

- 6. Healthcare Organization Engagement:** Please provide a brief narrative (**2430/2500 Characters maximum**) 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 to address healthcare needs and support permanent housing outcomes. (**9 points maximum**)

All CWS programs intersect with public and private healthcare organizations. CWS has longstanding relationships with healthcare providers from crisis and emergency care to long-term and specialty care. With some, we are referral partners, and with others, we share workspaces and collaborate regularly to coordinate services. CWS staff assist survivors in obtaining and navigating medical insurance and public benefits through the OHP or the healthcare marketplace. Staff receive training regarding eligibility for the Oregon Health Plan and navigating the insurance

Clackamas County Continuum of Care
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marketplace to assist survivors in their search for benefits. When needed, we also partner with healthcare system navigators to quickly connect survivors to the coverage they need.

Often, the first contact for a survivor is through healthcare or medical services after an assault. In partnership with Providence Health Systems, CWS provides co-located advocates in the emergency room to respond to survivors. These advocates provide immediate crisis intervention and connect survivors to ongoing services. Often housing is identified as a critical need, and survivors are connected to emergency shelters and the coordinated entry system through CWS' Housing Program.

Youth also need safe spaces to receive services which was the motivation behind expanding our Youth Services Program to include youth advocates co-located at School-Based Health Centers. We partner with Clackamas County Public Health, Pediatric Associates of Northwest, and individual healthcare providers to ensure that medical staff are onsite to assist students for the entire time they attend Camp HOPE Oregon, a weeklong summer camp for youth who have witnessed or experienced DV/SA. Many Camp HOPE participants are part of households working with CWS' Housing Program.

CWS provides mental health care through our licensed counseling program, serving both insured and uninsured survivors. Our counselors have expertise in serving DV/SA survivors and work with adults and youth. Counseling services can be accessed in person or through telehealth and are provided in English or Spanish. Additionally, CWS has a formal partnership with Clackamas County Health Centers, where CWS Advocates provide onsite services and respond to disclosures made in the healthcare setting. We can facilitate access to critical acute mental healthcare and acute and ongoing medical care through this partnership.

Include a brief narrative of how your subrecipient(s) engage healthcare organizations. (See scorecard instructions for additional information related to subrecipient responses.) – **N/A**

Do you have any current/planned commitments from a health care organization(s) to provide health care resources to project participants. YES__X_ NO___ If yes, is the commitment a formal written agreement? YES ___ NO__X__ If yes, does the formal written agreement include the value of the commitment? YES___ NO__X__ and dates the healthcare resources will be provided? YES___ NO__X___. If yes, please provide the written formal agreement with commitment value and service dates.

- 7. 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. **(12 points maximum)**

Project is committed to using Housing First approach with no service participation or pre-conditions. YES__X__ NO__

Each Agency must answer each part to the question affirmatively in to be considered fully in alignment with Housing First:

- Does the project quickly move participants into permanent housing (without preconditions or extra steps required to be met)? Yes or No
- Are you able to respond affirmatively to all of the following statements:

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024

- This project does not screen out for reasons related to income (Having too little or no income) **Yes**
- This project does not screen out for active or history of substance use (including requirements for participation in treatment once enrolled, sobriety or intention to become/remain sober) **Yes**
- This project does not screen out for having a criminal record of any kind with exceptions only for state-mandated restrictions. If restrictions in place related to criminal record, please list what they are and corresponding state mandate) If no, please list criminal history screening criteria and mandate requiring it **Yes**
- This project does not screen out for having a history of domestic violence (e.g. lack of protection order, period of separation from abuser, or law enforcement involvement, etc.) **Yes**
- This project does not screen out based on an individual’s “housing readiness” or “motivation to change” or any other similar criteria. **Yes**
- This project does not screen out based on previous rental history (evictions, damages, etc.) **Yes**
- Are you able to respond affirmatively that none of the following are reasons for program termination:
 - Failure to participate in supportive services **Yes**
 - Failure to make progress on a service plan **Yes**
 - Loss of income or failure to improve income **Yes**
 - Domestic violence **Yes**
 - Any other activity not covered in a lease agreement typically found in the project’s geographic area. **Yes**
- Does the project have written eligibility criteria specific to this project, which are in alignment with Housing First principles and are provided to participants? **Yes**, attach or No

If you answered ‘no’ to any of these questions, how do you do everything in your power to support the participant and prevent the participant from losing housing? (2500 Characters maximum) -N/A

Describe **(4700/5000 characters maximum)** 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. Please provide a copy of these policies and procedures.

CWS was the first organization to implement the Housing First model for survivors of domestic and sexual violence in Clackamas County and has been maintaining fidelity to this model for 14 years. Housing First includes five core values: 1) immediate access to permanent housing with no housing readiness requirements, 2) consumer choice and self-determination, 3) recovery orientation, 4) individualized and client-driven support, and 5) social and community integration. Firstly, there are no housing readiness requirements for entry into CWS housing programs and there are no requirements for service participation. The program works with all HUD homeless categories 1-4. As space allows, we accept all homeless or fleeing survivors of domestic and sexual violence, including trafficking, regardless of current or past substance abuse, income, criminal records,

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marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. The Housing Case Manager (HCM) and Housing Program Manager document that participating households meet the appropriate HUD eligibility criteria for the housing supports they are offered, are assessed for the appropriate type of intervention, and are working on an individualized case plan to achieve the goal of maintaining permanent housing.

CWS utilizes diversion and RRH strategies to quickly move survivors into safe housing. CWS has the capacity to provide diversion strategies and support the moment a participant reaches out with a housing crisis through our 24/7 crisis lines, in-person support at A Safe Place Family Justice Center, or mobile advocacy services. If possible, they are supported with any and all immediate remedies so that they can be prevented from entering the housing system. If not, they are screened in the moment for the CHA list. This responsiveness and immediate access are a great asset to survivors, who may have limited time outside of the home or away from the watch of an abusive partner. For many, a call back from the mainstream CHA could place the victim at serious risk by alerting the abuser of their attempt to leave. CWS' rapid response allows survivors to understand and access the supports available to them, as well as to understand the limitations of what is available, and work with staff who are extremely experienced in providing individualized, victim-specific supports. Our diversion and RRH strategies focus on creating unique safety plans and engaging in problem-solving to support survivors in finding shelter, housing, and/or temporary safe alternative options. These conversations involve actively listening to participants; searching for resources, community support, or options; and focusing on the survivor's strengths. All CWS staff are trained in providing the CHA housing screen and completing it at the first point of contact with homeless (or at risk of homelessness) survivors. It is administered in the primary language of the participant by bilingual staff (staff speak over six languages) or with the assistance of an interpreter. The screen is offered in various formats (large print, etc.) and adapted to accommodate any additional individual needs. Throughout the process, all the details of the program are shared with a survivor both verbally and in writing.

The CWS Housing Program works to enhance safety, mitigate isolation, and promote self-determination. All services are voluntary, client-driven, and offered in the language of their choice. Every Housing Program participant is presented with a range of supportive services individualized to their self-determined needs and situations. Consequently, services can look very different for each participant. HCMs also help participants connect with community resources and navigate multiple systems such as public safety, criminal justice, health care, education, and social services. All services remain flexible to meet the changing needs of the family as they stabilize, and we continue to offer support for as long as the survivor would like to engage. Long-term, multi-faceted services can mitigate the impact of trauma and help with recovery. Our model focuses on building relationships regardless of the outcomes. The relationship between staff and participants is part of social and community integration and healing. If issues arise, this relationship allows staff and participants to work through solutions together. Because of this, CWS has never terminated a participant from the CWS Housing Program. While our grievance policy is clearly outlined and presented to participants, reliance on the trusting relationship frequently resolves the issue before it reaches that level.

Include a brief narrative of how your subrecipient(s) utilize Housing First approach. If the subrecipient does not use Housing First approach, how does the subrecipient(s) do everything in our power to support the participant and prevent the participant from losing housing? (See scorecard instructions for additional information related to subrecipient responses.) – **N/A**

NEW QUESTION: Project has completed a Housing First Evaluation, such as the Housing First Assessment Tool, within the past 12 months, and reviewed with CoC Lead? YES ___ NO X (not scored)

Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024

CWS learned about this at our most recent contract meeting therefore this will be completed this coming year.

Total Project Narrative Points: 53.5

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 (Data Quality (Local 0260) v12.1.) 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. CWS RRH: 1.06%	5	4
Performance- Utilization: At the end of last operating year, did you serve the number of households indicated in your grant agreement? 70% or less= 0, 71-75%=1 76-80%=2, 81-85%=3, 86-90%=4, 91-95%=5, 96-100%=6 Proposed project participation vs Households Served CWS RRH: 100%	6	6

**Clackamas County Continuum of Care
Renewal Project Ranking Criteria – 2024**

<p>Ending Homelessness: The PSH program met 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, $\leq 87\%$=7 CWS RRH: 83.33%</p>	7	5
<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 CWS RRH:83%</p>	5	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: _____36_____

3. HUD Criteria	Maximum points: 2
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- Project is 100% Dedicated Chronically Homeless or Dedicated PLUS beds (1 point) ____0____
- Project increases overall RRH beds (1 point) ____1_____

Total HUD Criteria Points: _____1_____

Total Score: _____90.5_____

Any project submitting an application through Esnap 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.

From: [SmithRoller, Raina](#)
To: [Alosa, Christopher](#); [Alex Gonzales](#); [Angie Drake \(angied@cwsor.org\)](#); [Arron Boone](#); [Callahan, Shannon](#); [Cindy Fletcher](#); [Dowd, Amy](#); [Durbín, Brenda](#); [Dusty Figueroa](#); [Elise Huerta-Enochian](#); [Ernesto Hernandez](#); [EV Armitage](#); [Jennifer Stein](#); [Jenny Bremner](#); [Johns, Joey](#); [Karen Saxe](#); [Karter, Toni](#); [Katie Higgins Laughlin](#); [Kristin Yates Fronza \(kristin.yates.fronza@devnw.org\)](#); [Marcy Trueb](#); [Matt Hise](#); [Megan Wilson](#); [Melissa Erlbaum](#); [Miller, Elizabeth](#); [Molina, Devvin](#); [Much Grund, Jennifer](#); [Peter Tompkins-Rosenblatt](#); [Szego, R.E.](#); [Rose Fuller](#); [Sarah Holland](#); [Simon Fulford \(sfulford@pcreek.org\)](#)
Cc: [Skinner, Erin](#); [Boyd Brown](#); [Jill Kemper](#)
Subject: FY 2024 CoC Local Competition Results- Priority Listing, Scores, and Funding Amounts
Date: Tuesday, October 1, 2024 8:01:57 AM
Attachments: [Notification of Projects accepted and ranked for FY 2024 CoC Competition.pdf](#)
Importance: High

Hello CoC Project Applicants-

Thank you for submitting your project application(s) for FY 2023 Continuum of Care (CoC) funding. Attached please find a list of accepted projects that will be submitted to HUD for funding consideration.

This year, we had a newly formed CoC Local Competition Scoring Committee evaluate and score narrative responses. They convened with the Housing Services Steering Committee, which is the CoC governing body, on September 19th, to make a final ranking decision. Both committees carefully considered all applications, completing their final evaluation and ranking at the September 19th meeting. Results of the local competition, including priority listing, scores, and proposed funding amounts, can be found on the Community Development website:
<https://www.clackamas.us/communitydevelopment/cchp.html#continuumofcareapplication>

For information about HUD's appeal process, please refer to the FY2022 CoC NOFO (pg. 120-124) and 24 CFR 578.35.

I am happy to answer questions you may have about the competition process or results, as well as provide program support. Please reach out if you would like to meet.

Thank you,

Raina

[Clackamas County Community Resource Folder](#)

**Raina Smith-Roller (she/her/hers), Continuum of Care (CoC) Lead
Housing and Community Development
Clackamas County Health, Housing & Human Services**
2051 Kaen Rd Suite 239 | Oregon City, OR 97045
971-352-2684 | rsmithroller@clackamas.us
Hours of Operation: Mon – Thu, 7 a.m. – 6 p.m.
www.clackamas.us

We are building a safe Clackamas County where all people thrive, are celebrated for their diverse

Projects accepted through Clackamas County's FY2024 Continuum of Care (CoC) Local Competition

Date of notification:
September 30, 2024

Information on priority listing, including ranking, scores, and funding amounts, can be found on the Community Development Website:
<https://www.clackamas.us/communitydevelopment/cchp.html#continuumofcareapplication>

Tier 1 Projects

Clackamas County Department of Health, Housing, and Human Services

- *Housing our Families RRH Renewal Project*
- *Coordinated Housing Access (CHA) Renewal Project*
- *Homeless Management Information System (HMIS) Renewal Project*
- *Hope Leasing PSH Renewal Project*
- *Rent Well Rapid Rehousing Renewal*
- *Housing the People PSH (CoC Bonus-New Project)*

NW Housing Alternatives

- *Annie Ross Housing Services HUD RRH*

Clackamas Women's Services

- *PH-RRH DV Bonus Project (DV Bonus- New Project)*
- *Coordinated Access for Survivors of Domestic Violence*
- *Rapid Rehousing DV Bonus- Latinx Program*
- *Rapid Rehousing Project*
- *Permanent Supportive Housing Project*
- *CWS Housing for Survivors PH-RRH*

Corvallis Neighborhood Housing Services/DevNW

- *CoC Youth Joint Component TH/RRH*

Parrott Creek

- *HomeSafe Enhancement Transitional Housing/Rapid Rehousing*

Projects straddling Tier 1 and 2

Clackamas County Department of Health, Housing, and Human Services

- *Housing our Heroes PSH Renewal Project*

Tier 2 Projects

Housing Authority of Clackamas County

- *Shelter + Care (S+C)*

Central City Concern

- *Chez Ami*

Clackamas County Department of Health, Housing, and Human Services

- *HOPE II*

Clackamas Women's Services

- *DV Coordinated Entry Expansion (COC Bonus)*
- *Rapid Rehousing Expansion (CoC Bonus)*

Projects accepted but not ranked

Corvallis Neighborhood Housing Services/DevNW

- *YHDP Transitional Housing/Rapid Rehousing Joint Component*

Northwest Family Services

- *YHDP Diversion & Housing Access*

Clackamas County Department of Health, Housing, and Human Services

- *OR-507 CoC Planning Grant*

Clackamas County Continuum of Care FY2024 Priority Listing

Tier 1 Projects: up to \$4,140,401

Note: Tier 1 listing below includes DV Bonus Projects. If this project is selected for DV Bonus, it will be removed from Tier 1 and funded through DV Bonus funds

Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Status
Clackamas County H3S	HMIS	HMIS Renewal	N/A	\$70,862.00	1	\$0.00	Accepted
Clackamas County H3S	Coordinated Housing Access	SSO-CE Renewal	N/A	\$360,513.00	2	\$0.00	Accepted
Clackamas Women's Services	DV Coordinated Entry	SSO-CE Renewal	N/A	\$279,544.00	3	\$0.00	Accepted
Clackamas Women's Services	RRH-DV Bonus-Latinx Renewal	RRH Renewal	92.83	\$233,517.00	4	\$0.00	Accepted
Clackamas Women's Services	PH-RRH DV Bonus Project- DV BONUS	RRH- New	92.33	\$397,607.00	5	\$0.00	Accepted
Clackamas Women's Services	Rapid Rehousing Project	RRH Renewal	90.50	\$334,594.00	6	\$0.00	Accepted
Clackamas County H3S	Housing The People- CoC BONUS	PSH- New	90.17	\$491,622.00	7	\$0.00	Accepted
Parrott Creek	HomeSafe Enhancement	TH/RRH Renewal	90.17	\$243,696.00	8	\$0.00	Accepted
Northwest Housing Alternatives	Annie Ross Housing Services HUD RRH	RRH Renewal	89.67	\$193,662.00	9	\$0.00	Accepted
Clackamas County H3S	HOPE Leasing	PSH Renewal	88.00	\$350,689.00	10	\$0.00	Accepted
Clackamas County H3S	Rent Well RRH	RRH Renewal	87.67	\$140,313.00	11	\$0.00	Accepted
Clackamas Women's Services	Permanent Supportive Housing Project	PSH Renewal	87.17	\$237,117.00	12	\$0.00	Accepted
Clackamas Women's Services	CWS Housing for Survivors-PH-RRH	RRH Renewal	86.00	\$334,829.00	13	\$0.00	Accepted
DevNW	CoC Youth Joint Component TH/RRH	TH/RRH Renewal	83.67	\$184,048.00	14	\$0.00	Accepted
Clackamas County H3S	Housing Our Families	RRH Renewal	82.67	\$223,000.00	15	\$0.00	Accepted
Clackamas County H3S	Housing Our Heroes <i>This project straddles Tier 1 & Tier 2</i>	PSH Renewal	82.67	\$64,788.00	16	\$0.00	Accepted
				Total:			
				\$4,140,401.00			

Tier 2 Projects: up to \$1,523,865

Note: Tier 2 projects will be selected based on the CoC Application score and the project application score outlined in section I.B.3.h.(2)

Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Status
Clackamas County H3S	Housing Our Heroes <i>This project straddles Tier 1 & Tier 2</i>	PSH Renewal	82.67	\$371,589.00	16	\$0.00	Accepted
Clackamas County H3S	HOPE II	PSH Renewal	82.50	\$98,217.00	17	\$0.00	Accepted
Housing Authority of Clack County	Shelter + Care (S+C)	PSH Renewal	77.67	\$644,088.00	18	\$0.00	Accepted
Clackamas Women's Services	DV Coordinated Entry Expansion- CoC BONUS	SSO-CE Expansion	N/A <i>CoC Board opted to move all expansion projects in Tier 2 based on local priorities</i>	\$48,462.00	19	\$0.00	Accepted
Clackamas Women's Services	RRH Expansion CoC BONUS	RRH- Expansion	91.5 <i>CoC Board opted to move all expansion projects in Tier 2 based on local priorities</i>	\$126,130.00	20	\$0.00	Accepted
Central City Concern	Chez Ami	PSH Renewal	68.67	\$235,379.00	21	\$0.00	Accepted
				Total:			
				\$1,523,865.00			

Projects Approved but not Ranked							
<i>Note: Projects approved but not ranked have been determined to be non-competitive by HUD</i>							
Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Status
Clackamas County H3S	CoC Planning Grant	Planning	N/A	\$277,589.00	N/A	\$0.00	Accepted
DevNW	YHDP Youth Joint Component TH/RRH	TH/RRH	N/A	\$701,339.00	N/A	\$0.00	Accepted
Northwest Family Services	Youth Diversion & Housing Access	SO	N/A	\$250,000.00	N/A	\$0.00	Accepted
Total:				\$1,228,928.00			
Projects Not Selected							
Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Project Accepted?
All project applications were selected this year							
Reallocated funds							
Clackamas County did not reallocate any funds during this year's CoC's local competition.							

Totals	
Tier 1	\$4,140,401.00
Tier 2	\$1,523,865.00
Projects approved but not ranked	\$1,228,928.00
Total	\$6,893,194.00

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.

The FY2024-2025 competition is now open. Agencies interested in applying for future CoC funding opportunities should contact Raina Smith-Roller at 971-352-2684 or rsmithroller@clackamas.us.

The deadline for project application submission is Monday, Sept. 9, 11:59 p.m. This includes ESNAPS application, survey responses, and score cards submitted to rsmithroller@clackamas.us.

[Learn more](#)

NOFO Priority Listing		2023	2022
Consolidated Application		2023	2022
Ranking and Selection Process		2023	2022
Local Priority Listing	2024	2023	2022
Rating and Ranking Score Cards	2024 New Applicant Score Card New Project Score Card Renewal Score Card Score Card- First Year Youth New Applicant Score Card Youth Renewal Score Card	2023	2022
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Scoring Rubric for Narrative Questions	2024	2023	2022

Clackamas County Continuum of Care FY2024 Priority Listing

Tier 1 Projects: up to \$4,140,401

Note: Tier 1 listing below includes DV Bonus Projects. If this project is selected for DV Bonus, it will be removed from Tier 1 and funded through DV Bonus funds

Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Status
Clackamas County H3S	HMIS	HMIS Renewal	N/A	\$70,862.00	1	\$0.00	Accepted
Clackamas County H3S	Coordinated Housing Access	SSO-CE Renewal	N/A	\$360,513.00	2	\$0.00	Accepted
Clackamas Women's Services	DV Coordinated Entry	SSO-CE Renewal	N/A	\$279,544.00	3	\$0.00	Accepted
Clackamas Women's Services	RRH-DV Bonus-Latinx Renewal	RRH Renewal	92.83	\$233,517.00	4	\$0.00	Accepted
Clackamas Women's Services	PH-RRH DV Bonus Project- DV BONUS	RRH- New	92.33	\$397,607.00	5	\$0.00	Accepted
Clackamas Women's Services	Rapid Rehousing Project	RRH Renewal	90.50	\$334,594.00	6	\$0.00	Accepted
Clackamas County H3S	Housing The People- CoC BONUS	PSH- New	90.17	\$491,622.00	7	\$0.00	Accepted
Parrott Creek	HomeSafe Enhancement	TH/RRH Renewal	90.17	\$243,696.00	8	\$0.00	Accepted
Northwest Housing Alternatives	Annie Ross Housing Services HUD RRH	RRH Renewal	89.67	\$193,662.00	9	\$0.00	Accepted
Clackamas County H3S	HOPE Leasing	PSH Renewal	88.00	\$350,689.00	10	\$0.00	Accepted
Clackamas County H3S	Rent Well RRH	RRH Renewal	87.67	\$140,313.00	11	\$0.00	Accepted
Clackamas Women's Services	Permanent Supportive Housing Project	PSH Renewal	87.17	\$237,117.00	12	\$0.00	Accepted
Clackamas Women's Services	CWS Housing for Survivors-PH-RRH	RRH Renewal	86.00	\$334,829.00	13	\$0.00	Accepted
DevNW	CoC Youth Joint Component TH/RRH	TH/RRH Renewal	83.67	\$184,048.00	14	\$0.00	Accepted
Clackamas County H3S	Housing Our Families	RRH Renewal	82.67	\$223,000.00	15	\$0.00	Accepted
Clackamas County H3S	Housing Our Heroes <i>This project straddles Tier 1 & Tier 2</i>	PSH Renewal	82.67	\$64,788.00	16	\$0.00	Accepted
Total:				\$4,140,401.00			

Tier 2 Projects: up to \$1,523,865

Note: Tier 2 projects will be selected based on the CoC Application score and the project application score outlined in section I.B.3.h.(2)

Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Status
Clackamas County H3S	Housing Our Heroes <i>This project straddles Tier 1 & Tier 2</i>	PSH Renewal	82.67	\$371,589.00	16	\$0.00	Accepted
Clackamas County H3S	HOPE II	PSH Renewal	82.50	\$98,217.00	17	\$0.00	Accepted
Housing Authority of Clack County	Shelter + Care (S+C)	PSH Renewal	77.67	\$644,088.00	18	\$0.00	Accepted
Clackamas Women's Services	DV Coordinated Entry Expansion- CoC BONUS	SSO-CE Expansion	N/A <i>CoC Board opted to move all expansion projects in Tier 2 based on local priorities</i>	\$48,462.00	19	\$0.00	Accepted
Clackamas Women's Services	RRH Expansion CoC BONUS	RRH- Expansion	91.5 <i>CoC Board opted to move all expansion projects in Tier 2 based on local priorities</i>	\$126,130.00	20	\$0.00	Accepted
Central City Concern	Chez Ami	PSH Renewal	68.67	\$235,379.00	21	\$0.00	Accepted
Total:				\$1,523,865.00			

Projects Approved but not Ranked							
<i>Note: Projects approved but not ranked have been determined to be non-competitive by HUD</i>							
Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Status
Clackamas County H3S	CoC Planning Grant	Planning	N/A	\$277,589.00	N/A	\$0.00	Accepted
DevNW	YHDP Youth Joint Component TH/RRH	TH/RRH	N/A	\$701,339.00	N/A	\$0.00	Accepted
Northwest Family Services	Youth Diversion & Housing Access	SO	N/A	\$250,000.00	N/A	\$0.00	Accepted
Total:				\$1,228,928.00			
Projects Not Selected							
Applicant Name	Project Name	Project Type	Overall Score	Amount Requested from HUD	Rank	Reallocated Funds	Project Accepted?
All project applications were selected this year							
Reallocated funds							
Clackamas County did not reallocate any funds during this year's CoC's local competition.							

Totals	
Tier 1	\$4,140,401.00
Tier 2	\$1,523,865.00
Projects approved but not ranked	\$1,228,928.00
Total	\$6,893,194.00

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.

The FY2024-2025 competition is now open. Agencies interested in applying for future CoC funding opportunities should contact Raina Smith-Roller at 971-352-2684 or rsmithroller@clackamas.us.

The deadline for project application submission is Monday, Sept. 9, 11:59 p.m. This includes ESNAPS application, survey responses, and score cards submitted to rsmithroller@clackamas.us.

[Learn more](#)

NOFO Priority Listing	2024	2023	2022
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Scoring Rubric for Narrative Questions	2024	2023	2022



SmithRoller, Raina

Approved FY 2024 Continuum of Care (CoC) Consolidated Application Now Posted

To

Bcc Aiosa, Christopher; Alonso, Irina; Alvarado, Amanda; Amend, Michelle; Anderson, Scott; Anstett, Amorita; Balbuena-Solis, Edith; Bergin, Phyllis; Berrelleza, Erick; Bibiana Rivera Espindola; 'Billmyre, Stephanie'; Bohannon, Casey; Braunstein, Beth; Brown, Vahid; Bundy, April; Bush, Nancy; Carlos Benson Martinez; Christopherson, Teresa; Cook, Rod; Davenport, Stacy; Davis, Donna; Decker, Lauren; DeSantis, Kimberlee; Durbin, Brenda; Dwiggins, Brian; EOC, EOCOperations; Farley, Tracy; Ferron, Ashley; Fischer, Ashley; Fischer, Sonya; Fisher, Linda; Furlow, Matthew; Gander, Jeffrey; Garcia, Cindy; Greene, Debbie; Guillen, Anna; Harvey, Jennifer; Henry, Aaron; Herron, April; Holscher, Libby; Ingersoll, Kristen; Jefferson, Stephanie; Joanna Jones; Johnson, Jaime; Johnson, Lily; Karter, Toni; Kate Howells; Klepper, Emily; Kraff, Trisha; Lambert, Nohora; Maddox, Belinda; Mascuine, Jenny; Mason-Joyner, Philip; Mather, Korene; McArthur, Glen; McDonald, Malcolm; McIntyre, Sarah; McNece, Kristina; Mendenhall, Donna; Merritt, Hillary; Miffin, Nick; Miller, Elizabeth; Mintun, Paula; Moore, Margaret; Moreland, Tracy; Much Grund, Jennifer; Murray, Annie; Murray, Galli; Okeke, Claire; Paresi, Michell; Parini-Runge, Shelly; Partipilo, Chris; Pence, Chris; Powell, Serena; Preciado, Raul; Present, Sarah; R.E Szego; Rumbaugh, Mary; Schrader, Martha; 'Silver, Erika'; Sirois, Mark; Skinner, Erin; SmithRoller, Raina; Stensen, Amber; Stewart, Bill; Stiff, Colette; 'Strawser, Amy'; Suarez, Clara; Summer, Anna;

Hello CoC Applicants, CoC Members, and Community Partners-

I am pleased to inform you that the final FY 2024 Continuum of Care (CoC) Approved Consolidated Application is now published on Clackamas County's CoC Web Page:

<https://www.clackamas.us/communitydevelopment/cchp.html#continuumofcareapplication>

Please do not hesitate to reach out with questions.

Thank you,

Raina

[Clackamas County Community Resource Folder](#)

**Raina Smith-Roller (she/her/hers), Continuum of Care (CoC) Lead
Housing and Community Development
Clackamas County Health, Housing & Human Services**
2051 Kaen Rd Suite 239 | Oregon City, OR 97045
971-352-2684 | rsmithroller@clackamas.us
Hours of Operation: Mon – Thu, 7 a.m. – 6 p.m.
www.clackamas.us

We are building a safe Clackamas County where all people thrive, are celebrated for their diverse identities, and know they belong

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.

The FY2024-2025 competition is now open. Agencies interested in applying for future CoC funding opportunities should contact Raina Smith-Roller at 971-352-2684 or rsmithroller@clackamas.us.

The deadline for project application submission is Monday, Sept. 9, 11:59 p.m. This includes ESNAPS application, survey responses, and score cards submitted to rsmithroller@clackamas.us.

[Learn more](#)

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Scoring Rubric for Narrative Questions	2024	2023	2022

October 23, 2024

Joey Johns
Clackamas County Social
Services Division
2051 Kaen Rd,
Oregon City, OR 97045

**RE: Commitment to leverage SHS funds to support CCSSD New Project Application FY2024
Housing the People PSH
Project Details: 19 units of Permanent Supportive Housing (Scattered Site)
Date Units will be available for participants: 7/1/2025**

Dear Mr. Johns:

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 Counties Social Services Division (CCSSD) New Project Application FY2024 Housing the People PSH.

Clackamas County commits to leveraging funds to support 25% of participants in this PSH Bonus Project during the 1-year grant term of the Project. The number of participants for which we are committed to leveraging SHS funds, based on 25% of total units is 4.75.

The Grant Term of the project is anticipated to be 7/1/2025 through 6/30/2026. The total dollar amount of this commitment shall not exceed \$130,000. CCSSD 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 Project is not selected by HUD for funding. This funding commitment is also conditional upon the approval of any necessary amendment(s) to current contracts between H3S Housing Community Development and CCSSD by the Clackamas County Board of County Commissioners.

Respectfully,

Vahid Brown

Vahid Brown
Deputy Director, Housing and Community Development

Contract Transmittal Form

Health, Housing & Human Services Department

H3S Contract #: 11480 Board Order #: N/A (Under \$150,000)	Division: HCD Contact: Phelan, Chelsea Program Contact: Stark, Jaymi	<input type="checkbox"/> Subrecipient <input type="checkbox"/> Revenue <input type="checkbox"/> Amend # \$ <input type="checkbox"/> Procurement Verified <input type="checkbox"/> Aggregate Total Verified
-----------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Non BCC Item **BCC Agenda**

CONTRACT WITH: Clackamas County Social Services Division

CONTRACT AMOUNT: \$6,583,905.00

TYPE OF CONTRACT

- | | |
|--------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> Agency Service Contract | <input type="checkbox"/> Memo of Understanding/Agreement |
| <input type="checkbox"/> Construction Agreement | <input type="checkbox"/> Professional, Technical & Personal Services |
| <input type="checkbox"/> Intergovernmental Agreement | <input type="checkbox"/> Property/Rental/Lease |
| <input checked="" type="checkbox"/> Interagency Services Agreement | <input type="checkbox"/> One Off |

DATE RANGE

- | | |
|---------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> Full Fiscal Year _____ - _____ | <input type="checkbox"/> 4 or 5 Year _____ - _____ |
| <input type="checkbox"/> Upon Signature _____ - _____ | <input type="checkbox"/> Biennium _____ - _____ |
| <input type="checkbox"/> Other _____ - _____ | <input checked="" type="checkbox"/> Retroactive Request? 7/1/2023 - 6/30/2024 |

INSURANCE What insurance language is required?

Checked Off N/A

Commercial General Liability: Yes No, not applicable No, waived

If no, explain why: _____

Business Automobile Liability: Yes No, not applicable No, waived

If no, explain why: _____

Professional Liability: Yes No, not applicable No, waived

If no, explain why: _____

Approved by Risk Mgr _____

Risk Mgr's Initials and Date

BOILER PLATE CHANGE

Has contract boilerplate language been altered, added, or deleted?

No Yes (must have CC approval-next box) N/A (Not a County boilerplate - must have CC approval)

If yes, what language has been altered, added, or deleted and why: _____

COUNTY COUNSEL

Yes by: _____ Date Approved: _____

OR

This contract does not require approval by County Counsel per established Counsel processing standards.

SIGNATURE OF DIVISION REPRESENTATIVE: _____

Date: _____

H3S Admin Only

Date Received: _____ Date Signed: _____
 Date Sent: _____

AGREEMENTS/CONTRACTS

N/A (Under \$150,000)

X	New Agreement/Contract
	Amendment/Change Order Original Number _____

ORIGINATING COUNTY

**DEPARTMENT: Health, Housing Human Services
Housing and Community Develop**

PURCHASING FOR: Contracted Services _____

OTHER PARTY TO

CONTRACT/AGREEMENT: Clackamas County Social Services Division _____

PURPOSE OF

CONTRACT/AGREEMENT:

DATE OF EXECUTION: _____

H3S CONTRACT NUMBER: 11480 _____

**INTRA-AGENCY AGREEMENT
BETWEEN
HOUSING AND COMMUNITY DEVELOPMENT DIVISION
AND
SOCIAL SERVICES DIVISION
11480**

I. Purpose

- A. This Agreement is made between **Clackamas County Housing and Community Development Division (HCDD)** and **Clackamas County Social Services Division (SSD)** for the provision of (4.75) FTE for the Coordinated Housing Access (CHA) program, (1) FTE for case management for RLRA vouchered households, (11) FTE for rent assistance service delivery and quality assurance, and (1) FTE Supervisor for rent assistance and RLRA team for its housing services program and as needed additional staff to be contracted through Robert Half temporary agency. This agreement is intended to memorialize the agreement between these two County Divisions operating with H3S.
- B. This Agreement provides the basis for a cooperative working relationship for the case management of households referred by SSD for RLRA vouchers, as well as the provision of rent assistance by SSD to households at risk of experiencing homelessness. The Scope of Work to be accomplished is described in the attached **Exhibit A**.

II. Scope of Work and Cooperation

A. *SSD* agrees to:

1. The Scope of Work in Exhibit A of this Agreement;
2. Employ and manage (3.75) FTE including: Program Supervisor, CHA Diversion Case Manager, bilingual Spanish Human Services Assistant, non bilingual Human Services Assistant for the CHA program;
3. Employ and manage (1) FTE bilingual Spanish Case Manager for RLRA vouchered households;
4. Employ and manage up to (11) FTE including at least (1) bilingual Spanish for rent assistance case management and quality assurance and (1) FTE for rent assistance Program Supervisor;
5. Distribute the full budgeted amount of rent assistance to qualifying vulnerable households.

B. HCDD agrees to:

1. Pay for the (3.75) FTE in social services for doing work in the CHA program;

Housing & Community Development Division

Intra-Agency Agreement #11480

Page 2 of 6

2. Pay for the (1) FTE case manager working with RLRA vouchered households;
3. Pay for up to (11) FTE rent assistance case managers and quality assurance team (up to agreed upon amount);
4. Pay for (1) FTE supervisor for the rent assistance and RLRA team;
5. Fund rent assistance for qualifying vulnerable households to prevent eviction and homelessness; and
6. Assist SSD with measuring and monitoring outcomes of interventions or care plans

III. Compensation

- A. The maximum compensation for this agreement is **\$6,583,905**. The budget components are detailed as follows:

Coordinated Housing Access		
Personnel	4.75 FTE	\$ 474,659
Materials and Services		\$ 3,000
Internal Services		\$ 62,943
Division Indirect		\$ 72,336
Department Indirect		\$ 8,395
RLRA Case Management		
Personnel	1.0 FTE	\$ 120,023
Materials & Services		\$ 3,000
Client assistance funds		\$ 40,000
Internal Services		\$ 15,916
Division Indirect		\$ 18,291
Department Indirect		\$ 2,123
Rent Assistance Program		
Personnel	11.0 FTE	\$1,101,218
Materials & Services		\$ 4,500
Internal Services		\$ 146,034
Rent Assistance		\$3,560,950
Division Indirect		\$ 167,821
Department Indirect		\$ 19,477
Supervisor Rent Assistance Team		
Personnel	1.0 FTE	\$ 160,725
Internal Services		\$ 23,957
Division Indirect		\$ 24,639
Department Indirect		\$ 3,708
Contracted Services		
Temporary Employee Staffing		\$ 550,190

Housing & Community Development Division

Intra-Agency Agreement #11480

Page 3 of 6

IV. Liaison Responsibility

Vahid Brown, 971-334-9870, Vbrown@clackamas.us will act as liaison from HCDD for this project. *Teresa Christopherson*, 503-650-5718, teresachr@clackamas.us will act as liaison from SSD.

VI. Amendments

This agreement may be amended at any time with the concurrence of both parties. Amendments become a part of this agreement only after the written amendment has been signed by both parties and the Department Director.

VII. Term of Agreement

This agreement becomes effective **July 1, 2023** and is scheduled to terminate **June 30, 2024**.

This agreement is subject to cancellation by either of the parties when thirty (30) days' written notice has been provided.

Termination. This contract may be terminated by mutual consent of both parties, or by either party, upon 30 days' notice, in writing and delivered by certified mail or in person.

This agreement consists of seven (7) sections and one (1) Exhibit.

Housing & Community Development Division

Intra-Agency Agreement #11480

Page 4 of 6

IN WITNESS WHEREOF, the parties hereto have caused this agreement to be executed by their duly authorized officers.

HCD DIVISION

Toni Karter

Toni Karter
Division Director
March 5, 2024

Date


SOCIAL SERVICES DIVISION

Brenda Durbin

Brenda Durbin
Division Director
March 4, 2024

Date

**CLACKAMAS COUNTY
HEALTH, HOUSING, AND HUMAN SERVICES DEPARTMENT**



Adam Brown (Mar 6, 2024 20:56 PST)

Rodney Cook,
Department Director
Adam Brown, Deputy Director

Date

Housing & Community Development Division

Intra-Agency Agreement #11480

Page 5 of 6

**EXHIBIT A
SCOPE OF WORK**

SHS Rent Assistance Funding

Referral Sources:

- a. Coordinated Housing Access
- b. weekly Justice Court Eviction Docket sent by Court Manager or staff
- c. Resolution Services
- d. Other internal referral sources approved by management

Eligibility:

- a. At risk of homelessness or housing instability

Income Guidelines:

- a. Household income cannot exceed 80% of area median income based on HUD determination.
- b. Priority will be given to households less than 50% of area median income.

Eligible Expenses:

- a. Full Rent
- b. Rent Arrearages
- c. Non-optional utilities paid to landlord.
- d. For disability, health or eviction prevention reasons, exceptions can be made for other utilities with manager approval.

Parking/Garage	Late fees	Future rent when no past rent is due
Parking: One space per adult HH member who has a car Garage: OK arrearages, going forward if a non-garage option, we pay if there is a disability or health or safety related reason only	yes	-3 months only unless a major reduction in income to be severely rent burdened (50% or more of gross income is going towards rent) or major change in life situation (they would need to contact us, we would not proactively contact them)

At Risk Referral Factors:

(Assumes Diversion conversation with CHA has happened prior to program entry)

Referred households will be households who self-report their income to be **at or below 50% of Area Median Income** for their Household Size, or up to 80% of AMI.

Half of the households referred daily will self-report at least one additional risk factor listed below, and half of households referred daily will not self-report at least one additional risk factor listed below.

- a. Actual termination or eviction notices
- b. Age 62 or older

Housing & Community Development Division

Intra-Agency Agreement #11480

Page 6 of 6

- c. Chronic health vulnerability/disability
- d. At least one member who identifies as from a marginalized or legislatively identified community (BIPOC, LGBTQ+, Veteran, Farmworker)
- e. English is not the primary or preferred language spoken.
- f. Income at or below 30% of AMI for their household size

**Please note this is after a backlog is cleared of people who were referred prior to this being implemented.

Workflow:

- CCSSD Rent Assistance Case managers will either manually gather all the documentation listed on the Rent relief Program File Checklist or use the Allita online portal to gather this documentation.
- Applications will be reviewed by quality assurance staff to ensure eligibility and completeness before passing to management, who performs a summary review (but can do a more detailed review if questions arise) prior to approval.
- Once approved, CCSSD Rent Assistance team has a team member who is dedicated to entering payments into Peoplesoft so that landlords get paid as quickly as possible.







HCD-11480_IAA SSD 11480 Rev.Final (002)

Final Audit Report

2024-03-07

Created:	2024-03-06
By:	Qudsia Sediq (QSediq@clackamas.us)
Status:	Signed
Transaction ID:	CBJCHBCAABAAoBfmjd9ogBAfgl5N4eM5iN2LW9OWHGb3

"HCD-11480_IAA SSD 11480 Rev.Final (002)" History

-  Document created by Qudsia Sediq (QSediq@clackamas.us)
2024-03-06 - 9:26:28 PM GMT- IP address: 198.245.132.3
-  Document emailed to abrown@clackamas.us for signature
2024-03-06 - 9:27:28 PM GMT
-  Email viewed by abrown@clackamas.us
2024-03-07 - 4:25:38 AM GMT- IP address: 213.188.65.117
-  Signer abrown@clackamas.us entered name at signing as Adam Brown
2024-03-07 - 4:56:04 AM GMT- IP address: 75.164.56.235
-  Document e-signed by Adam Brown (abrown@clackamas.us)
Signature Date: 2024-03-07 - 4:56:06 AM GMT - Time Source: server- IP address: 75.164.56.235
-  Agreement completed.
2024-03-07 - 4:56:06 AM GMT

October 25, 2024

Clackamas Women's Services (CWS)
Attn: Melissa Erlbaum, Executive Director
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Commitment to leverage SHS funds to support CWS-RRH-DV Bonus-FY24 Project

Dear Ms. Erlbaum:

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) RRH-DV Bonus Project for the 2024 NOFO. This DV Bonus Project serves survivors of domestic violence with additional specialized support for victims of human trafficking. This project will add 14 new units of RRH to the continuum of support in Clackamas County.

Clackamas County commits to leveraging funds to support 25% of participants in this DV Bonus Project, which will support DV survivors during the project's one-year grant term. The number of participants for whom we are committed to leveraging SHS funds is based on 25% of the total units.

The project's Grant Term is anticipated to be 10/1/2025 through 9/30/2026. The total dollar amount of this commitment shall not exceed \$73,287. 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 Project is not selected by HUD for funding. This funding commitment is also conditional upon the approval of any necessary amendment(s) to current contracts between H3S and CWS by the Clackamas County Board of County Commissioners.

Respectfully,

Vahid Brown

Vahid Brown
Deputy Director, Housing and Community Development

October 25, 2024

Clackamas Women's Services (CWS)
Attn: Melissa Erlbaum, Executive Director
256 Warner Milne Rd.
Oregon City, OR 97045

RE: Commitment to leverage SHS funds to support CWS-RRH-Expansion-FY24 Project

Dear Ms. Erlbaum:

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) RRH-Expansion Project for the 2024 NOFO. This DV Bonus Project serves survivors of domestic violence. This project will add five new units of RRH to the continuum of support in Clackamas County.

CWS intends to provide supportive services by matching and leveraging funding for this project, while the budget will support rental assistance. Clackamas County commits to leveraging funds to support 25% of this project, which will support DV survivors during the project's one-year grant term.

The project's Grant Term is anticipated to be 10/1/2025 through 9/30/2026. The total dollar amount of this commitment shall not exceed \$31,533. 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 Project is not selected by HUD for funding. This funding commitment is also conditional upon the approval of any necessary amendment(s) to current contracts between H3S and CWS by the Clackamas County Board of County Commissioners.

Respectfully,

Vahid Brown

Vahid Brown
Deputy Director, Housing and Community Development



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

October 28, 2024

Raina Smith-Roller, Continuum of Care (CoC) Lead
Housing and Community Development
Clackamas County Health, Housing & Human Services
2051 Kaen Rd Suite 239 | Oregon City, OR 97045
971-352-2684 | rsmithroller@clackamas.us

U.S. Department of Housing and Urban Development
451 7th Street S.W.,
Washington, DC 20410

RE: Healthcare Leverage for Clackamas Women's Services RRH Expansion Project FY24

To Whom It May Concern:

Clackamas Women's Services (CWS) operates the CWS Counseling Program, which provides behavioral and mental health services through licensed counseling. This service is provided through insurance reimbursement and non-federal grants and will be leveraged to support the CWS RRH Expansion Project FY24 application. This project includes the creation of 5 new units of RRH for survivors of domestic violence.

As requested, the CWS Counseling Program will provide individual or group therapy sessions for adults and children housed in this project. The value of this mental and behavioral health leverage is \$31,533.

We are happy to answer questions or provide additional information at your request.

Sincerely,

A handwritten signature in black ink, appearing to read "Melissa Erlbaum".

Melissa Erlbaum
Executive Director
503-341-7115
melissae@cwsor.org



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

October 28, 2024

Raina Smith-Roller, Continuum of Care (CoC) Lead
Housing and Community Development
Clackamas County Health, Housing & Human Services
2051 Kaen Rd Suite 239 | Oregon City, OR 97045
971-352-2684 | rsmithroller@clackamas.us

U.S. Department of Housing and Urban Development
451 7th Street S.W.,
Washington, DC 20410

RE: Healthcare Leverage for Clackamas Women's Services RRH DV Bonus Project FY24

To Whom It May Concern:

Clackamas Women's Services (CWS) operates the CWS Counseling Program, which provides behavioral and mental health services through licensed counseling. This service is provided through insurance reimbursement and non-federal grants and will be leveraged to support the CWS RRH DV Bonus Project FY24 application. This project includes the creation of 14 new units of RRH for survivors of domestic violence.

As requested, the CWS Counseling Program will provide individual or group therapy sessions for adults and children in this project. This mental and behavioral health services leverage is worth \$74,000.

We are happy to answer questions or provide additional information at your request.

Sincerely,

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

Melissa Erlbaum
Executive Director
503-341-7115
melissae@cwsor.org