

Before Starting the Special CoC Application

You must submit both of the following parts in order for us to consider your Special NOFO Consolidated Application complete:

1. the CoC Application, and
2. the CoC Priority Listing.

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

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

1. The Special Notice of Funding Opportunity (Special NOFO) for specific application and program requirements.
2. The Special NOFO Continuum of Care (CoC) Application Detailed Instructions for Collaborative Applicants 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.

CoC Approval is Required before You Submit Your CoC's Special NOFO CoC Consolidated Application

- 24 CFR 578.9 requires you to compile and submit the Special NOFO CoC Consolidated Application 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 the [Specific Attachment Name] attachment to the 4A. 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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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1A-1. CoC Name and Number: FL-600 - Miami-Dade County CoC

1A-2. Collaborative Applicant Name: Miami-Dade County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Miami-Dade County

1A-5.	New Projects	
	Complete the chart below by indicating which funding opportunity(ies) your CoC applying for projects under. A CoC may apply for funding under both set asides; however, projects funded through the rural set aside may only be used in rural areas, as defined in the Special NOFO.	
1.	Unsheltered Homelessness Set Aside	Yes
2.	Rural Homelessness Set Aside	No

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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1B-1.	Web Posting of Your CoC Local Competition Deadline–Advance Public Notice. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Local Competition Deadline attachment to the 4A. Attachments Screen.	
	Enter the date your CoC published the deadline for project application submission for your CoC's local competition.	07/29/2022

1B-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. (All Applicants)	
	Special NOFO Section VII.B.1.a.	
	You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected new project applications during your CoC's 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

1B-3.	Projects Rejected/Reduced–Notification Outside of e-snaps. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4A. Attachments Screen.	
1.	Did your CoC reject or reduce any project application(s)?	No
2.	Did your CoC inform the applicants why their projects were rejected or reduced?	No
3.	If you selected yes, for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	

1B-3a.	Projects Accepted–Notification Outside of e-snaps. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Accepted attachment to the 4A. Attachments Screen.	
	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	09/16/2022
1B-4.	Web Posting of the CoC-Approved Special NOFO CoC Consolidated Application. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Web Posting–Special NOFO CoC Consolidated Application attachment to the 4A. Attachments Screen.	
	Enter the date your CoC posted its Special NOFO CoC Consolidated Application on the CoC’s website or affiliate’s website–which included: 1. the CoC Application, and 2. Priority Listings.	10/09/2022

2A. System Performance

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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2A-1.	Reduction in the Number of First Time Homeless—Risk Factors.	
	Special NOFO Section VII.B.2.b.	
	Describe in the field below:	
	1. how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;	
	2. how your CoC addresses 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 or to end homelessness for individuals and families.	

(limit 2,500 characters)

1. Our CoC used focus groups w/people with lived experiences, providers, landlords, healthcare providers, financial literacy groups & advocates to better understand risk for first time homelessness. CoC reviewed cases entering CoC for the first time to determine risk factors & found persons w/extremely low income, prior imprisonment, eviction history, chronic health or behavioral conditions, youth & seniors were at greatest risk of homelessness. 2. We worked w/CSH to review HP standards & implement changes to ensure persons assisted were the most likely to enter CoC w/out supports. We allowed persons assisted w/HP to apply to Move-Up to EHV when their income is insufficient to sustain market rent. Our CoC funded diversion to mediate crises & implemented pre-CTI to promote housing stability. CoC has an open HMIS system allowing multiple access points to view historical client data. CoC, SSVF, EFSP, ESG, ESG-CV, State Housing Initiatives Partnership (SHIP), CDBG, TANF & Miami-Dade & Our Florida Emergency Rental Assistance Program (ERAP) all fund HP assisting at-risk homeless w/rent in arrears or relocation. We have a dedicated HP Helpline; 12 county-wide walk-in centers; targeted in-reach at schools; youth & DV focused access points. Legal Services contracted for front line supports, inc. Fair Housing, legal representation & advocacy and provided CoC-wide training in June 2022. From December 2020-August 2022, CoC mailed 28,000+ households w/a court filed eviction a postcard w/actions steps to prevent homelessness, brochures were provided to sheriff's office as leave-behind when serving writs, we published helpline info in court eviction docs, used public service announcements targeting tenants and landlords, and county passed provisions to prevent eviction or rent increase more than 5% w/o 60 days notice. Axishelps.org website w/all HP housing & utility resources created w/Miami Housing Alliance. Housing Ombudsman created to coordinate ERAP/ESG & troubleshoot. HP Helpline staffing increased to triage calls & creation of stopevictionnow.org application/screening tool. 3. The Homeless Trust oversees CoC's strategy to reduce # of persons experiencing homelessness for the 1st time.

2A-2.	Length of Time Homeless–Strategy to Reduce. (All Applicants)	
	Special NOFO Section VII.B.2.c.	
	Describe in the field below:	
1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,500 characters)

1. The CoC Performance Evaluation Committee (PEC) used HMIS data to look @ provider level trends with Sys PMs, held listening sessions w/people w/lived experiences & stakeholders, & narrowed proposed strategies down to 4 measurable objectives for the CoC to implement (1) enhance services provided by CES to focus on unsheltered persons; (2) develop centralized housing navigation approach; (3) CES reforms to enhance diversion & HP using CTI to reduce first time homelessness; & (4) review prioritization strategy w/people w/lived experiences. PEC places providers w/LOT above the median, who also have below average exits to PH or above average returns on performance improvement. Our strategy is to leverage all available resources to sustain & increase PH & OPH including ESG, HOME, SHIP, Multifamily Homeless Preference, Tax Credit referrals, HCV, PBV, EHV, Mainstream Vouchers for non-elderly disabled, FUP, FYI & VASH; advocate for the state to increase Sadowski Affordable Housing, ESG, TANF & Challenge Grant funds which provide additional PH to our CoC; invest local F&B Tax dollars to create new PH or provide support services to PHA set-asides; employ a Director of Landlord Recruitment & Retention to work w/developers/property managers/investors/ providers to facilitate the identification of new housing; commit local funds, & together w/ARP HOME funding & newly created Miami Foundation Ending Homelessness Fund, acquire & operate new CoC PH/PSH; advocate for inclusion of exempt communities like Miami Beach in local F&B through local ballot initiative and state legislative amendment. We are using HMIS to collect required documents for PH. We provide comprehensive supports to ensure unsheltered persons who refuse ES can access PH. We continue to oppose efforts to use local dollars to fund services that are not housing focused. We have strategically reallocated CoC funded TH/SH to create more PH. 2. One of the 6 rating factors used to rank persons on the CoC by-name list for referral to PH is Length of Time (LOT) homeless. Weekly case staffing's which include providers & area PHA's are used to ensure low barrier, expedited access is being utilized by our subs & partners providing PH. The LOT measure is used by CoC in competitive solicitations to score projects seeking federal/state/local funding. 3. The Homeless Trust, the CoC CA, is responsible for overseeing CoC's strategy to reduce LOT.

2A-3.	Successful Permanent Housing Placement or Retention. (All Applicants)	
Special NOFO Section VII.B.2.d.		
Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:		
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and	
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.	

(limit 2,500 characters)

1. Four new, locally funded housing projects dedicated to persons experiencing homelessness are in development pipeline to expedite ES/SH/TH & unsheltered exits to PH adding minimum 550 units. Miami-Dade, Miami, Miami Beach, North Miami Beach, North Miami & others are part of this dedicated PH/PSH effort. Additional 158 new units in the pipeline through state tax credit & other set-aside referrals agreements to facilitate exits. Seeking to further increase housing inventory through NOFO, Spec NOFO, PHA/Tax Credit/Multifamily Homeless Preference partnerships; reallocate underperforming projects; enhance housing navigation & increase job development pathways. ES/SH/TH use centralized CES & referral to PH process, reviewed regularly w/stakeholders & people w/lived experience to ensure equity, analyze national trends & prioritize persons w/greatest need. We conduct weekly by name list meetings w/stakeholders to review cases whose PH referral was made more than 30 days prior. For RRH, we developed a report that tells us which households are most likely to return to homelessness (household income <120% of rent) & use PHA/ELI/OPH partnerships to ensure households are connected to long-term subsidies or extremely low income units. 2. For PSH, Move-On Strategy for households who no longer require extensive support. We laterally transfer households between PSH programs when needs are not being met by a particular project. We provide training & passed standards for all components on low barrier access along w/requiring new NOFO respondents to provide minimum support services per participant per year (\$4,000 in RRH; \$5,000 in PSH). Solicitations issued since 2018 require providers from all components to incorporate Housing First & navigation. We train all components to use SOAR & incorporate supportive employment through MOU w/CareerSource. Competitive solicitations look at rate of exits to PH (ES/SH/TH/RRH) & retention (PSH) & we select providers w/the best performance for all components. The CoC adopted new TBRA policies that outline a process workflow from referral to placement to set targets for improvement & promote housing retention. Providers have started to tie employee evaluations to SyS PM. We use local dollars to fund position which trains/supports housing navigators systemwide, created online housing directory & manage landlord mitigation fund. We provide training on & have adopted restorative justice grievance standards to promote housing retention & fair housing standards.

2A-4.	Returns to Homelessness–CoC’s Strategy to Reduce Rate. (All Applicants) Special NOFO Section VII.B.2.e.	
Describe in the field below:		
1.	how your CoC identifies individuals and families who return to homelessness;	
2.	your CoC’s strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1. The CoC uses the HMIS report designed for the submission of SyS PM to obtain a detail of persons who return to homelessness which includes stage of return (6, 12 or 24 months) and provider level data contributing to returns. We also use StellaP for a system perspective of what type of households, race and other demographics are related to those who are returning more frequently. 2. We have established a Performance Evaluation Committee to look at system and provider level performance. The PEC places providers who are above the mean for returns on performance improvement. This year the PEC also held listening sessions with people with lived experiences and stakeholders and developed a strategy to improve areas of weakness in performance. They tasked the CoC with enhancing services provided by CES to focus on vulnerable, unsheltered persons, developing centralized housing navigation approach and reviewing prioritization strategy with lived experience working group. We have implemented new rental asst standards incorporating low barrier practices & Housing 1st to promote housing retention. Our competitive solicitations look at rate of returns to select providers with the best performance and reallocate or place poor performing providers on performance improvement. New monitoring procedures use performance as part of the risk assessment. Grievance standards provide tenants with restorative justice hearings to mediate and promote fewer returns. Our CoC has transferred tenants to other agencies providing other PH/PSH when appropriate to avoid returns. We have established standards for support service costs to ensure new projects offer minimum support services to avoid returns. Providers have started to tie employee evaluations to project level SyS PM. Our RentConnect program has provided tenants who report living in unsafe housing with more housing options promoting housing retention. 3. The Homeless Trust, the CoC CA, is responsible for overseeing CoC's strategy to reduce returns.

2A-5.	Increasing Employment Cash Income–Strategy. (All Applicants)	
Special NOFO Section VII.B.2.f.		
Describe in the field below:		
1.	the strategy your CoC has implemented to increase employment cash sources;	
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.	

(limit 2,500 characters)

1. CoC's strategy to increase employment income inc. MOU's with Workforce Investment Board CareerSource, Miami Job Corps Center & Miami Community Ventures (MCV) through the Beacon Council (official Economic Development org. of Miami-Dade). CareerSource makes available one-stop employment centers located at or near ES facilities; sends mobile employment units to ES facilities & champions supportive employment opportunities, inc. Tech Hire for CoC youth. MCV provides living wage jobs to CoC clients & CoC engages in "Benefit Cliffs" discussion where families receiving public benefits are educated on how to pursue employment opportunities without fear of losing financial aid. CoC promoted new ARPA investments in workforce development, inc. an enhanced Miami employment/training/apprenticeship program that hires formerly homeless into projects that receive city funding. The CoC secured \$250,000 state grant to transform warehouse into Social Enterprise Academy (SEA), offering short-term, high quality training and living wage in high demand industries w/low worker, inc. construction, healthcare and IT. CoC developed Mainstream Benefits policy w/checklist on available cash income & benefits. 2. All ES/TH providers create employment, training & volunteer opportunities, as well as partner w/employers to create job opportunities for participants. CoC's private sector partner expanded supportive employment staff & established employment committee of their board. Designated by CoC to operate SEA. Camillus, large ES/TH/PH provider has started Camillus YOUniversity, a training curriculum to help clients increase income & housing stability w/certifications in culinary arts & construction trades. Lotus House, ES/TH provider for women & youth, developed readiness training programs in retail, culinary, hospitality & hydroponic urban farming, etc. for greater financial self-sufficiency. Two providers w/thrift stores employ persons w/lived experience to operate. CoC owns land where PSH program & farm were built. It employs formerly homeless at farm & farmer's market. Employment & Income growth measures are used by CoC in competitive solicitations to score projects seeking federal, state & local funding & reallocate or place low performing providers on performance improvement. 3. The Homeless Trust, the CoC CA is responsible for overseeing the CoC's strategy to increase cash income growth.

2A-5a.	Increasing Non-employment Cash Income—Strategy. (All Applicants)	
	Special NOFO Section VII.B.2.f.	
	Describe in the field below:	
	1. the strategy your CoC has implemented to increase non-employment cash income;	
	2. your CoC's strategy to increase access to non-employment cash sources; and	
	3. 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. Implemented CoC strategy to increase non-employment benefits includes training on, and the use of SOAR expedited disability applications; and provider training and access to Dept. of Children & Families Automated Community Connection to Economic Self Sufficiency (ACCESS). CoC providers are also ACCESS community partners allowing CoC clients to access stimulus resources (most recently COVID payments), food assistance, temp. cash assistance, Medicaid, SNAP and refugee services through the CoC program directly, CoC developed Mainstream Benefits policy w/checklist on available non-cash income & benefits for individuals and families, including medical coverage and education benefits. 2. The CoC has established funding standards in new PH in order to embed Critical Time Intervention, supportive employment and SOAR trained case management. We continue to provide our subcontractors with year-round access to SOAR training to facilitate expedited disability benefit applications. SOAR training is also made available online to allow for greater participation by contracted providers and their employees. PH Standards incorporate the use of SOAR to expedite disability applications for participants of the CoC program. Providers enter SOAR application data into the Online Application Tracking (OAT) system which has demonstrated a significant reduction in the time it takes to approve public benefits. All CoC providers are trained on and serve as DCF ACCESS points to apply for Cash Assistance, TANF and SNAP electronically. The CoC also advanced a partnership with the Alliance for Aging to prioritize aging clients for long-term care and Assisted Living Placement when needed. The CoC and VA continue to work cooperatively to sustain an Effective End to Veteran Homelessness (July 2018), including identify veterans for eligible VA medical benefits. The CoC also partners with all 4 area PHA's to leverage in excess of 2,900 HCV, PBV, EHV, Public Housing, FYI, FUP, VASH, Mainstream and OPH vouchers/resources. 3. The Homeless Trust, the CoC CA is responsible for overseeing the CoC's strategy to increase non-employment cash income growth.

2B. Coordination and Engagement–Inclusive Structure and Participation

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2B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry. (All Applicants)	
	Special NOFO Sections VII.B.3.a.(1)	

In the chart below for the period from May 1, 2021 to April 30, 2022:

1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:

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

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

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

2B-2.	Open Invitation for New Members. (All Applicants)	
	Special NOFO Section VII.B.3.a.(2), V.B.3.g.	

	Describe in the field below how your CoC:
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, other People of Color, persons with disabilities).

(limit 2,500 characters)

1. The CoC Governance Charter, posted online, outlines the appointing bodies for Board membership. Annually, vacancies are communicated to the appointing bodies via memo & by phone to solicit new members. The CoC also makes recommendations to appointing bodies. They include Homeless Providers' Forum; Miami Homes for All; Homeless/Formerly Homeless Forum (HFHF); Lived Experience Working Group; School Superintendent; Dept. of Children and Families; County Commission-Housing Chair; Miami City Manager; Miami Chamber, Religious Leaders Coalitions, 11th Judicial Circuit, health care & academic service sectors. 2. Meetings are noticed on www.miamidade.gov which provides equal access. The County has adopted the World Wide Web Consortium's Web Content Accessibility Guidelines 2.1, Level AA (WCAG 2.1, AA) as its standard & has implemented processes that aim to improve the accessibility & usability of digital services. Materials are posted to our website in PDF format & documents are checked to ensure they are easily accessible to those w/disabilities. Board meetings can be watch on closed caption TV & Reasonable Opportunity to be Heard is held at the top of all publicly noticed meetings. Translation is provided when appropriate & aides are used for persons who are deaf/hard of hearing. Meeting materials are pushed out electronically and available in hard copy in advance of discussions. 3. The CoC designates Board seats to Homeless Formerly Homeless Forum & together w/the Providers' Forum, Youth Action Board & Homeless Coalition, ensure persons w/lived experience sit on CoC Board & committees. 4. CoC conducts outreach year-round; presents to a wide array of groups that intersect with underserved persons; & asks groups w/recommendations to present to CoC. The CoC sits on other boards & participates in initiatives which serve populations that intersect w/the CoC. The CoC conducts an annual review to ensure participation from people of color, disabled persons, LGTBQ, DV, disability advocates/organizations, PHA's, Entitlement Jurisdictions, discharging institutions & others.

2B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. (All Applicants)	
	Special NOFO Section VII.B.3.a.(3)	

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

(limit 2,500 characters)

1. CoC staff attend meetings, make presentations & solicit online/in-person feedback from stakeholders. Publicly noticed meetings begin with public comment period. Groups that intersect with homelessness are often invited to present to the CoC and provide recommendations. Policies are posted online for public comment & discussed with people with lived experiences and other stakeholders ahead of adoption. Client satisfaction surveys are collected year-round & surveys are reviewed quarterly. Listening sessions are held with sheltered and unsheltered persons & landlords. On Homeless Awareness Day, we present at public schools & double efforts to place Helpline cards in local businesses & public places. The CoC sits on boards that intersect with homelessness. For the past 5 years, CoC has embraced national TA activities/initiatives. 2. Meetings are noticed on online County calendar & CoC website, advertised via mass email, accessible via Zoom & televised. Board meetings begin with public comment & end with Executive Director’s report that includes info on upcoming solicitations, events, etc. CoC funding priorities & solicitations are advertised in English, Spanish & Creole in local newspapers, mass email, social media & website. Stakeholder trainings are held with TA providers. The CoC has developed printed materials, videos & interactive surveys to share at public forums & on social media to educate/spur dialogue. Media (radio, tv, print) is widely leveraged. Homeless & at-risk cards/postcards/brochures are disseminated widely. 3. People with lived experiences suggested they needed greater access to shelter when engaged by SO team. In June we solicited for additional ES beds and revisited the SO workflow to ensure more beds to teams working with the most vulnerable unsheltered persons. The Greater Miami Housing Alliance recommended we retain an emergency rental assistance problem solver & co-location of communitywide rental assistance resources. As a result, the county hired a housing ombudsman position & together with stakeholders developed the www.axishelps.org website which co-locates all countywide housing and utility resources.

2B-4.	Public Notification for Proposals from Organizations Not Previously Funded. (All Applicants)	
	Special NOFO Section VII.B.3.a.(4)	

Describe in the field below how your CoC notified the public:	
1.	that your CoC’s local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,500 characters)

1. The collaborative application for the NOFO is advertised in 3 languages in 3 major publications starting on 7/15/22, announced at our board meeting and posted on our website on 7/29/22 ahead of the pre-application workshop, posted on social media and sent via several mass emails starting on 6/24/22. 2. The solicitation ads welcome new organizations to apply and we engage new providers year-round by providing trainings and making presentations, as well as calling prospective applicants ahead of the NOFO. 3. The solicitation included detailed instructions, threshold requirements and forms; instructions on how to submit responses electronically via email outside of eSnaps, scoring guidelines and score sheets, ranking and communication of awards and rejected projects. Agencies not participating in HMIS are allowed to demonstrate past performance using equivalent databases. The CoC conducted a pre-application workshop via Zoom to explain the local RFA and respond to questions on 8/2/22. We posted written responses to questions on our website and emailed them to respondents on 8/23/22. Proposals were submitted in writing according to instructions outlined in the RFA. 4. Staff rated renewal applications using HUD's rating/ranking & Housing First tools which rely on SyS PM, expenditure rate, costs and adherence to Housing 1st. Staff reviewed new applications for completeness and provided a cure period to applicants missing threshold requirements. The Mayor's appointed selection committee of subject matter experts rated new project applications on 9/16/22. The CoC announced who would be included in the special NOFO on 9/16/22 via mass email, targeted emails to respondents and on our website. The Board voted on recommendations on 9/23/22. 5. Solicitation materials are posted to our website in PDF format and documents are checked to ensure that they are easily accessible to readers with disabilities in accordance with the World Wide Web Consortium's Web Content Accessibility Guidelines 2.1, Level AA.

2C. Coordination / Engagement—with Federal, State, Local, Private, and Other Organizations

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

2C-1.	Coordination with Federal, State, Local, Private, and Other Organizations. (All Applicants)	
	Special NOFO Section VII.B.3.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 Planning or Operations of Projects
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.	FL DOH, CDC, FL Div. of Emergency Mgt, DMV, WIOA Board, Public Health System, SAMH Managing Entity	Yes

2C-2.	CoC Consultation with ESG Program Recipients. (All Applicants)	
	Special NOFO Section VII.B.3.b.	

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

(limit 2,500 characters)

1. The CoC & subrecipient of state ESG & ESG-CV funding, collaborated with all local ESG recipients (Miami-Dade, Miami & Hialeah) and the state for the allocation of ESG-CV funds, determining which ESG eligible activities to include & prioritize, coordinating to update consolidated plans, amending local standards of care, collaboratively reviewing allowable waivers & coordinating to upload CAPER reports for all jurisdictions. The CoC led the selection committees that determined recipients for Miami-Dade and State of Florida ESG funds. We also recommended new subrecipients to Hialeah and the City of Miami to help them utilize all CV funding. 2. We performed joint compliance monitoring w/other entitlement jurisdictions on ESG sub-recipients, used HMIS & reimbursement data to evaluate performance of ESG, reviewed spending & allocated or reallocated & recaptured from subrecipients as necessary to hit spending targets or map spending plans, ensured adherence to changes to the CES & Orders of Priority to PH & amended the Governance Charter. 3. All ESG programs participate in HMIS & therefore contribute to the HDX (PIT, HIC, SyS PM, Stella P). Our data, including subpopulation details & system gaps are shared with all ESG entitlement jurisdictions in the CoC geography. 4. Throughout the year, we work with ESG entitlement jurisdictions to complete relevant sections of the con plan such as data on homelessness, how to access homeless services, coordination between CoC and entitlement jurisdiction & homeless system performance. In fact, the Miami-Dade Con Plan states "The Miami-Dade Homeless Trust, who administers the Continuum of Care played a key role in the consultation process." The information we have provided has led to plan amendments, such as all 4 PHAs adopting a homeless & move-up preference & leveraging of State Housing Initiative Partnership Program (SHIP) funds for rental assistance. Each jurisdiction has appointments on either the CoC Board or a subcommittee. CoC staff attends the jurisdictional commission meetings in support of items benefiting the homeless. The CoC administers state ESG and ESG-CV funding directly.

2C-3.	Discharge Planning Coordination. (All Applicants)	
	Special NOFO Section VII.B.3.c.	

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

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

2C-4.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts. (All Applicants)
	Special NOFO Section VII.B.3.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)	No
3.	Local Education Agency (LEA)	No
4.	School Districts	Yes

2C-4a.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts–Formal Partnerships. (All Applicants)
	Special NOFO Section VII.B.3.d.

Describe in the field below:

1.	how your CoC collaborates with the entities checked in Question 2C-4; and
2.	the formal partnerships your CoC has with the entities checked in Question 2C-4.

(limit 2,500 characters)

1. CoC has MOU with Miami-Dade Public Schools outlining roles and responsibilities, housing and service options, joint prevention and diversion strategies, student privacy standards, and collaborative efforts on K-12 homeless awareness curriculum, homeless awareness and sensitivity poster and essay contest, and Homeless Awareness Day activities. CoC contracts with MDCPS to transport students to annual youth rally. CoC owns ES, which through an MOU with MDCPS and operator, is sited on school board property via a long-term lease and has on site Head Start programs and tutoring programs provided through school system. CoC implemented procedures/monitoring practices with District Homeless Liaisons (DHL's) to ensure children are enrolled in school and informed of eligibility for homeless/educational services. DHL's work with ES and PH case managers, refer families to HP and participate in youth by-name list meetings. DHL engaged in CoC CES revision process and helped develop CoC youth housing and services directory. DHL provides annual staff training, technical assistance and outreach to CoC providers.

2. Per ordinance, Miami-Dade School Superintendent sits on CoC Board. School District Homeless Liaison sits on Housing Our Miami-Dade Youth Collective (HOMY) to prevent and end youth homelessness. CoC has MOU with youth education provider Educate Tomorrow (ET), a designated CoC access point, which has established higher education pipeline for unaccompanied youth with school system, local universities & other education partners, which was noted by USICH. CoC has a referral MOU with Miami Job Corps Center, a no-cost education and career technical training program administered by the U.S. Department of Labor providing youth education/technical training for young people 16-24. CoC has MOU with Early Learning Coalition, which prioritizes children 0-9 for school readiness and childcare, with CoC designated ES providers making referrals. CoC sister agency and provider, CAHSD, prioritizes homeless children 0-5 for Head Start/Early Head Start. MOU between CoC, Florida International University (FIU) and public libraries has student social workers engaging persons experiencing homelessness and providing CES access. As part of COVID-19 response, CoC and FIU MOU provided for remote wellness checks at non-congregate shelter.

2C-4b.	CoC Collaboration Related to Children and Youth—Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services. (All Applicants)	
	Special NOFO Section VII.B.3.d.	

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

(limit 2,500 characters)

The CoC CES Standards of Care and MOU with Miami-Dade County Public Schools discuss our policies and procedures for informing families experiencing homelessness about their eligibility for educational services. Per standards, providers serving households with children must have a liaison working with families and are required to ensure services for minors are established, including childcare, school enrollment and/or transportation to school of origin, early childhood programs, afterschool programs, health care, special need assistance and services, and school-based services. Adult household members may also have access to parenting education, health care, and family services on a voluntary basis. An established referral relationship exists with Miami-Dade County Public Schools (MDCPS) to access Project Up-Start resources such as school supplies, transportation, school enrollment, uniforms, free lunch, post-secondary transition support, etc. The policy also establishes a referral relationship with Citrus Family Care Network, the managing entity for the state public child welfare agency, to access medical and behavioral health services for the children of households experiencing homelessness. MDCPS District Homeless Liaison (DHL) hosts a training session each year for all homeless providers to ensure staff are making families aware of services provided by Project Up-Start. During the session, homeless providers are given materials to post in their offices and hand out to families explaining the eligibility for education services and student’s rights. Throughout the year, DHL and staff visit shelters and provide ongoing technical assistance with homeless providers. The CoC has further developed a mainstream benefits policy with a checklist which addresses a full range of educational services and other service and benefit connections, including technical schools, youth tuition and fee exemptions, etc. Case managers document in file that educational obligations have been met. CoC sister agency & provider CAHSD prioritizes homeless children 0-5 for Head Start/Early Head Start, and per policy, delegate agencies seek written documentation of ES stay, application declaration, or family/staff interview notes to establish homelessness. The CoC has established a referral relationship with the Early Learning Coalition to access day care and educational resources for pre-school aged children.

2C-5.	Mainstream Resources–CoC Training of Project Staff. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

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

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

You must select a response for elements 1 through 6 in question 2C-5.

2C-5a.	Mainstream Resources—CoC Collaboration with Project Staff Regarding Healthcare Organizations. (All Applicants)	
Special NOFO Section VII.B.3.e.		
Describe in the field below how your CoC:		
1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;	
2.	works with project staff to collaborate with healthcare organizations to assist program participants with enrolling in health insurance;	
3.	provides assistance to project staff with the effective use of Medicaid and other benefits; and	
4.	works with projects to promote SOAR certification of program staff.	

(limit 2,500 characters)

1. CoC provides info on mainstream benefits via on-site, co-located benefit access points; trains case mgrs. on best practices & resources re: SSA, SOAR, TANF, SNAPs, Medicaid; pushes, prints & posts materials, inc. on social media & website. Weekly meetings w/CoC partners offer opportunity for updates. 2. Most PH providers are FQHCs, CMHCs or licensed substance abuse (SA) agencies that assist clients w/insurance. Providers that do not bill insurance have MOUs w/FQHC or Substance Abuse (SA) provider to assist w/enrollment. All ES providers have MOUs w/public hospital or FQHC providing on-site medical offices so clients can access healthcare & enroll in insurance. 3 specialized outreach teams - 1 FQHC providing primary care & 2 agencies under contract w/Substance Abuse/Mental Health Managing Entity (ME) - provide assisted outpatient treatment for substance abuse & mental health to unsheltered persons & help them enroll in insurance. ME also funds CoC providers for HIV testing, treatment beds, detox. CoC sits on Managing Entity Board & HIV/AIDS Partnership, official planning body for HIV/AIDS. Specialized SO teams have licensed staff performing assessments, prescribing & dispensing treatment & enrolling unsheltered persons in Medicaid/Medicare on the streets when unsheltered persons cannot or refuse to go to one of their clinics. CoC provides HMO's HMIS access & includes in by-name list meetings. Automated Community Connection to Economic Self Sufficiency (ACCESS) sites, co-located at CoC provider sites, enable households to enroll in Medicaid, food stamps, medical care, TANF & refugee services year-round. Health Dept. provides infectious disease updates to CoC & provides vaccinations at SO/ES/TH sites (COVID, Hep A, Flu & Monkeypox). CoC developed Mainstream Policy w/checklist so case management staff proactively engage clients w/array of services, inc. healthcare. 3. The Coc arranges annual training thru Dept of Children and Families to Healthcare Navigators & Case mgrs on the use of ACCESS site for application to Medicaid, SNAPs, TANF & work incentives. The specialty HMO for persons w/Severe Mental Illness, Alliance for Aging & PCWA provide CoC resource training, annually, to CoC providers. 4. CoC provides year-round online SOAR training to case mgrs.

3A. New Projects With Rehabilitation/New Construction Costs

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3A-1.	Rehabilitation/New Construction Costs–New Projects. (Rural Set Aside Only). Special NOFO Section VII.A.	
If the answer to the question below is yes, you must upload the CoC Letter Supporting Capital Costs attachment to the 4A. Attachments Screen.		
Is your CoC requesting funding for any new project(s) under the Rural Set Aside for housing rehabilitation or new construction costs?		No

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3B-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	

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

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

(limit 2,500 characters)

Not applicable.

4A. Attachments Screen For All Application Questions

Please read 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 and reduces file size. 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. | Open attachments once uploaded to ensure they are the correct attachment for the required Document Type. |

Document Type	Required?	Document Description	Date Attached
1B-1. Local Competition Announcement	Yes	Local Competition...	08/01/2022
1B-2. Local Competition Scoring Tool	Yes	Local Competition...	08/01/2022
1B-3. Notification of Projects Rejected-Reduced	Yes	Notification of P...	10/11/2022
1B-3a. Notification of Projects Accepted	Yes	Notification of P...	09/16/2022
1B-4. Special NOFO CoC Consolidated Application	Yes	Special NOFO CoC ...	10/09/2022
3A-1. CoC Letter Supporting Capital Costs	No		
3B-2. Project List for Other Federal Statutes	No		
P-1. Leveraging Housing Commitment	No	Leveraging Housin...	10/08/2022
P-1a. PHA Commitment	No	PHA Commitment	09/20/2022
P-3. Healthcare Leveraging Commitment	No	Healthcare Levera...	09/29/2022
P-9c. Lived Experience Support Letter	No	Lived Experience ...	09/23/2022
Plan. CoC Plan	Yes	CoC Plan	10/08/2022

Attachment Details

Document Description: Local Competition Announcement

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Special NOFO CoC Consolidated Application

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Leveraging Housing Commitment

Attachment Details

Document Description: PHA Commitment

Attachment Details

Document Description: Healthcare Leveraging Commitment

Attachment Details

Document Description: Lived Experience Support Letter

Attachment Details

Document Description: CoC Plan

Submission Summary

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

Page	Last Updated
1A. CoC Identification	07/19/2022
1B. Project Review, Ranking and Selection	10/09/2022
2A. System Performance	10/04/2022
2B. Coordination and Engagement	10/03/2022
2C. Coordination and Engagement–Con't.	10/04/2022
3A. New Projects With Rehab/New Construction	No Input Required
3B. Homelessness by Other Federal Statutes	08/25/2022
4A. Attachments Screen	10/11/2022
Submission Summary	No Input Required

Youth Homelessness Demonstration Program

Supplemental Notice of Funding Opportunity to Address Unsheltered Homelessness

(Published **7/29/2022**)

Miami-Dade County, through the Miami-Dade County Homeless Trust (Homeless Trust), is requesting applications for new projects to address unsheltered homelessness. This RFA is seeking respondents to apply for new federal funding to provide housing, support services, and other eligible activities benefiting persons experiencing homelessness. A Collaborative Application will be submitted to USHUD in response to its Special Notice of Funding Opportunity (NOFO) for the Continuum of Care Program Competition. Funding being sought as part of this solicitation is contingent on the Homeless Trust being awarded funds.

We invite currently funded and new non-profit providers and government agencies to review this RFA and submit an application for a new project(s). THIS RFA IS SUBJECT TO THE CONE OF SILENCE, COUNTY ORDINANCE 98-106. In order to maintain a fair and impartial competitive process, the County can only answer questions at the Pre-Application Workshop, public meetings or questions emailed to the RFA contact person. Respondents must avoid private communications with the Trust staff and board members during the application preparation and evaluation process. Please contact the Homeless Trust if the Request for Application documents are required in an alternative format or language. Responses to this RFA are due no later than September 9, 2022 at 2:00 p.m. eastern standard time. Please refer to the RFA and application materials posted below for instructions on how to compile and submit responses to this solicitation.

- [HUD Special NOFO RFA Unsheltered Homelessness](#)
- [Attachment 1 Scoring and Ranking Process](#)
- [Attachment 2 RFA Checklist](#)
- [Attachment 4 Project Application](#)
- [Attachment 5 Detailed Budget \(New Project\)](#)
- [Attachment 7 Certificate of Consistency](#)
- [Attachment 8 Financial Information Worksheet](#)
- [Attachment 9 Miami-Dade County Affidavits](#)
- [Attachment 10 Previous Contractual Relationship](#)
- [Attachment 11 W9](#)
- [Attachment 12 Certification Page](#)

Sarria, Manuel (HT)

From: Sarria, Manuel (HT)
Sent: Thursday, July 28, 2022 2:11 PM
To: Spiegel, Martha (HT); 'Anna Kopper'; 'Cary YeeQuee'; 'Cristy Martinez'; ELago; 'Eleanor Lanser'; 'Ivette Vidal'; 'Ivon Mesa (CAHSD)'; 'J Chavarria - Carrfour'; 'Jacek Starownik'; 'Janay Guerrero'; 'Jessica Ehresman'; 'Jean Eveillard'; Jim Dyes; Jose Garcia; 'Katherine Martinez'; 'Kenneth King'; 'Lisa Cancel'; 'Latavea Johnson'; Maricel Gata; 'Marti Yeager'; 'Mary V'; 'Olga Golik'; 'Pauline Clarke-Trotman'; 'Sandra Garcia'; 'Sandra Newson'; 'Sergio Torres'; 'Shelley Anne Glasgow-Wilson'; 'Stephanie Feldman'; 'Stephen Alvarez'; 'Stephen M'; 'Thomas Jardon'; 'Timothy Taylor'; 'Tina Fadil'; Jessica Perdomo; 'Angela Miller'; 'Terrell Ellis'; Mallette, Victoria (HT)
Cc: Miluse Campian; mcnaught@educatetomorrow.org; Giovanni Sairras; Malena Legarre; margarita@hermanosdelacalle.org; Jonathan Castillo; Jean Eveillard; Robert Herrera; Thomas Guerra
Subject: RE: CoC Annual NOFO Meeting for Renewal Providers - via Zoom (on behalf of Manny Sarria)

Hi again,

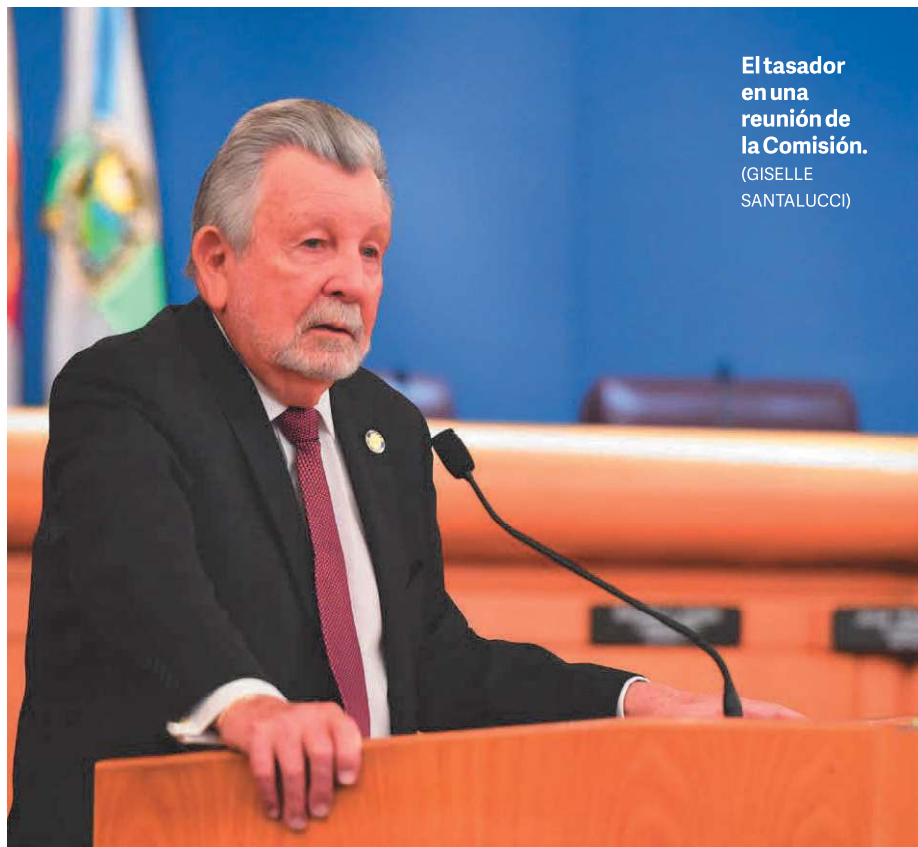
I just wanted to send a reminder about the **Virtual Pre-Application Workshops** being held next Tuesday, August 2, 2022, via zoom.

To join the Zoom Meeting for the Continuum of Care Supplemental Notice to Address Unsheltered Homelessness, enter <https://miamidade.zoom.us/j/89701638320?pwd=jSC-gkk0NwCaUNxj0EpFrOuJRSCtpT.1> on your web browser at 10 a.m. eastern standard time (EST), or dial +1 786 635 1003, Meeting ID: 897 0163 8320 and Passcode: 974111.

To join the Zoom Meeting for the Continuum of Care Program Competition, enter <https://miamidade.zoom.us/j/84048299331?pwd=BPzodrqxYNj7qcJ2n0J5Qt1Xc3jO01.1> on your web browser at 1 p.m. EST, or dial +1 786 635 1003, Meeting ID: 840 4829 9331 and Passcode: 326034.

¿Pagarían menos impuestos los dueños de viviendas en Miami-Dade?

El tasador de la propiedad, Pedro García, propuso al Condado y sus municipalidades bajar la tasa que se cobra anualmente a propietarios de inmuebles



El tasador en una reunión de la Comisión. (GISELLE SANTALUCCI)

◀ VIENE DE PÁG. 1A

Según el tasador Pedro García, en ciudades como Miami el gravamen tuvo un aumento adicional cercano a los 1.800 millones de dólares gracias a nuevas construcciones, por lo que considera pertinente recortar al menos el 3% que están pagando actualmente los beneficiarios del llamado Homestead Exception, un alivio que permite actualmente disminuir 50.000 dólares del 'valor del inmueble' si reside en la propiedad. García envió una carta a la alcaldesa de Miami-Dade, Daniella Levine Cava, a los comisionados condales y alcaldes municipales en la que sugiere bajar el amillaramiento, bajo la certeza de que podrán cubrir los servicios comunitarios y de paso ofrecer un alivio al bolsillo de los residentes en razón a la alta inflación y los precios elevados en los valores de la gasolina, entre otros factores.

—¿Qué es lo que usted está pidiendo al Condado y las municipalidades de Miami-Dade? Las ciudades y el Condado están recibiendo una cantidad mayor de ingresos por el valor a pagar impuesto, que la que tuvimos en el 2021, por tanto, creo que es un momento oportuno en este 2022 para que puedan bajar el amillaramiento y poderle ofrecer a todos los dueños de propiedades en

“**Estamos viendo que la propiedad se saca a la venta, hay una serie de personas tratando de comprarla, una persona ofrece una suma de dinero, aparece otra que da más, otra un poquito más y al final viene otra que ofrece pagar en efectivo**”

Miami-Dade una reducción de su impuesto.

—¿A qué se debe ese aumento en los ingresos que se derivan del impuesto a la propiedad?

Principalmente, tenemos alrededor de 5.800 millones de dólares que vinieron de nuevas construcciones. Ese es un dinero adicional para muchas ciudades y el Condado. Aparte de eso, los aumentos de valor en las propiedades en el condado han sido grandes. Tenemos muchos compradores nuevos que están viniendo de la zona del noreste, de Nueva York, Boston, New Jersey, New England, y también de California y Texas, que están comprando propiedades aquí. Después de la pandemia de coronavirus hubo un movimiento grande de personas que vieron que Miami-Dade es un lugar agradable para vivir. Los valores de las propiedades eran mucho más inferiores que los que podrían encontrar en los lugares donde vivían estas personas. Aquí podían trabajar

desde su propia casa con mejores precios para vivir.

—De acuerdo con su experiencia, ¿cuál sería un porcentaje apropiado para reducir el amillaramiento?

Esa es una decisión que tienen que tomar en el Condado y las ciudades, según sus presupuestos. Tienen que mirar los servicios que ofrecen, como policía, bomberos, transporte. Ahora están trabajando en esos presupuestos y, partiendo de esa base, van a establecer el amillaramiento. Con las entradas que van a tener será suficiente para que puedan cubrir todos esos servicios a la comunidad y que puedan, a su vez, presentar un amillaramiento más bajo y que podamos tratar de que los impuestos no sean superiores a los que se pagaron el año pasado.

—El comisionado condal Joe Martínez ha dicho, luego de leer su petición, que una reducción en el amillaramiento en el orden del 3% o 4% podría ser pertinente

El comisionado Martínez lo ha visto como algo positivo. Hicieron un estudio para ver cuáles son los diferentes amillaramientos que podían presentarse y eso es lo que están estudiando en la Comisión. La alcaldesa también presentará su propuesta de amillaramiento para definir el presupuesto del próximo año. Eso debe entrar en discusión. En cada munici-

pio debe ocurrir lo mismo para establecer su amillaramiento, como también lo debe hacer la Junta Escolar y todos los distritos de impuestos que existen en Miami-Dade.

—¿Un 3% o un 4% de reducción sería suficiente? Lo que es la Exención de Homestead de este año,

debido al costo de la vida, tiene un 3% de aumento, lo que quiere decir que todas esas familias que se benefician de ese alivio tendrán que pagar más. Yo quisiera que por lo menos ese aumento desapareciera y se quedaran pagando exactamente lo mismo que pagaron el año

pasado y así buscar un beneficio para todos los dueños de propiedades en el condado.

—¿Cuáles son los municipios que han tenido mayores ingresos por impuesto a la propiedad?

De las 35 ciudades que tenemos en Miami-Dade, 29 tuvieron un dígito mayor del 10% de aumento del 2021 al 2022. Eso es algo que no se había visto en largo rato. En el 2007 hubo

MIAMI-DADE
COUNTY

AVISO PÚBLICO

PETICIÓN DE SOLICITUDES (RFA) DEL FIDEICOMISO DE LOS DESAMPARADOS DEL CONDADO DE MIAMI-DADE PARA SU INCLUSIÓN EN EL PROCESO COMPETITIVO DEL PROGRAMA DE ATENCIÓN INTEGRAL DEL AÑO FISCAL 2022 Y EN EL SUPLEMENTO DE ATENCIÓN INTEGRAL PARA ABORDAR LAS SITUACIONES DE DESAMPARO ABSOLUTO

El Condado de Miami-Dade, por conducto de su Fideicomiso de los Desamparados, convoca a la presentación de solicitudes en referencia a dos oportunidades de financiación que están disponibles a través del Departamento de Vivienda y Desarrollo Urbano (HUD, sigla en inglés) de los Estados Unidos. En el proceso competitivo anual del Programa de Atención Integral (CoC, sigla en inglés) se buscan solicitudes de proyectos nuevos, de renovación y de reasignación con el fin de proporcionar alojamiento, servicios de apoyo y otras actividades pertinentes que beneficien a las personas en situación de desamparo. La segunda oportunidad de financiación es el Aviso de Oportunidad de Financiación Suplementaria del Programa de Atención Integral, concebido para promover los esfuerzos dirigidos a reducir las situaciones de desamparo absoluto, mediante alojamiento, servicios de apoyo y otras actividades elegibles que beneficien a las personas que se encuentren en esas situaciones.

En respuesta a estos Avisos de Oportunidad de Financiación (NOFO, sigla en inglés) se presentará al HUD una Solicitud de Colaboración para el año fiscal 2022. La financiación que se busca en el marco de estas peticiones depende de que el HUD asigne fondos al Fideicomiso de los Desamparados. La documentación relacionada con la petición de solicitudes se puede consultar en el sitio web del Fideicomiso de los Desamparados

(<https://www.homelesstrust.org/homeless-trust/providers/home.page>), en las pestañas correspondientes al Proceso Competitivo del Programa de Atención Integral del HUD (U.S. HUD Program Competition) y al Aviso Suplementario para abordar las situaciones de desamparo absoluto (Supplemental Notice of Funding Opportunity to Address Unsheltered Homelessness).

Los talleres virtuales previos a la solicitud se celebrarán el **martes 2 de agosto del 2022**, a través de Zoom. Si desea participar en la reunión de Zoom sobre el **Aviso Suplementario para abordar las situaciones de desamparo absoluto**, introduzca el enlace

<https://miamidade.zoom.us/j/89701638320?pwd=jSC-gkkONwCaUNxjOEFrOUJRSCtpT.1> en su navegador web a las 10:00 a. m., hora estándar del este (EST), o marque el +1 786 635 1003, ID de la reunión: 897 0163 8320 y código de acceso: 974111.

Si desea participar en la reunión de Zoom sobre el **Proceso Competitivo del Programa de Atención Integral**, introduzca el enlace <https://miamidade.zoom.us/j/84048299331?pwd=BPzodroXyNj7gcJ2n0J5Q1tXc3j001.1> en su navegador web a la 1:00 p. m., hora estándar del este, o marque el +1 786 635 1003, ID de la reunión: 840 4829 9331 y código de acceso: 326034.

Se recomienda encarecidamente asistir a los talleres previos a la solicitud. Invitamos a los proveedores sin fines de lucro que reciben fondos actualmente, así como a los nuevos proveedores, y a las agencias gubernamentales, a que examinen estas peticiones de solicitudes (RFA) y a que soliciten la renovación de los proyectos existentes o presenten una solicitud para un nuevo proyecto, o proyectos. **ESTAS PETICIONES RFA QUEDAN SUJETAS A LA ORDENANZA DEL CONDADO 98-106 QUE ESTABLECE EL CONO DE SILENCIO.** A fin de mantener un proceso competitivo justo e imparcial, el Condado solamente puede responder preguntas en el taller previo a las solicitudes y debe evitar toda comunicación privada con los posibles solicitantes durante el proceso de preparación y evaluación de las solicitudes. Comuníquese con el Fideicomiso de los Desamparados si necesita los documentos de la petición de solicitudes en formato especial o en otro idioma. **La fecha límite para la presentación de estas solicitudes es el 9 de septiembre del 2022 a las 2:00 p. m., hora estándar del este. En la RFA publicada en <http://homelesstrust.org/providers.asp> podrá obtener instrucciones sobre cómo reunir la documentación necesaria y presentar las respuestas a esta solicitud.**

El Condado de Miami-Dade no es responsable de ninguno de los costos en los que incurra el solicitante para responder a la petición de solicitudes y se reserva el derecho de modificar o enmendar el calendario con la fecha límite para entregar las solicitudes si lo considera necesario o es de su interés. El Condado de Miami-Dade también se reserva el derecho de aceptar o rechazar cualquier solicitud, de admitir excepciones técnicas o irregularidades y de aceptar las solicitudes que mejor respondan a los intereses del Condado. El Condado de Miami-Dade brinda oportunidades equitativas de acceso tanto en materia de empleo como de servicios y no discrimina a nadie por motivo de edad, sexo, raza o discapacidad.

Unsheltered Homelessness RFA Support Services Only Score Sheet

Provider & Project Name:

A. Support Services 36 points (33% of total score)

Scoring Description	Available Points	Assigned Points
1. The type of supportive services that will be offered to unsheltered program participants are designed to obtain and ensure successful retention in housing, and except for case management services, are offered voluntarily.	4 Points	
2. The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply, and which meet the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	4 Points	
3. Program participants will be assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing).	4 Points	
4. Program participants are assisted in identifying housing. Examples of desirable responses include assessing participants to better understand the unit type, neighborhood, and other accommodations (parking for their vehicle) they prefer; role playing landlord tenant meetings to prepare participants for housing interviews; helping participants obtain required documents for housing; providing participants housing leads and transporting them to see the unit and meet with the landlord.	4 Points	
5. Respondents utilize strategies to regularly engage individuals and families experiencing unsheltered homelessness in the locations where they reside and connect them to low barrier shelter, temporary housing, or permanent housing as available and appropriate. Respondents describe: oHow they coordinate with Emergency Shelter and Permanent Housing providers; oFrequency (days and times outreach to clients is conducted each week); oHow they help people exit homelessness and unsheltered homelessness; oWhat specific engagement strategies will be utilized to engage individuals and families experiencing homelessness with the highest vulnerabilities (including use of culturally appropriate strategies); and oHow they will use the outreach teams to connect individuals and families experiencing unsheltered homelessness to permanent housing	8 Points	
6. Respondents will employ people with lived homelessness experience.	8 Points	
7. The respondent utilizes Evidenced Based Practices for serving unsheltered persons and can demonstrate training and/or supervising staff to promote fidelity practices. If Assertive Community Treatment is utilized, the respondents budget will demonstrate the use of a multidisciplinary treatment team.	4 Points	

Comments:

B. System Performance 28 points (25% of total score)

For scoring criteria B., respondents participating in HMIS must submit an Annual Progress Report (APR) for a similar project run between 10/1/20-9/30/21. Respondents who do not participate in HMIS may submit a record of system performance from an equivalent database for scoring criteria B. that provides a compelling explanation of the agency's performance considering HUD System Performance Measures.

1. Percentage of exits to Positive Destinations (50% or greater for full points, partial points available between 30-49%)	12 Points	
2. Percentage of people of color served aligns with system data (50% or greater - all or none)	4 Points	
3. Percentage of persons served who are male aligns with system data (60% or greater - all or none)	4 Points	
4. Percentage of non-Hispanic persons served aligns with system data (55% or greater - all or none)	4 Points	
5. Percent of persons served with disabilities aligns with system data (32% or greater - all or none)	4 Points	

Comments:

C. Objective Criteria 42 points (38% of total score)

1. Proposed project budget is: a. clear, easily understandable to raters b. detailed, includes a comprehensive budget narrative and correct match with proof from sources c. reasonable, as evidenced by including only allowable activities, and d. cost effective, as compared to other projects providing the same component	12 Points	
2. For applications seeking Housing Navigation, the respondent describes the strategy for establishing relationships with landlords (i.e. using allowable HUD activities like offering twice the security deposit as a bonus and educating landlords on the rent mitigation fund), advertise to landlords, use of technology to track available units, prepare clients for the landlord tenant interviews, use of transportation to take clients to see properties, strategies for quickly identifying housing, obtaining client documents and offering housing choice to persons referred to Permanent Housing.	12 Points (N/A for CE & SO)	
3. Respondent has at least one year of experience using HMIS or OSNIUM for victims of DV.	4 Points	
4. Percentage of persons coming directly from places not meant for human habitation (75% or greater for full points, partial points available between 50-74%)	4 Points	
5. Unsheltered persons may take multiple contacts to engage. Percentage of 2 or more contacts in HMIS (10% or less for full points, partial points available between 11-25%)	4 Points	

6. Income data quality at project start (less than 5% error rate)	4 Points	
7. Respondents demonstrate they utilize people with lived expertise of homelessness to make policy decisions (Board members, working group...)	4 Points	
<p>8. Respondents included a written commitment from a health care organization, including organizations that serve people with HIV/AIDS, that the value of assistance being provided by the healthcare organization is at least:</p> <ul style="list-style-type: none"> o In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services; or o An amount that is equivalent to 50% of the funding being requested for the project(s) will be covered by the healthcare organization. <p>Acceptable forms of commitment are formal written agreements and must include:</p> <ul style="list-style-type: none"> o Value of the commitment, and o Dates the healthcare resources will be provided. 	6 Points	
Comments:		
D. Racial Equity 4 points (4% of total score)		
1. Provider has identified steps and strategies to promote racial equity	4 Points	
Comments:		
TOTAL:		0
Raters Name:	Date:	

Unsheltered Homelessness RFA TH:RRH Score Sheet

Provider & Project Name: _____

A. Support Services 32 points (23% of total score)

Scoring Description	Available Points	Assigned Points
1. The type of supportive services that will be offered to program participants are designed to obtain and ensure successful retention in housing, and except for case management services, are offered voluntarily.	4 Points	
2. The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply, and which meet the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	4 Points	
3. Program participants will be assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing).	4 Points	
4. Program participants are assisted in identifying housing. Examples of desirable responses include assessing participants to better understand the unit type, neighborhood, and other accommodations (parking for their vehicle) they prefer; role playing landlord tenant meetings to prepare participants for housing interviews; helping participants obtain required documents for housing; providing participants housing leads and transporting them to see the unit and meet with the landlord.	4 Points	
5. Respondents utilize strategies to regularly engage individuals and families experiencing unsheltered homelessness in the locations where they reside and connect them to low barrier shelter, temporary housing, or permanent housing as available and appropriate. Respondents describe: oHow they coordinate with outreach teams and PSH providers; oFrequency (days and times outreach to clients is conducted each week); oHow they help people exit homelessness and unsheltered homelessness; oWhat specific engagement strategies will be utilized to engage individuals and families experiencing homelessness with the highest vulnerabilities (including use of culturally appropriate strategies); and oHow they will use the outreach teams to connect individuals and families experiencing unsheltered homelessness to permanent housing	4 Points	
6. Respondents will employ people with lived homelessness experience.	8 Points	

7. The respondent utilizes Evidenced Based Practices for serving unsheltered persons and can demonstrate training and/or supervising staff to promote fidelity practices. If Assertive Community Treatment is utilized, the respondents budget will demonstrate the use of a multidisciplinary treatment team	4 Points	
Comments:		
B. Housing 16 points (11% of total score)		
1. The type of TH & PH being sought through this solicitation, including the number and configuration of units, must fit the needs of unsheltered persons.	8 Points	
2. Proposal plan is likely to move clients quickly into permanent destinations and describes how the housing application will remove barriers to move in (examples of barriers include screening for immigration status, checking credit history, looking for past evictions, lack of income, disability type)	8 Points	
Comments:		
C. System Performance 28 points (20% of total score)		
For scoring criteria C.1.-C.5 respondents participating in HMIS must submit an Annual Progress Report (APR) for a similar project run between 10/1/20-9/30/21. Respondents who do not participate in HMIS may submit a record of system performance from an equivalent database for scoring criteria C. that provides a compelling explanation of the agency's performance considering HUD System Performance Measures.		
1. Percentage of exits to Permanent Destinations (50% or greater for full points, partial points available between 30-49%)	12 Points	
2. Adults who Gained or Increased Income from Start to Exit, Average Gain (10% or greater)	4 Points	
3. Percent of returns to homelessness in the first 6 months (10% or less for full points, partial points available between 11-25%)	4 Points	
4. Percent of returns to homelessness between 6-12 months (10% or less for full points, partial points available between 11-25%)	4 Points	
5. Percent of returns to homelessness between 12-24 months (10% or less for full points, partial points available between 11-25%)	4 Points	
Comments:		
D. Objective Criteria 60 points (43% of total score)		
1. Proposed project budget is: a. clear, easily understandable to raters b. detailed, includes a comprehensive budget narrative and correct match with proof from sources c. reasonable, as evidenced by including only allowable activities, and d. cost effective, as compared to other projects providing the same component e. has twice as many resources for the RRH than the TH portion	12 Points	
2. The respondent has experience with both Transitional and Rapid Re-Housing	4 Points	
3. The respondents budget includes an Employment Specialist	4 Points	

4. Respondent has at least one year of experience using HMIS or OSNIUM for victims of DV.	4 Points	
5. Percentage of persons coming directly from places not meant for human habitation (10% or greater)	4 Points	
6. Income data quality at project start (less than 5% error rate)	4 Points	
7. Average time between project start date and move in date, percentage below 30 days for PH component	4 Points	
8. CoC Monitoring Score (<90%=8, 80-89%=6, 70-79%=4 & 60-69%=2)	8 Points	
9. Respondents demonstrate they utilize people with lived expertise of homelessness to make policy decisions (Board members, working group...)	4 Points	
10. Respondents included a written commitment from a health care organization, including organizations that serve people with HIV/AIDS, that the value of assistance being provided by the healthcare organization is at least: <ul style="list-style-type: none"> o In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services; or o An amount that is equivalent to 50% of the funding being requested for the project(s) will be covered by the healthcare organization. Acceptable forms of commitment are formal written agreements and must include: <ul style="list-style-type: none"> o Value of the commitment, and o Dates the healthcare resources will be provided. 	6 Points	
11. Respondents included a written commitment that utilizes housing subsidies or subsidized housing units not funded through the CoC or ESG Programs (e.g., Housing Choice Vouchers, HOME-ARP, HOPWA). The commitment must demonstrate that these housing units, which are not funded through the CoC or ESG programs, will serve at least 50 percent of the program participants anticipated to be served by the project.	6 Points	
Comments:		
E. Racial Equity 4 points (3% of total score)		
1. Provider has identified steps and strategies to promote racial equity	4 Points	
Comments:		
TOTAL:		0

Raters Name:	Date:
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Unsheltered Homelessness RFA PSH Score Sheet

Provider & Project Name: _____

A. Support Services 32 points (23% of total score)

Scoring Description	Available Points	Assigned Points
1. The type of supportive services that will be offered to program participants are designed to obtain and ensure successful retention in housing, and except for case management services, are offered voluntarily.	4 Points	
2. The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply, and which meet the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	4 Points	
3. Program participants will be assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing).	4 Points	
4. Program participants are assisted in identifying housing. Examples of desirable responses include assessing participants to better understand the unit type, neighborhood, and other accommodations (parking for their vehicle) they prefer; role playing landlord tenant meetings to prepare participants for housing interviews; helping participants obtain required documents for housing; providing participants housing leads and transporting them to see the unit and meet with the landlord.	4 Points	

<p>5. Respondents utilize strategies to regularly engage individuals and families experiencing unsheltered homelessness in the locations where they reside and connect them to low barrier shelter, temporary housing, or permanent housing as available and appropriate. Respondents describe:</p> <ul style="list-style-type: none"> oHow they coordinate with outreach teams, ES, TH and RRH providers; oFrequency (days and times outreach to clients is conducted each week); oHow they help people exit homelessness and unsheltered homelessness; oWhat specific engagement strategies will be utilized to engage individuals and families experiencing homelessness with the highest vulnerabilities (including use of culturally appropriate strategies); and oHow they will use the outreach teams to connect individuals and families experiencing unsheltered homelessness to permanent housing 	4 Points	
6. Respondents will employ people with lived homelessness experience	8 Points	
7. The respondent utilizes Evidenced Based Practices for serving unsheltered persons and can demonstrate training and/or supervising staff to promote fidelity practices. If Assertive Community Treatment is utilized, the respondents budget will demonstrate the use of a multidisciplinary treatment team	4 Points	
Comments:		
B. Housing 16 points (11% of total score)		
1. The type of PH being sought through this solicitation, including the number and configuration of units, must fit the needs of unsheltered persons.	8 Points	
2. Proposal describes how the housing application will remove barriers to move in (examples of barriers include screening for immigration status, checking credit history, looking for past evictions, lack of income, disability type)	8 Points	
Comments:		
C. System Performance 28 points (20% of total score)		
For scoring criteria C.1.-C.5 respondents participating in HMIS must submit an Annual Progress Report (APR) for a similar project run between 10/1/20-9/30/21. Respondents who do not participate in HMIS may submit a record of system performance from an equivalent database for scoring criteria C. that provides a compelling explanation of the agency's performance considering HUD System Performance Measures.		
1. Housing retention percentage (90% or greater for full points, partial points available between 80-89%)	12 Points	
2. Adults who Gained or Increased Income from Start to Exit, Average Gain (10% or greater)	4 Points	

3. Percent of returns to homelessness in the first 6 months (10% or less for full points, partial points available between 11-25%)	4 Points	
4. Percent of returns to homelessness between 6-12 months (10% or less for full points, partial points available between 11-25%)	4 Points	
5. Percent of returns to homelessness between 12-24 months (10% or less for full points, partial points available between 11-25%)	4 Points	
Comments:		
D. Objective Criteria 60 points (43% of total score)		
1. Proposed project budget is: a. clear, easily understandable to raters b. detailed, includes a comprehensive budget narrative and correct match with proof from sources c. reasonable, as evidenced by including only allowable activities, and d. cost effective, as compared to other projects providing the same component	12 Points	
2. Proposed timeline for project implementation and occupancy is reasonable	4 Points	
3. Respondents demonstrate they utilize people with lived expertise of homelessness to make policy decisions (Board members, working group...)	4 Points	
4. Respondent has at least one year of experience using HMIS or OSNIUM for victims of DV.	4 Points	
5. Percentage of persons coming directly from places not meant for human habitation (10% or greater)	4 Points	
6. Income data quality at project start (less than 5% error rate)	4 Points	
7. Average time between project start date and move in date, percentage below 30 days for PH	4 Points	
8. CoC Monitoring Score (<90%=8, 80-89%=6, 70-79%=4 & 60-69%=2)	8 Points	
9. Like PH projects operated by respondent only take CES referrals	4 Points	

<p>10. Respondents included a written commitment from a health care organization, including organizations that serve people with HIV/AIDS, that the value of assistance being provided by the healthcare organization is at least:</p> <ul style="list-style-type: none"> o In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services; or o An amount that is equivalent to 50% of the funding being requested for the project(s) will be covered by the healthcare organization. <p>Acceptable forms of commitment are formal written agreements and must include:</p> <ul style="list-style-type: none"> o Value of the commitment, and o Dates the healthcare resources will be provided. 	6 Points	
<p>11. Respondents included a written commitment that utilizes housing subsidies or subsidized housing units not funded through the CoC or ESG Programs (e.g., Housing Choice Vouchers, HOME-ARP, HOPWA). The commitment must demonstrate that these housing units, which are not funded through the CoC or ESG programs, will provide at least 50 percent of the units included in the project.</p>	6 Points	
Comments:		
E. Racial Equity 4 points (3% of total score)		
1. Provider has identified steps and strategies to promote racial equity	4 Points	
Comments:		
TOTAL:		0

Raters Name:	Date:
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No project was rejected or reduced

RE: CoC Annual NOFO - Message (HTML)

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RE: CoC Annual NOFO

Reply Reply All Forward

To Sarria, Manuel (HT)

Spiegel, Martha (HT); Anna Kopper; Cary YeeQuee; Cristina Garcia-Menocal; Elago; Eleanor Lanser; Vidal, Ivette (CAHSD); Mesa, Ivon (CAHSD); J Chavaria - Carrfour; Jacek Starownik; Guerrero, Janay; Jessica Ehresman; Jean Eveillard; Jim Dyes; Jose Garcia; Katherine Martinez; Kenneth King; Lisa Cancel; Johnson, Latavea (CAHSD); Maricel Gata; +19 others

Cc Miluse Campian; McNaught@educatetomorrow.org; Giovanni Sairas; Malena Legarre; Margarita@hermanosdelacalle.org; Jonathan Castillo; Jean Eveillard; Robert Herrera; Thomas Guerra; Elis, Terrell T. (HT); Regalado, Elizabeth (Advocacy); Miller, Angela (HT); Rent Connect (HT); Velarde, Sabrina (CAHSD); Miranda, William (HT)

You forwarded this message on 9/16/2022 12:55 PM.

addenda-ii-project-rating-and-funding-recommendations.pdf 671 KB

Hi,

Attached here please find the Selection Committee memo and scoring with the ranking of all projects submitted pursuant to the Special NOFO.

Don't hesitate to write me with any questions.

P.S. A special thanks to providers who submitted new project applications and the Selection Committee for rating and ranking the applications.

Providers

homelesstrust.org/homeless-trust/providers/home.page

documents are required in an alternative format of language. Responses to this RFA are due no later than September 9, 2022 at 2:00 p.m. eastern standard time. Please refer to the RFA and application materials posted below for instructions on how to compile and submit responses to this solicitation.

- HUD Special NOFO RFA Unsheltered Homelessness
- Attachment 1 Scoring and Ranking Process
- Attachment 2 RFA Checklist
- Attachment 4 Project Application
- Attachment 5 Detailed Budget (New Project)
- Attachment 7 Certificate of Consistency
- Attachment 8 Financial Information Worksheet
- Attachment 9 Miami-Dade County Affidavits
- Attachment 10 Previous Contractual Relationship
- Attachment 11 W9
- Attachment 12 Certification Page
- Attachment 13 Match Chart
- Attachment 14 HUD Affidavits
- Attachment 17 Drug Free Workplace
- Attachment 19 Code of Conduct
- Attachment 20 Score Sheet
- Scoring Guidelines

Addenda I

- Addenda I HUD Special NOFO RFA Unsheltered Homelessness

Addenda II

- Addenda II Project Rating, Ranking and Funding Recommendations

Memorandum



Date: September 16, 2022.
To: Daniella Levine-Cava
Mayor
From: Manny Sarria, Asst. Executive Director *ms*
Miami-Dade County Homeless Trust
Subject: 2022 HUD Special NOFO for Unsheltered Persons RFA Selection Committee Results

On August 2, 2022, the Homeless Trust had a pre-application workshop to make available a Request for Applications (RFA) for non-profits, Indian tribes and government entities who wished to submit application for inclusion in the 2022 HUD Special NOFO for Unsheltered Persons Collaborative Application benefiting people experiencing unsheltered homelessness. Trust staff advertised the solicitation in English, Spanish and Creole newspapers, on our website, via social media and via email with stakeholders on our list serve.

We received seven responses to the solicitation on September 9th, all were on-time and found to be responsive. A selection committee appointed by the Mayor convened on September 16th and recommended funding to all seven projects, and gave staff the authority to apply for an additional project(s) to provide Permanent Supportive Housing Support Services to accompany the Stability Vouchers being leveraged by Public Housing Authorities. Attached please find a list of applications, scoring and funding recommendations to projects selected for submittal in our collaborative application to U.S. HUD.

These recommendations will be considered by the Miami-Dade County Homeless Trust's Board members on Friday, September 23, 2022, at 10:30 a.m.

We appreciate the Selection Committee's participation and diligence throughout this process.

Please feel free to contact me should you have any questions or require additional information.

Attachment

cc: Ronald L. Book, Chairman, Miami-Dade County Homeless Trust
Morris Copeland, Chief Community Service Officer
Victoria Mallette, Executive Director
Shannon Summerset-Williams, Esq., Asst. County Attorney
RFA Selection Committee Members & Respondents

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REQUEST FOR APPLICATIONS (RFA)

Rank	Provider	Project Name	Project Type	Cleveland Bell Chairperson (Non-Voting)	Manny Sarría	James Rustin	Kristen Joseph	Samantha Bell	Tangulia Dansby	TOTAL POINTS	AVERAGE SCORE	TOTAL REQUESTED	Total Available	TOTAL RECOMMENDED
RESPONDENTS														
Street outreach														
6	City of Miami Beach	Hand Up	SSO							428	85.6	\$ 880,683.00		\$ 880,683.00
1	New Hope	Pathways	SSO							447	89.4	\$ 1,150,191.00	\$ 3,900,000.00	\$ 1,150,191.00
8	Educate Tomorrow	Youth CE	SSO							303	60.6	\$ 864,270.00		\$ 864,270.00
7	Miami Recovery project	A.R.C.	SSO							317	63.4	\$ 941,721.00		\$ 941,721.00
Joint Component TH-RRH														
5	Camillus House	St. Michael	TH:RRH							632	126.4	\$ 2,902,702.00	\$ 3,000,001.00	\$ 2,902,702.00
Support Services Only - PSH														
PSH														
4	Miami-Dade County	Stability Voucher Services	PSH									\$ 7,578,030.00	\$ 7,378,038.00	\$ 7,578,030.00
2	Camillus House	Brother Richard	PSH							671	134.2	\$ 6,260,442.00	\$ 6,300,000.00	\$ 6,260,442.00
Planning														
3	Miami-Dade County	Planning Grant	Planning									\$ 636,435.00	\$ 636,435.00	\$ 636,435.00
												\$ 21,214,474	\$ 21,214,474	\$ 21,214,474

The total recommended awards are for a term of three years. An award of \$900,000 is \$300,000 annually.

RE: CoC Annual NOFO - Message (HTML)

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RE: CoC Annual NOFO



Sarria, Manuel (HT)

To: Spiegel, Martha (HT); Anna Kopper; Cary YeeQuee; Cristina Garcia-Menocal; Elago; Eleanor Lanser; Vidal, Ivette (CAHSD); Mesa, Ivon (CAHSD); J Chavarria - Carrfour; Jacek Starownik; Guerrero, Janay; Jessica Ehresman; Jean Eveillard; Jim Dyes; Jose Garcia; Katherine Martinez; Kenneth King; Lisa Cancel; Johnson, Latavea (CAHSD); Maricel Gata; +19 others
 Cc: Miluse Campian; McNaught@educatetomorrow.org; Giovanni Sairas; Malena Legarre; Margarita@hermanosdelacalle.org; Jonathan Castillo; Jean Eveillard; Robert Herrera; Thomas Guerra; Elis, Terrell T. (HT); Regalado, Elizabeth (Advocacy); Miller, Angela (HT); Rent Connect (HT); Velarde, Sabrina (CAHSD); Miranda, William (HT)

Reply Reply All Forward

You forwarded this message on 9/16/2022 12:55 PM.



Hi,

Attached here please find the Selection Committee memo and scoring with the ranking of all projects submitted pursuant to the Special NOFO.

Don't hesitate to write me with any questions.

P.S. A special thanks to providers who submitted new project applications and the Selection Committee for rating and ranking the applications.

Windows taskbar showing various application icons and system tray with time 1:13 PM 9/16/2022.

Providers | homeless-trust.org/homeless-trust/providers/home.page

documents are required in an alternative format of language. Responses to this RFA are due no later than September 9, 2022 at 2:00 p.m. eastern standard time. Please refer to the RFA and application materials posted below for instructions on how to compile and submit responses to this solicitation.

- HUD Special NOFO RFA Unsheltered Homelessness
- Attachment 1 Scoring and Ranking Process
- Attachment 2 RFA Checklist
- Attachment 4 Project Application
- Attachment 5 Detailed Budget (New Project)
- Attachment 7 Certificate of Consistency
- Attachment 8 Financial Information Worksheet
- Attachment 9 Miami-Dade County Affidavits
- Attachment 10 Previous Contractual Relationship
- Attachment 11 W9
- Attachment 12 Certification Page
- Attachment 13 Match Chart
- Attachment 14 HUD Affidavits
- Attachment 17 Drug Free Workplace
- Attachment 19 Code of Conduct
- Attachment 20 Score Sheet
- Scoring Guidelines

Addenda I

- Addenda I HUD Special NOFO RFA Unsheltered Homelessness

Addendall

- Addenda II Project Rating, Ranking and Funding Recommendations

Windows taskbar showing various application icons and system tray with time 1:11 PM 9/16/2022.

Memorandum



Date: September 16, 2022.
To: Daniella Levine-Cava
Mayor
From: Manny Sarria, Asst. Executive Director *ms*
Miami-Dade County Homeless Trust
Subject: 2022 HUD Special NOFO for Unsheltered Persons RFA Selection Committee Results

On August 2, 2022, the Homeless Trust had a pre-application workshop to make available a Request for Applications (RFA) for non-profits, Indian tribes and government entities who wished to submit application for inclusion in the 2022 HUD Special NOFO for Unsheltered Persons Collaborative Application benefiting people experiencing unsheltered homelessness. Trust staff advertised the solicitation in English, Spanish and Creole newspapers, on our website, via social media and via email with stakeholders on our list serve.

We received seven responses to the solicitation on September 9th, all were on-time and found to be responsive. A selection committee appointed by the Mayor convened on September 16th and recommended funding to all seven projects, and gave staff the authority to apply for an additional project(s) to provide Permanent Supportive Housing Support Services to accompany the Stability Vouchers being leveraged by Public Housing Authorities. Attached please find a list of applications, scoring and funding recommendations to projects selected for submittal in our collaborative application to U.S. HUD.

These recommendations will be considered by the Miami-Dade County Homeless Trust's Board members on Friday, September 23, 2022, at 10:30 a.m.

We appreciate the Selection Committee's participation and diligence throughout this process.

Please feel free to contact me should you have any questions or require additional information.

Attachment

cc: Ronald L. Book, Chairman, Miami-Dade County Homeless Trust
Morris Copeland, Chief Community Service Officer
Victoria Mallette, Executive Director
Shannon Summerset-Williams, Esq., Asst. County Attorney
RFA Selection Committee Members & Respondents

RECEIVED
2022 SEP 16 PM 12:33
OFFICE OF THE MAYOR

REQUEST FOR APPLICATIONS (RFA)

Rank	Provider	Project Name	Project Type	Cleveland Bell Chairperson (Non-Voting)	Manny Sarría	James Rustin	Kristen Joseph	Samantha Bell	Tangulia Dansby	TOTAL POINTS	AVERAGE SCORE	TOTAL REQUESTED	Total Available	TOTAL RECOMMENDED
RESPONDENTS														
Street outreach														
6	City of Miami Beach	Hand Up	SSO							428	85.6	\$ 880,683.00		\$ 880,683.00
1	New Hope	Pathways	SSO							447	89.4	\$ 1,150,191.00	\$ 3,900,000.00	\$ 1,150,191.00
8	Educate Tomorrow	Youth CE	SSO							303	60.6	\$ 864,270.00		\$ 864,270.00
7	Miami Recovery project	A.R.C.	SSO							317	63.4	\$ 941,721.00		\$ 941,721.00
Joint Component TH-RRH														
5	Camillus House	St. Michael	TH:RRH							632	126.4	\$ 2,902,702.00	\$ 3,000,001.00	\$ 2,902,702.00
Support Services Only - PSH														
PSH														
4	Miami-Dade County	Stability Voucher Services	PSH									\$ 7,578,030.00	\$ 7,378,038.00	\$ 7,578,030.00
2	Camillus House	Brother Richard	PSH							671	134.2	\$ 6,260,442.00	\$ 6,300,000.00	\$ 6,260,442.00
Planning														
3	Miami-Dade County	Planning Grant	Planning									\$ 636,435.00	\$ 636,435.00	\$ 636,435.00
												\$ 21,214,474	\$ 21,214,474	\$ 21,214,474

The total recommended awards are for a term of three years. An award of \$900,000 is \$300,000 annually.

- HUD Special NOFO RFA Unsheltered Homelessness
- Attachment 1 Scoring and Ranking Process
- Attachment 2 RFA Checklist
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Addenda I

- Addenda I HUD Special NOFO RFA Unsheltered Homelessness

Addenda II

- Addenda II Project Rating, Ranking and Funding Recommendations

FY 2022 Special Application and Priority Listing

- Special Application FY 2022
- Special Priority Listing FY 2022

Special NOFO - Message (HTML) Search

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Special NOFO



Sarria, Manuel (HT)

Reply Reply All Forward

To Anna Kopper; Cary YeeQuee; Cristina Garcia-Menocal; ELago; Eleanor Lanser; Vidal, Ivette (CAHSD); Mesa, Ivon (CAHSD); J Chavarria - Carrfour; Jacek Starownik; Guerrero, Janay; Sat 10/8/2022 6:49 PM
 Jessica Ehresman; Jean Eveillard; Jim Dyes; Jose Garcia; Katherine Martinez; Kenneth King; Lisa Cancel; Johnson, Latavea (CAHSD); Maricel Gata; Marti Yeager; Mary V; +17 others
 Cc Miluse Campian; McNaught@educatetomorrow.org; Giovanni Sairras; Malena Legarre; Margarita@hermanosdelacalle.org; Jonathan Castillo; Jean Eveillard; Robert Herrera;
 Thomas Guerra; Ellis, Terrell T. (HT)

Special CoC Application.pdf 11 MB

Special Priority Listing.pdf 1013 KB

Dear colleagues,

Attached please find links to the FY 2022 Special NOFO Application and Priority Listing, you will also find them posted on our website: <https://www.homelesstrust.org/homeless-trust/providers/home.page>.

Thank you,

Manny Sarria

Windows taskbar showing: Inbox - Manuel..., RE: Homeless Sy..., Special NOFO - ..., Snip & Sketch, 80°F, 6:49 PM 10/8/2022



Public Housing and Community Development

701 NW 1st Court, 16th Floor
Miami, FL 33136-3914
T 786-469-4100 • F 786-469-4199

miamidade.gov

September 19, 2022

Ms. Victoria Mallette
Executive Director
Miami-Dade County Homeless Trust
111 NW 1st Street, 27th Floor
Miami, FL 33128

Dear Ms. Mallette:

Miami-Dade Public Housing and Community Development (PHCD) commits to providing 85 project-based vouchers to people experiencing unsheltered homelessness in Miami-Dade County, as part of the US Department of Housing and Urban Development's (HUD) Fiscal Year (FY) 2022 Continuum of Care Special NOFO Competition. In return for this commitment, the Miami-Dade County Homeless Trust, lead agency for Miami-Dade's Continuum of Care (CoC), will commit to making all efforts to secure funding from the U.S. Department of Housing and Urban Development (HUD) to provide supportive services to unsheltered persons occupying the voucher-assisted units through the Brother Richard PSH project application. Supportive services are essential to maintaining housing stability, as such, this commitment is contingent on the CoC being able to provide services to these households.

PHCD agrees to accept referrals from the CoC's coordinated entry system beginning October 1, 2023, and agrees to only lease those units to unsheltered households that have been referred by the CoC. We have already worked with the Miami-Dade CoC to establish a preference for general admission to the Housing Choice Voucher program through the CoC's coordinated entry process to individuals and families experiencing homelessness.

We look forward to expanding our partnership for the benefit of those experiencing homelessness.

Sincerely,

A handwritten signature in blue ink, appearing to read "Michael Liu", written over a horizontal line.

Michael Liu
Director



OFFICE OF THE MAYOR MIAMI-DADE COUNTY, FLORIDA

DANIELLA LEVINE CAVA
MAYOR

October 7, 2022

Ms. Victoria Mallette, Executive Director
Miami-Dade County Homeless Trust
111 NW 1st Street, 27th Floor
Miami, FL 33128

Dear Ms. Mallette:

Miami-Dade County commits to providing \$20 million of general revenue \$5 million of HOME ARPA funding to acquire and rehabilitate properties for people experiencing homelessness. A portion of those funds will go towards acquiring a property with no less than 95 units of housing for people experiencing unsheltered homelessness as part of the US Department of Housing and Urban Development's (HUD) Fiscal Year (FY) 2022 Continuum of Care Special NOFO Competition.

In exchange for this housing leveraging commitment, the Miami-Dade County Homeless Trust, lead agency for Miami-Dade's Continuum of Care (CoC), will commit to making all efforts to secure funding from the U.S. Department of Housing and Urban Development (HUD) to provide supportive services to unsheltered persons occupying the units through the following PSH project applications:

- Brother Raphael (35), and
- Pathways Plus (35), and
- MB Cares (25).

The County agrees referrals will be made following the CoC's coordinated entry system beginning October 1, 2023.

We look forward to expanding housing resources in order to reduce the number of unsheltered persons in Miami-Dade County.

Sincerely,

A handwritten signature in blue ink, appearing to read "Daniella Cava", with a long horizontal flourish extending to the right.

Daniella Levine Cava
Mayor


c: Ronald L. Book, Chairman, Miami-Dade County Homeless Trust

Memorandum



Date: September 1, 2022

To: Honorable Chairman Jose "Pepe" Diaz
and Members, Board of County Commissioners

From: Daniella Levine Cava
Mayor 

Subject: Resolution Approving, by a Two-Thirds Vote of Board Members Present Pursuant to Section 125.355, Florida Statutes, A Contract for Sale and Purchase Between FVP Eden Gardens, LLC, A Florida Limited Liability Company, as Seller, and Miami-Dade County, as Buyer, for Property known as Mia Casa located at 12221 Harriet Tubman Highway in North Miami, Florida, in the Amount of \$6,400,000.00 and Authorizing the Expenditure of up to \$25,000.00 for Closing Costs; Authorizing the Chairperson or Vice-Chairperson of the Board to Execute the Acceptance of the Deed of Conveyance; Authorizing the County Mayor or County Mayor's Designee (1) to Execute the Contract for Sale and Purchase, Exercise any and all Rights Conferred Therein, and to take all Other Actions Necessary to Effectuate Said Purchase, (2) to Receive and Expend \$1,750,000.00 from the State of Florida Department of Children and Families for the Purchase and Operation of the Property, (3) to Execute a Grant Agreement and other Required and Customary Documents with the State Of Florida including but not limited to a Mortgage Lien and Security Agreement, (4) to Amend the Grant Agreement and other Documents and to Exercise any and all Rights Conferred Therein, (5) to Enter into a Three Year Services Agreement with Mia Casa at North Miami, a Florida Limited Liability Corporation, in an Amount not to exceed \$4,500,000.00 to Manage and Operate Mia Casa and to Exercise any and all Rights Conferred Therein, and (6) to Expend Amounts not to Exceed \$4,500,000.00 to Fund the Services Agreement and \$3,000,000.00 toward Eligible Capital Expenses from Food and Beverage Tax Funds; Approving and Authorizing Designated Purchase for the Services Agreement, in Accordance with Section 2-8.1(B)(3) of the Code of Miami-Dade County by a Two-Thirds Vote of Board Members Present

Executive Summary

The purpose of this item is to approve and execute a contract for sale and purchase of Mia Casa in North Miami in the amount of \$6,400,000.00 million; receive and expend \$1,750,000.00 from the State of Florida Department of Children and Families for the purchase and operation of the property and execute a grant agreement with the State of Florida and other documents required by the state, including but not limited to Mortgage Lien and Security Agreement; authorize a three-year services agreement with Mia Casa at North Miami, LLC not to exceed \$4,500,000.00 to manage and operate Mia Casa and \$3,000,000.00 toward eligible capital expenses from Food and Beverage Tax funds. This facility provides housing and services for senior citizens and other highly vulnerable persons experiencing homelessness.

Recommendation

It is recommended that the Board of County Commissioners:

enter into a three-year Services Agreement with Mia Casa at North Miami, a Florida Limited Liability Corporation, in an amount not to exceed \$4,500,000.00, to manage and operate Mia Casa and exercise amendment, termination, cancellation and modification clauses contained therein; expend amounts not to exceed \$4,500,000.00 to fund the Services Agreement and \$3,000,000.00 toward eligible capital expenses from Food and Beverage Tax funds.

Fiscal Impact/Funding Source

Funding for the sale and purchase includes HOME Investment Partnerships (HOME) funds in the amount of \$5,000,000.00 per R-685-21 and \$1,750,000.00 from the State of Florida Department of Children and Families. Funding for operations for three years in the amount of \$4,500,000.00 and \$3,000,000.00 toward eligible capital expenses will come from One Percent Local Option Food and Beverage Tax funds. The three-year term will commence October 1, 2022 and end on September 30, 2025.

Track/Record/Monitor

The Internal Services Department will be responsible for carrying out the sale and purchase. The Homeless Trust (Trust) will be the administering department responsible for the monitoring the housing and service provider. The provider’s grant agreements will be monitored through the Homeless Trust’s existing monitoring processes that consists of site visits, desk reviews, the review of monthly, quarterly and annual progress reports, as well as the analysis of utilization rates.

Background

On April 24, 2020, in preparation for and in response to the COVID-19 pandemic, Miami-Dade County, through the Miami-Dade County Homeless Trust, entered into an agreement with Mia Casa at North Miami, LLC, to operate a quarantine and isolation site for senior citizens and other highly vulnerable persons experiencing homelessness who were at high risk of serious illness from the virus. Mia Casa of North Miami, LLC has provided housing and social services of value to the County and has demonstrated an ability or desire to continuing providing housing and services.

Mia Casa, located at 12221 Harriet Tubman Highway in North Miami, Florida, 33161, previously operated as an Assisted Living Facility (ALF). The property includes 65 rooms with capacity for up to 120 individuals. Miami-Dade County, through the Miami-Dade County Homeless Trust, worked with FVP Eden Gardens, LLC, the owner of Mia Casa, together with Assisted Living Facility operator Mia Casa at North Miami, LLC, who was in a long-term leasing agreement with the owner, to acquire the property. Four appraisals were obtained on the property, each of which is attached hereto as Attachment 1. Two appraisals were ordered through Internal Services Department. The third was ordered through Miami-Dade Public Housing and Community Development and the fourth appraisal was ordered by the seller. The four appraisals averaged \$6,000,000.00. A two-thirds vote of the Board of County Commissioners is needed as the sale and purchase price exceeds the appraised value.



DRAFT
Miami-Dade Board of County Commissioners
Minutes
SECOND BUDGET HEARING
Tuesday, September 20, 2022
5:01:00 PM
Commission Chambers

Disclaimer**Minutes Definitions**

Members Present:	Oliver G. Gilbert, III; Jean Monestime; Keon Hardemon; Sally A. Heyman; Eileen Higgins; Rebeca Sosa; Raquel A. Regalado; Danielle Cohen Higgins; Kionne L. McGhee; Sen. Javier D. Souto; Jose "Pepe" Diaz; Sen. Rene Garcia
Members Absent:	None
Members Late:	None
Members Excused:	None
Members Absent County Business:	None

1 MINUTES PREPARED BY:

REPORT: Kerry Khunjar Breakenridge, Commission Reporter
(305)375-5108

1A INVOCATION AS PROVIDED IN RULE 5.05(H)**1B ROLL CALL**

REPORT: Chairman Diaz convened the Board of County Commissioners (Board/BCC) Second Budget Hearing meeting at 5:08 p.m. with the invocation led by Dr. Juan Berek, Chairman of the Miami-Dade Interfaith Advisory Board; followed by the Pledge of Allegiance led by Vice Chairman Gilbert III.

The following Board members were present at roll call: Chairman Diaz, Vice Chairman Gilbert III, Commissioners Cohen Higgins, Garcia, Heyman, Higgins, McGhee, Monestime, Regalado, Sosa, and Souto.

In addition to the members of the Board, the following staff members were also present:

- ~ Chief Operations Officer Jimmy Morales, Office of the Mayor;
- ~ Chief Financial Officer Edward Marquez, Office of the Mayor;
- ~ County Attorney Geri Bonzon-Keenan and Assistant County Attorney Michael Valdes;
- ~ Clerk of the Board, Director, Basia Pruna and Deputy Clerks Kerry Khunjar Breakenridge

Also in attendance was Miami-Dade Mayor Daniella Levine Cava.

Chairman Diaz announced that the Chair's office was providing dinner to all staff members during tonight's (9/20) meeting.

1C PLEDGE OF ALLEGIANCE

ITEMS

222074 Report

INFORMATION FOR SECOND BUDGET HEARING - FY 2022-23
PROPOSED BUDGET(Mayor)

Presented

REPORT: *Mr. David Clodfelter, Director, Miami-Dade Office of Management and Budget (OMB), advised that the Mayor's memorandum dated September 16, 2022, entitled "Information for Second Budget Hearing – FY 2022-23 Proposed Budget", contained a scrivener's error on Page 4; and the allocation of \$150,000 to the Cuban American Bar Association Inc. should be corrected to read "The Cuban American Bar Association Pro Bono Project Inc." for the same purpose.*

Mr. Clodfelter announced the following amendments were also being made to Mayor's memorandum:

~ On Page 3, Section C, "Infrastructure Project Programs" – The \$3 million allocation to the City of North Miami for the construction of Cagney Park should read as follows: "\$3 million to the City of North Miami to construct a community theatre"

~ On Page 3, Section C, "Infrastructure Project Programs" - The last sentence should be amended to read: "Additionally, while the Homeless Trust was provided \$10 million through the HOMES plan and \$6 from the Infrastructure Project Programs category, there remains a funding gap of \$4 million to meet future capital needs that would be met in one of the following ways: (1) From unallocated \$50.875 million which is currently set aside to provide match funding for Federal and State grant awards the Homeless Trust will be allocated up to \$4 million of this funding; or (2) Repurposed Building Better Communities General Obligation Bond Program Fund based on availability with approval from the general obligation bond program community advisory committee and Board."

~ On Page 4, "Continuation of County Services" – The reference to the "Haitian Neighborhood Center Sant La, Inc." should be removed

~ On Page 4, "Continuation of County Services" – The reference to "The Family Action Network Movement, Inc. for the provision of Temporary Protected Status Services" should be amended to read "The Family Action Network Movement, Inc. for the provision of immigration services"

~ On Page 4, "Continuation of County Services" – The allocation of \$250,000 to Hispanic Unity Of Florida, Inc. for the provision of Temporary Protected Status Services should be amended to remove reference to "Hispanic Unity Of Florida, Inc. for the provision of Temporary Protected Status Services"

~ On Page 4, "Continuation of County Services" – The allocation of \$250,000 to Catholic Charities Of The Archdiocese Of Miami, Inc. for the provision of Temporary Protected Status Services should be amended to read: "\$1 million to the Catholic Legal Services Of The Archdiocese Of Miami, Inc. for the provision of immigration services."

~ On Page 4, "Continuation of County Services" – The allocation of \$250,000 to The Center for Haitian Studies Inc. to provide primary and specialty medical care to uninsured patients should be amended



Public Housing and Community Development

701 NW 1st Court, 16th Floor
Miami, FL 33136-3914
T 786-469-4100 • F 786-469-4199

miamidade.gov

September 19, 2022

Ms. Victoria Mallette
Executive Director
Miami-Dade County Homeless Trust
111 NW 1st Street, 27th Floor
Miami, FL 33128

Dear Ms. Mallette:

Miami-Dade Public Housing and Community Development (PHCD) intends to apply for Stability Vouchers in FY 2022 and is committed to partnering with the Miami-Dade County Homeless Trust to use these vouchers to address homelessness, in particular community residents experiencing unsheltered homelessness. PHCD has already collaborated with the Miami-Dade Continuum of Care (CoC) to develop a prioritization plan for the potential allocation. PHCD is prepared to take referrals from the CoC's Coordinated Entry for the Stability Vouchers. In exchange for this commitment, the CoC agrees to apply for CoC-funded supportive services to assist households occupying the voucher-assisted units. PHCD and the CoC are committed to jointly developing a prioritization plan for these vouchers with the goal of reducing the number of unsheltered people living our community.

PHCD has previously entered Memorandums of Understanding (MOU) with the Homeless Trust to provide HCV, PBV and EHV vouchers for referral by the CoC.

We look forward to expanding our partnership for the benefit of those experiencing unsheltered homelessness.

Sincerely,

A handwritten signature in blue ink, appearing to read "Michael Liu", with a long horizontal stroke extending to the right.

Michael Liu
Director



**THE HOUSING AUTHORITY
OF THE
CITY OF MIAMI BEACH**



BOARD OF COMMISSIONERS

DAVID C. GREEFF
CHAIRPERSON

MOJDEH L. KHAGHAN
VICE CHAIRPERSON

**200 ALTON ROAD
MIAMI BEACH, FL 33139-6742
TEL: 305-532-6401
FAX: 305-674-8001
TDD: 1-800-545-1833 EXT. 773
WWW.HACMB.ORG**

LEONOR FERNANDEZ
COMMISSIONER
MATTI BOWER
COMMISSIONER
MIGUELL DEL CAMPILLO
EXECUTIVE DIRECTOR

August 23, 2022

Victoria L. Mallette, Executive Director
Miami-Dade County Homeless Trust
111 NW 1st Street, 27th Floor
Miami, FL 33128

Dear Ms. Mallette:

The Housing Authority of the City of Miami Beach (HACMB) intends to apply for Stability Vouchers in FY 2022 and is committed to partnering with the Miami-Dade County Homeless Trust to use these vouchers to address homelessness, in particular community residents experiencing unsheltered homelessness. The HACMB agrees to collaborate with the Miami-Dade Continuum of Care (CoC) to develop a prioritization plan for the potential allocation and take referrals from the CoC's Coordinated Entry. In exchange for this commitment, the CoC agrees to apply for CoC-funded supportive services to assist households occupying the voucher-assisted units. The HACMB and the CoC are committed to jointly developing a prioritization plan for these vouchers with the goal of reducing the number of people living unsheltered and without housing in our community. The HACMB agrees to accept referrals made by the Homeless Trust and only lease units to families that have been referred from that system.

The HACMB first entered into a Memorandum of Understanding (MOU) with the Homeless Trust in July 2018 establishing the first Moving Up strategy/preference in Miami-Dade with the help of 25 Housing Choice Vouchers provided by the HACMB. This successful partnership was further expanded with 75 Mainstream Vouchers provided by the HACMB with eligible clients being referred by the CoC.

The HACMB committed another 25 Housing Choice Vouchers to the CoC in the FY 2021 US HUD Continuum of Care Program Competition, with US HUD awarding the CoC funding for supportive services. Also in the development pipeline are two state funded affordable housing projects, Eleven44 and The Heron, of which the CoC has a minimum of 6 referrals.

Currently, the CoC and the HACMB are effectively working to lease-up 88 Emergency Housing Vouchers made available through the American Rescue Plan Act (ARPA), 22% of which are set aside for victims of domestic violence. More than 44% of EHV vouchers are currently leased-up.

We look forward to expanding our partnership for the benefit of those experiencing homelessness.

Sincerely,

Miguell Del Campillo
Executive Director



HIALEAH HOUSING AUTHORITY



EXECUTIVE OFFICE

75 EAST 6TH STREET, HIALEAH, FL 33010

PH: 305-888-9744 – FAX: 305-887-8738

TTY: 1.800.877.8339 • SPANISH: 1.800.845.6136

BARBARA HERNANDEZ, CHAIRWOMAN
MARIO DIAZ, VICE-CHAIRMAN
MAIDA GUTIERREZ, COMMISSIONER
FARA ALVAREZ, COMMISSIONER
JUAN JUNCO, COMMISSIONER

JULIO PONCE
EXECUTIVE DIRECTOR

August 23, 2022

Julio Ponce
Executive Director
Hialeah Housing Authority
75 East 6th Street
Hialeah, FL 33010

Dear Ms. Mallette:

The Hialeah Housing Authority (HHA) intends to apply for Stability Vouchers in FY 2022 and is committed to partnering with the Miami-Dade County Homeless Trust to use these vouchers to address homelessness, in particular community residents experiencing unsheltered homelessness. HHA agrees to collaborate with the Miami-Dade Continuum of Care to develop a prioritization plan for the potential allocation and take referrals from the CoC's Coordinated Entry. In exchange for this commitment, the CoC agrees to apply for CoC-funded supportive services to assist households occupying the voucher-assisted units and to provide housing navigation services to all CoC referrals to the HHA as homelessness in Hialeah has increased:

<https://www.miamiherald.com/news/local/community/miamidade/hialeah/article263899047.html>,

HHA and the CoC are committed to jointly developing a prioritization plan for these vouchers with the goal of reducing the number of people living unsheltered and without housing in our community. HHA agrees to accept referrals made by the Homeless Trust and only lease units to families that have been referred from that system. Further, to better identify and engage persons experiencing homelessness in Hialeah, the City of Hialeah, a Participating Jurisdiction, is committing Emergency Solutions Grant (ESG) funding to create a new outreach team which will coordinate with existing CoC-funded outreach and specialized outreach teams canvassing the entire geography of Miami-Dade County. The CoC has also committed to providing 100% of match funding for Hialeah ESG dedicated to Rapid Rehousing.

HHA first entered into a Memorandum of Understanding (MOU) with the Homeless Trust in September 2016 to create a Housing Choice Voucher Homeless Preference and establish a referral relationship between the HHA and the Trust. We currently have an MOU for 100 vouchers for admission under the homeless preference.

Currently, the CoC and HHA are effectively working to lease-up 150 Emergency Housing Vouchers made available through the American Rescue Plan Act (ARPA), 22% of which are set aside for victims of domestic violence. More than 65% of EHV vouchers are leased-up.

HHA also included a homeless preference in its Mainstream Voucher allocation. While pulling from its waitlist, HHA provided an additional 20 points for persons who are homeless, at risk of homelessness or existing in an institution.

The CoC and Citrus Family Care Network, the Public Child Welfare Agency designed, also partners with HHA to administer Family Unification Program vouchers and Foster Youth to Independence Vouchers, identifying and referring households experiencing homelessness who are eligible for assistance.

We look forward to expanding our partnership for the benefit of those experiencing homelessness.

Sincerely,

Julio Ponce
Executive Director





August 23, 2022

Victoria Mallette
Executive Director
Miami-Dade County Homeless Trust
111 NW 1st Street, 27th Floor
Miami, FL 33128

Dear Ms. Mallette:

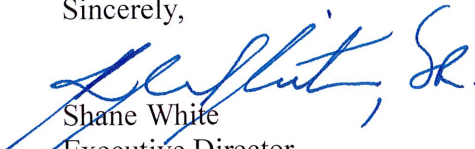
The Homestead Housing Authority (HHA) intends to apply for Stability Vouchers in FY 2022 and is committed to partnering with the Miami-Dade County Homeless Trust to use these vouchers to address homelessness, in particular community residents experiencing unsheltered homelessness. HHA agrees to collaborate with the Miami-Dade Continuum of Care (CoC) to develop a prioritization plan for the potential allocation and take referrals from the CoC's Coordinated Entry. In exchange for this commitment, the CoC agrees to apply for CoC-funded supportive services to assist households occupying the voucher-assisted units. HHA and the CoC are committed to jointly developing a prioritization plan for these vouchers with the goal of reducing the number of people living unsheltered and without housing in our community. HHA agrees to accept referrals made by the Homeless Trust and only lease units to families that have been referred from that system.

HHA first entered into a Memorandum of Understanding (MOU) with the Homeless Trust in September 2016 with 8 vouchers and has since expanded that partnership to 22 Housing Choice Vouchers for referral by the CoC.

Currently, the CoC and HHA are effectively working to lease-up 26 Emergency Housing Vouchers made available through the American Rescue Plan Act (ARPA), and another 25 to M.U.J.E.R, a provider for persons fleeing domestic violence. More than 43% of EHV vouchers are currently leased-up.

We look forward to expanding our partnership for the benefit of those experiencing homelessness.

Sincerely,


Shane White
Executive Director

HOMESTEAD HOUSING AUTHORITY
29355 South Federal Highway
Homestead, FL 33033



Professional, Caring, Individualized Services to Meet your Needs

1020 North Krome Avenue
Homestead
Florida-33030
Tel (786) 243 1003
Fax (786) 243-0503

Email:
admin@newhopecorp.org
www.newhopecorp.org

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*Stephen Alvarez MBA-HSA,
CAP*

FOUNDER

Manuel A. Alvarez



Contracting As South Florida
Behavioral Health Network, Inc.



September 29, 2022

Ms. Victoria L. Mallette
Executive Director
Miami-Dade County Homeless Trust
111 NW 1st Street
Miami, FL 33128

RE: Leverage for Miami Beach MB Cares PSH project - 2022 HUD Special NOFO

Dear Ms. Mallette:

New Hope C.O.P.R.S., Inc. is a licensed and accredited Substance Abuse provider under contract with Thriving Mind, the state's Managing Entity for Substance Abuse and Mental Health services. New Hope commits to providing Substance Abuse services to all MB Cares PSH project participants who meet criteria and elect to participate in treatment services at no additional charge to the grant, a value of \$1,018,542 over three years. This commitment will take effect 10/1/23 and expire on 9/30/26. Project eligibility for program participants will be based on the CoC Program Coordinated Entry Process and fair housing requirements and will not be restricted by the services provided.

If you have any questions, please let us know.

Sincerely,

Stephen Alvarez, MBA-HSA, CAP
Executive Director
New Hope C.O.R.P.S., Inc.



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- Kenneth Spell*

IMMEDIATE PAST CHAIR

A. Paul Bismarck

EXECUTIVE DIRECTOR

*Stephen Alvarez MBA-HSA,
CAP*

FOUNDER

Manuel A. Alvarez



Contracting As South Florida
Behavioral Health Network, Inc.



September 8, 2022

Ms. Victoria L. Mallette
Executive Director
Miami-Dade County Homeless Trust
111 NW 1st Street
Miami, FL 33128

RE: Leverage for New Hope C.O.R.P.S. Pathways Plus for 2022 HUD Special NOFO

Dear Ms. Mallette:

New Hope C.O.P.R.S., Inc. is applying in partnership with the Miami Dade County Homeless Trust for HUD grant funds to provide Permanent Supportive Housing supportive services to unsheltered homeless persons assigned a Stability Voucher. New Hope commits to providing Substance Abuse services to all Pathways Plus program participants who are eligible and agree to services at no additional charge to the grant, a value of \$1,187,299 over three years. New Hope is a licensed and accredited Substance Abuse treatment provider under Thriving Mind, the state Managing Entity for Substance Abuse and Mental Health services. This commitment will start on 10/01/2023 and expire 9/30/26. Project eligibility for program participants in the Pathways Plus project will be based on CoC Coordinated Entry processes and fair housing requirements, and will not be restricted by the services provided.

If you have any questions, please let us know.

Sincerely,

Stephen Alvarez, MBA-HSA, CAP
Executive Director
New Hope C.O.R.P.S., Inc.

MEMORANDUM OF UNDERSTANDING
Third Party Commitment for FY2023-24

Date: August 30, 2022

I, **Francis Afram-Gyening, CEO**, representing **Camillus Health Concern, Inc. (CHC)**, certify that I/we have made a commitment to provide the services specified below to **Camillus House, Inc. (CH)**.

Specific Service (s) to be provided (describe service(s), number of hours/days, location of where service (s) will be provided, etc.):

As the sister agency to Camillus House, CHC is committed to providing comprehensive healthcare services to the individuals served through the Brother Raphael Permanent Supportive Housing (PSH) program. Project eligibility for program participants in the new PSH project will be based on CoC Program requirements and will not be restricted by the health care service provider.

CHC will accept referrals for primary healthcare and ancillary medical services for individuals served during the program year. These clients will have access to healthcare services available at CHC's main health center, including oral health, behavioral health, podiatry, and chronic disease management.

Services are available Monday to Friday between the hours of 8:30 a.m. and 5:00 p.m. at the CHC main center location located at 336 NW 5th St, Miami, Florida 33128 or satellite site located at Camillus House NCL campus, 1603 NW 7th Ave., Miami, Florida

Value of service (s) to be provided:

The total value of this commitment **\$1,453,360** for the period **October 1, 2023 to September 30, 2026**.

CHC is a Federally Qualified Health Center (FQHC) and a Section 330(h) funded Healthcare for the Homeless grantee. CHC provides services to all patients regardless of their ability to pay.



Signature

9/27/2022

Date

Contact Information

Personnel: Francis Afram-Gyening

Title: Chief Executive Officer

Address: 336 N.W. 5th Street, Miami, Florida 33128

Phone: 305.374.1065

email: fagyening@camillus.org

MEMORANDUM OF UNDERSTANDING
Third Party Commitment for FY2023-24

Date: August 30, 2022

I, **Francis Afram-Gyening, CEO**, representing **Camillus Health Concern, Inc. (CHC)**, certify that I/we have made a commitment to provide the services specified below to **Camillus House, Inc. (CH)**.

Specific Service (s) to be provided (describe service(s), number of hours/days, location of where service (s) will be provided, etc.):

As the sister agency to Camillus House, CHC is committed to providing comprehensive healthcare services to the individuals served through the Brother Richard Permanent Supportive Housing program. Project eligibility for program participants in the new PSH project will be based on CoC Program requirements and will not be restricted by the health care service provider.

CHC will accept referrals for primary healthcare and ancillary medical services for individuals served during the program year. These clients will have access to healthcare services available at CHC's main health center, including oral health, behavioral health, podiatry, and chronic disease management.

Services are available Monday to Friday between the hours of 8:30 a.m. and 5:00 p.m. at the CHC main center location located at 336 NW 5th St, Miami, Florida 33128 or satellite site located at Camillus House NCL campus, 1603 NW 7th Ave., Miami, Florida

Value of service (s) to be provided:

The total value of this commitment **\$3,422,231** for the period **October 1, 2023 to September 30, 2026**.

CHC is a Federally Qualified Health Center (FQHC) and a Section 330(h) funded Healthcare for the Homeless grantee. CHC provides services to all patients regardless of their ability to pay.



Signature

8/30/2022

Date

Contact Information

Personnel: Francis Afram-Gyening

Title: Chief Executive Officer

Address: 336 N.W. 5th Street, Miami, Florida 33128

Phone: 305.374.1065

email: fagyening@camillus.org

MEMORANDUM OF UNDERSTANDING
Third Party Commitment for FY2023-24

Date: August 30, 2022

I, **Francis Afram-Gyening, CEO**, representing **Camillus Health Concern, Inc. (CHC)**, certify that I/we have made a commitment to provide the services specified below to **Camillus House, Inc. (CH)**.

Specific Service (s) to be provided (describe service(s), number of hours/days, location of where service (s) will be provided, etc.):

As the sister agency to Camillus House, CHC is committed to providing comprehensive healthcare services to the individuals served through the St. Michael joint Transitional Housing and Rapid Re-housing program. Project eligibility for program participants in the new joint TH:RRH project will be based on CoC Program requirements and will not be restricted by the health care service provider.

CHC will accept referrals for primary healthcare and ancillary medical services for individuals served during the program year. These clients will have access to healthcare services available at CHC's main health center, including oral health, behavioral health, podiatry, and chronic disease management.

Services are available Monday to Friday between the hours of 8:30 a.m. and 5:00 p.m. at the CHC main center location located at 336 NW 5th St, Miami, Florida 33128 or satellite site located at Camillus House NCL campus, 1603 NW 7th Ave., Miami, Florida

Value of service (s) to be provided:

The total value of this commitment **\$1,426,435** for the period **October 1, 2023 to September 30, 2026**.

CHC is a Federally Qualified Health Center (FQHC) and a Section 330(h) funded Healthcare for the Homeless grantee. CHC provides services to all patients regardless of their ability to pay.



Signature

8/30/2022

Date

Contact Information

Personnel: Francis Afram-Gyening

Title: Chief Executive Officer

Address: 336 N.W. 5th Street, Miami, Florida 33128

Phone: 305.374.1065

email: fagyening@camillus.org

Lived Experience Advisory Board Miami-Dade County

September 15, 2022.

Ms. Victoria Mallette
Executive Director
Homeless Trust
111 NW 1st St, Miami, FL 33128

Dear Ms. Mallette,

Miami-Dade's Lived Experience Advisory Board (LEAB) was incorporated on July 21, 2022 as a Continuum of Care (CoC) Working Group comprised of persons with lived experience of homelessness. Since our inception we have developed and adopted by-laws, elected members for leadership roles, held weekly listening sessions with CoC leadership, and reviewed and made recommendations surrounding the CoC's strategy to address unsheltered homelessness. It is the LEAB's pleasure to support the CoC's application to the Department of Housing and Urban Development's supplemental NOFO to address unsheltered homelessness. This letter confirms:

- **The LEAB working group has eleven (11) active members**
- **All of us have lived homelessness experience**
 - **We are representative of people experiencing homelessness in Miami-Dade County with members representing people of color, Hispanics, male and female, LGBTQ+, survivors of Domestic Violence and persons with disabilities.**
- **We reviewed and support the priorities in the CoCs Plan for serving unsheltered persons with severe service needs**
- **We reviewed and approved the scoring criteria for respondents seeking to apply for the Special NOFO collaborative application**

If you have any questions or concerns, you could email Cici Iverson at hanoi322@hotmail.com or Giovanni Sairras at reentryone.23@gmail.com.

Warm regards,



Cici Iverson, Co-Chair



Giovanni Sairras, Co-Chair



**MIAMI-DADE COUNTY HOMELESS TRUST
COMPREHENSIVE CONTINUUM OF CARE PLAN FOR SERVING INDIVIDUALS AND
FAMILIES EXPERIENCING HOMELESSNESS
WITH SEVERE SERVICE NEEDS**

a. Leveraging Housing Resources

1) Development of New Units and Creation of Housing Opportunities

The Miami-Dade County Homeless Trust has worked aggressively to develop new units and create housing opportunities for persons experiencing homelessness. We have partnered with all four Public Housing Agencies (PHA's) in our geographic area (Miami-Dade, Hialeah, Miami Beach and Homestead), and two Mainstream -only agencies (Miami and Carrfour Supportive Housing). PHA's have established preferences and partnered with the CoC on HCV, Mainstream, EHV, PBV, FUP and FYI, VASH and rehab of Public Housing units in exchange for referral opportunities. We have also employed Moving On strategies with vouchers to free up units of PSH.

New unit creation, exclusive of ESG and CoC, includes 550 new units of targeted HOME-ARPA and local funding investments, plus another 144 units in the pipeline through state tax credits and other special needs set-asides. In the Special NOFO the CoC is requesting 54 units of PSH, 20 units of RRH, and including three PSH projects to support 150 Stability Vouchers; we are leveraging 50% of those units with 85 units of PBV from Public Housing and Community Development, the Housing Authority for Miami-Dade County and 95 clustered apartments made available through HOME ARPA and general revenue provided by Miami-Dade County. The Homeless Trust has also taken advantage of the Homeless Preference in Multifamily Housing and continues to work with HUD-assisted owners and property managers to amend tenant Selection Plans and expand the preference; continues to partner with the Florida Housing Finance Corporation and private developers to add new units of PSH and Extremely Low Income (ELI) set-aside units for persons experiencing homelessness with special needs; collaborate with the State of Florida Department of Children and Families to take advantage of FUP and FYI opportunities; and create new bridge permanent housing which allows for unsheltered persons to gain quick access to permanent housing directly from the streets while allowing them to pursue other permanent options if they chose.

The Homeless Trust's Food and Beverage Tax, which is a dedicated funding source for persons experiencing homelessness in Miami-Dade, has leveraged the resources listed above to support new units and housing opportunities. The Trust has also partnered w/Miami-Dade County's Mayor to lend urgency to the goal of ending homelessness by joining the federal House America initiative. On behalf of the Mayor, goals have been established by the CoC to rehouse individuals and create new units of extremely low income and supportive housing for people experiencing homelessness by December 31, 2022. Mayor Daniella Levine Cava was among the first mayors in the nation to join HUD Secretary Marcia Fudge on September 20, 2021 to announce her commitment to House America. By August 2022, the CoC successfully placed 1,198

households into permanent housing, exceeding our goal by 45%. The CoC also added 527 units to the development pipeline, reaching 124% of its goal as of September 1. The annual CoC Program Competition and the Special NOFO to address unsheltered homelessness will play an important role in helping Miami-Dade and the CoC further expand housing opportunities.

Leveraged housing is anticipated to be 819 units coming online between September 1, 2022 and January 1, 2025. A list of housing in the development pipeline dedicated to persons experiencing homelessness is listed below (Table 1).

	# OF UNITS BY PROJECT TYPE
RENTAL HOUSING VOUCHERS	
Housing Choice Vouchers (available October 1, 2022)	25
Project Based Vouchers (available October 1, 2023)	100
HOMELESS TRUST ACQUISITION/CONVERSION	
HOME ARP (starting November 1, 2022)	550
PRIVATE DEVELOPMENT - COMMITTED SET-ASIDE UNITS	
HOME ARP Private Development (available July 1, 2024)	42
State Housing Credit (LIHTC) Multi-Family LINK Units ([ELI Special Needs Set-Aside] starting October 1, 2022 through January 1, 2025)	88
State Housing Credit (LIHTC) Special Needs Development (available 4/1/2024)	4
Multi-Family Private Development (available July 1, 2023)	10
TOTAL NEW UNITS IN PIPELINE AND IN SERVICE (available between 9/1/22 and 1/1/2025)	819

Table 1

The CoC has further created RRH opportunities for persons experiencing homelessness using non-CoC and ESG resources. The Trust provides 100% of match funding for ESG Participating Jurisdictions (Miami-Dade, Hialeah, Miami, State of Florida) who commit funds to RRH and/or Homeless Prevention activities.

Forty-five (45%) of Emergency Food and Shelter Program (EFSP) Phase 39 and 26% of EFSP-ARPA funds are dedicated to rental assistance. Five (5) of 11 EFSP rental assistance recipients are also CoC providers or partners, participating in HMIS and leveraging this funding with CoC and ESG rental assistance as part of a Rapid Rehousing strategy. The CoC has also partnered with State Housing Initiative Partnerships Program (SHIP) Entitlement Jurisdictions (Miami Gardens, Hialeah) and HOME participating jurisdictions (Miami-Dade) to provide Tenant Based-Rental Assistance (TBRA). Most recently, the CoC partnered with the Health

Council of South Florida and City of Miami on the Short-Term Rent, Mortgage and Utility Assistance Program (STRMU), making RRH referrals for HIV positive persons experiencing homelessness.

2) Landlord Recruitment

Current Strategy The Homeless Trust uses a multi-pronged approach to recruit and retain landlords. The Trust began employing a Director of Landlord Recruitment and Retention in 2017 to coordinate efforts and created a Landlord Mitigation Fund. This fund was seeded with local Food and Beverage Tax funds and Anti-Poverty Initiative funds provided by the City of Miami Mayor. The Landlord Recruitment & Retention Program and Marketing Campaign is under the umbrella RentConnect which was recently spotlighted by HUD <https://files.hudexchange.info/resources/documents/COVID-19-Homeless-System-Response-Landlord-Engagement-Spotlight-Miami-Dade-County.pdf>. The RentConnect program includes 24/7 landlord support (305-349-RENT). To further enhance housing placement and retention, the Trust requires RRH and PSH programs to have dedicated staffing for housing navigation. Within the Homeless Trust's competitive solicitations are questions focused solely on the provider's ability to identify units. Scoring of proposals is based on the strength of their housing navigation component, and a major shift in RRH and Homeless Prevention funding has occurred as a result with new providers administering RRH programming. Among them, the Trust's private sector partner, Chapman Partnership, a non-profit which administers RRH funds from multiple sources, has both inward and outward facing housing navigators, working with clients and landlords respectively. The Landlord Recruitment and Retention Director regularly convenes navigators across the CoC to share best practices, troubleshoot and brainstorm on new strategies for recruitment. The Homeless Trust's commitment to hiring and training dedicated staff, building landlord peace of mind, establishing and sustaining a risk mitigation fund, setting up a landlord registration and listing database and encouraging continual recruitment has ensured successful exits even in the face of an unprecedented housing crisis in Miami-Dade. In April 2022, Miami led the US in rent hikes during the pandemic with median apartment rents skyrocketing 58%, prompting the County Mayor to declare an unaffordability crisis. To combat this, the Homeless Trust amended its policies to allow PSH/RRH rents to go to a payment standard of 120% of the published FMR and work with PHAs, two of which increased their payment standard to 110% of Fair Market Rent (FMR). The Trust also proposed landlord incentives which are used by Hialeah's PHA to include a \$1000 landlord signing bonus and \$500 for each additional leased unit. Double security deposits are also widely used by the CoC's rental assistance programs. The Homeless Trust has also sought to take advantage of HUD CoC waivers to increase landlord engagement, including the ability to enter into leases less than one year and allowing more than two persons to occupy a bedroom. The Landlord Recruitment and Retention Director also participates and has membership in local organizations that engage landlords, including the Southeast Florida Apartment Association and Miami Realtors Association, and partnered with PHA's on landlord networking events. The Trust has leveraged both paid and unpaid media to promote the RentConnect landlord recruitment program. Local tv stations, both English and Spanish language, have reported on our need for landlords in news stories. Advertisements produced and paid for by the Homeless Trust have run on local tv, in movie theaters and on the jumbotron at professional sporting events. A local tv station also previously partnered with us on a landlord phone bank staffed by CoC personnel and providers, with all day spots encouraging landlords to call us and be part of our RentConnect program. During the pandemic, the CoC used CARES Act ESG to rapidly rehouse persons experiencing homelessness, then worked with EHV provided through ARPA to bridge those clients in place. Lease-up rates are strong, with Miami-Dade, our largest PHA (Miami-Dade), at 71% lease up and our second largest PHA (Hialeah) at 65%. A review of lease up zip codes demonstrates people are housed in areas where the CoC has historically not been able to identify units. **New Practices 1) Paid and Unpaid Advertising:** Television spots have been most successful in generating new landlord leads. Our latest spot, first released in July 2022, can be found here: https://drive.google.com/file/d/1lvkMmQp4wt7nWv11-ahBcKtoQZyXR1_C/view. The Trust's website also has an entire section devoted to landlords and the RentConnect program which includes a listing of benefits and regular blog posts that are promoted and boosted on social media to promote landlord partners and housing

navigators to further outreach. <https://www.homelesstrust.org/homeless-trust/news-and-events/home.page>. In 2022, the Homeless Trust's annual Homeless Awareness Day event which takes place every November will celebrate partnering landlords, property managers and realtors, as part of a continuing recruitment effort. Planned activities including a landlord appreciation and networking breakfast, where landlords will connect with locally elected officials and Homeless Trust leadership and watch a news story that ran on our ABC affiliate regarding the need for landlords. This third-party endorsement will deliver key messages about the important role landlords play in ending homelessness. Additionally, guests will enjoy a "thank you" video featuring all provider CEOs. That video tees-up a panel discussion and Q&A hosted by a veteran journalist who will ask carefully crafted questions of the 1) Homeless Trust Chairman, 2) a formerly homeless man (as seen in the ABC story), and 3) a landlord. The panel exchanges will lead to a robust discussion on how our program is good for business and how the Homeless Trust continues to seek more landlords. The event is designed to create RentConnect ambassadors out of our guests.

2) *Volunteer Refocusing toward Landlord Engagement*: Beginning in April 2022, the Trust began refocusing volunteer non-profit groups, many of whom came to us during the pandemic with various donations (masks, hygiene kits, other supplies), to help further our landlord recruitment efforts. One example is our partnership with several local Rotary clubs. Volunteers have been equipped with landlord lists obtained by the Homeless Trust from area PHA's and are connecting by phone with those landlords, in a project called "Calls of Hope". Volunteers are trained to educate landlords and property managers on the benefits of RentConnect, alert the CoC to new properties with pending vacancies and provide meaningful feedback on how to improve the RentConnect or further incentivize and recruit landlords. The landlord leads generated are shared with our CoC-contracted programs.

3) *Further Centralize Housing Navigation*: The Trust is efforting to further centralize and expand its housing navigation activities to include additional housing locators and a peer support specialist. This additional staffing will target landlords and property managers, affordable housing developers, and investors which have purchased multifamily properties ripe for master leasing opportunities.

4) *Risk Mitigation Fund Expansion*: The Homeless Trust's Landlord Recruitment Program/Risk Mitigation Fund currently offers an incentive of mitigation funds to cover tenant-caused damages. In light of current private rental market conditions, the Trust is seeking to expand landlord incentives and amend policies to include upfront leasing bonuses and holding fees to secure units pending program approval and lease-up, as well as rehab funds to ensure units meet and pass HQS inspections.

5) *New Listing Tool*: The Trust moved away from SocialServe.org listing tool which was not generating real-time leads in the volume we had hoped, and is looking at new technology solutions to house landlord listings exclusive to the CoC and better track the lease-up process.

6) *Increased Focus on Acquisition and Renovation*: The Homeless Trust is determined to not solely rely on private sector landlords for successful outplacement, but also acquire and renovate properties to serve as permanent housing exclusively for the CoC. Four properties have been identified for acquisition, to include a former Assisted Living facility, former federal surplus property and two hotels, all of which are contemplated to create PH/PSH for persons experiencing homelessness. These acquisitions will add 550+ units to the CoC's PH portfolio.

Using Data to Update Landlord Recruitment Strategies: Because our marketing budgets are extremely tight, we typically rely on social media and an occasional public relations push to promote our RentConnect program. Early in the year, we pitched an earned media story to an investigative reporter who did a powerful piece on the need for landlords. That story generated dozens of landlord calls. Clearly, the story struck a chord with viewers. Based on the data we were seeing from this story, we knew we needed to talk w/this audience more often. Our option was an ad buy, as the station had proven it had the audience we needed. We contracted for a limited "trial" buy. We ran around 80 spots, which produced more calls. It also created the greatest website traffic spike we have seen – visits to the Trust's Landlord landing page were up 27% during the weeks the ad ran. Being able track audience interest on this channel using an earned media story was critical to this successful campaign because it validated the audience before we decided to spend. Based on the above, we have revised our landlord recruitment strategy to include paid media and have embarked on another buy with the same channel. By obtaining landlord lists from area PHA's and cold calling those

landlords, as part of a project called “Calls for Hope”, we have gotten invaluable insights into rental assistance programs.

b. Leveraging Healthcare Resources

The CoC has a history of leveraging healthcare resources. Our sister department, Jackson Health Systems is the public hospital for the county. They participate in HMIS and plan discharges from the jail, emergency room and crisis unit through our contracted street outreach teams. They also provide Primary Care and Psychiatry to over 800 people living in two large shelters operated by the Trust’s private sector partner, Chapman Partnership. We work closely with two FQHC’s who participate in HMIS and serve as an access point for unsheltered persons to connect with CoC resources. During the local competition for the Special NOFO the CoC received in excess of \$8.5 million in healthcare and treatment leveraging which exceeds 50% of the value of the Permanent Housing resources sought in our Collaborative Application to HUD. Three support letters came from the FQHC receiving HHS funding to serve the homeless, for the provision of Primary Care services connected to two PSH grants and one joint component TH:RRH project. Two support letters came from a licensed and accredited Substance Abuse provider under contract with the state’s Managing Entity for Substance Abuse and Mental Health services for the provision of substance abuse treatment to all program participants connected with two PSH projects providing support services to unsheltered persons assigned a Stability Voucher.

c. CoCs Current Strategy to Identify, Shelter, and House Individuals and Families Experiencing Unsheltered Homelessness.

1) Current Street Outreach Strategy

Coordination Street outreach (SO) teams are part of the CoC’s Coordinated Entry System and utilize HMIS to document encounters and engagements, make referrals and document services and placements. Teams coordinate daily to serve unsheltered persons encountered. The Homeless Trust convenes weekly Outreach Coordination Calls with teams to staff cases, care coordinate and share housing options for unsheltered persons with high needs. City of Miami SO canvases the entire geography of Miami-Dade except Miami Beach. They operate a helpline and respond to calls for help from unsheltered persons. They use HMIS to document phone encounters. Miami Beach does the same for its geography. Miami’s SO is also contracted by the CoC for discharge planning and coordinates referrals from institutions that discharge into homelessness, including jail and area hospitals. Specialized SO teams also canvas the entire geographic area of Miami-Dade, and partner with municipal teams as needed. Specialized teams include SAMHSA’s PATH program which assists people with serious mental illness (SMI) experiencing homelessness, including those being discharged from crisis units. Healthcare for the Homeless grantee Camillus Health Concern, an FQHC, provides medical outreach in partnership with the CoC, offering primary care on the streets. Lotus House specializes in outreach to homeless women and transgender individuals. Lazarus conducts on-the-street health assessments, prescribes, dispenses medications and counsels hard to serve unsheltered persons. New Hope is an HIV and substance treatment provider, as is Camillus House, and both have access to treatment beds funded through the Substance Abuse and Mental Health Managing Entity. Hermanos de la Calle serves persons with co-occurring behavioral health issues, and has expertise in engaging and serving unsheltered migrant individuals and families. Hermanos helps employ clients and charges rent to place individuals in shared housing not funded through the CoC. They offer relocation assistance for persons who have other primary supports in different counties/states. SO teams also respond to requests from police and fire rescue, parks, transit, constituents, building associations, Downtown Development Authority, and others. Fixed SO Access Points are also in place for unsheltered persons at Camillus Day Center, Downtown Library Branch, Government Center, Miami Beach Drop-In Center, Miami Rescue Mission and the Missionaries of Charity of Mother Teresa; vets can also go to the Health Care for Homeless Veteran’s office, the Advocate Program and VA Hospital in Miami; minor youth can

engage with Miami Bridge and youth 18-24 can connect with Pridelines, Lotus House, Miami-Dade Public Schools, Educate Tomorrow and former foster care youth can seek assistance from Citrus Family Care; victims of human trafficking, domestic violence, dating violence, sexual assault, and stalking may present to Miami-Dade County's Domestic Violence Awareness intervention services program, the Coordinated Victims Assistance Center, or Lotus House and Camillus House for crisis housing, safety planning and legal services. The CoC also engages street feeders and religious groups to use HMIS and serve as access points. Helpline and access point info is on the CoC website and kiosks located downtown. Homeless Helpline cards distributed widely to residents, businesses, and clients. **Frequency** SO is provided weekdays between 7 a.m. – 8 p.m. with evening coverage performed Tuesday, Thursday, and every other Friday. After hours targeted outreach events with multi-disciplinary teams are scheduled regularly as needed. **Help Exit Sheltered/Unsheltered** All SO teams use HMIS, serve as access points and make referrals to emergency shelter, transitional housing and treatment, Safe Havens and rental assistance programs following the CoC Orders of Priority for referral. Teams have vehicles, including vans with a wheelchair lift, to transport clients to shelter, treatment or appointments for identification or meetings with landlords. In July 2022, we updated the Coordinated Entry process to ensure each outreach teams had access to crisis housing so that they can continue case management services until their clients are housed. **Engagement Strategies/Vulnerabilities/Culturally Competent** Rapport is created with unsheltered persons through ongoing engagement and offers of wound care, treatment, coffee, meals, clothing, shoes, and Protected Personal Equipment. All teams offer a no-wrong-door engagement and when appropriate do a warm handoff to other street outreach teams that can more appropriately serve the unsheltered person engaged. Outreach teams complete the VI-SPDAT along with the universal data assessment questions in HMIS and represent their clients in weekly case staffing meetings with the CoC to identify housing options. SO teams, including the helpline, are culturally competent and offer trilingual services (English, Spanish, Creole). The CoC has a Memorandum of Understanding (MOU) with the courts, hospitals and crisis units, Public Child Welfare Agency, and the jail with dedicated SO to prevent discharges into unsheltered homelessness and has office space at the main courthouse and jail. **Permanent Housing Connections** Clients who are highly vulnerable are prioritized for rental assistance and can bridge to non-time limited PH. PSH clients can move-on to other housing set asides if they no longer need intensive support services. Clients are not required to go to crisis housing to move to PH. **Lived Experience** Teams include persons with lived experience of unsheltered homelessness, and specialized programs embed peer specialists. **Evidence Based Practices** Teams receive regular training in Crisis Intervention, Motivational Interviewing, Pre-Critical Time Intervention and Trauma-Informed Care. In 2021, Miami Lighthouse offered a CoC-wide orientation and mobility training for serving blind persons.

2) Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for Individuals and Families Experiencing Unsheltered Homelessness.

Five separate Street Outreach (SO) teams are provided dedicated emergency shelter (ES) beds (N= 1375), families can be placed in hotel when ES is not available, and all teams also have access to 95 non-congregate shelter (NCS) beds for senior citizens ages 65 and older. Specialized SO teams provide continuous case management using pre-CTI to vulnerable, unsheltered persons, develop a housing plan, and work collaboratively with ES case management and Housing Navigation to quickly rehouse their clients. ES programs are monitored on adherence the CoC's Housing First framework, Standards of Care and Equal Access policies. ES intake staff is flexible and poised to receive referrals day or night. Access to ES is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions; reasonable accommodations are made whenever possible; housing and service goals are tenant driven; substance use in and of itself is not considered a reason for discharge and every effort is made to provide clients the opportunity to transfer if requested or necessary to avoid a return to unsheltered homelessness. Two shelters have kennels and accommodate pets. All ES is culturally competent with staff and printed materials in English, Spanish and Creole. Compared to five years

ago (2022 & 2018 PIT) our system has added 151 ES beds, a net increase of 61 beds considering we lost 90 beds in order to implement new social distancing and NCS requirements. In October of this year, we added 59 more ES beds. Comparing the 2022 & 2018 PIT we have had a 6% decrease in unsheltered persons and a 7% decrease in all persons experiencing homelessness. This year we had a 14% increase in the number of first time homeless. Our average length of time (LOT) persons remained in ES, SH and TH increased by only 1 night while the median LOT was reduced by 12 nights. Returns to homelessness was 24% systemwide, down 1% from the previous year. Returns for SO, TH and PH were between 17-20%. Exits to permanent destinations directly from SO increased 53% compared to last year. The change in PH exits to permanent housing destinations or retention of permanent housing remained flat at 99%. We exited 2328 people into permanent destinations and used ESG-CV to place an additional 446 people in RRH. According to Stella P, families exited to permanent destinations 76% of the time compared to adult only households who exited to permanent destinations 31% of the time. With the help of HUD TA, people with lived experiences and other stakeholders, the CoC's Performance Evaluation Committee (PEC) established a framework for improving exits to PH for adult only households which emphasized marketing to landlords; enhancing specialized support services; reviewing prioritization strategy; and reforming the front door. Through that process we learned we needed to amend Orders of Priority for referral to Permanent Housing to include factors such as disabilities, age (emphasizing youth and seniors), households with children, highly vulnerable households, people fleeing DV and persons with the longest length of time homeless; we needed to solicit for SO and ES providers to enhance support services such as hiring people with lived experiences or certified Peer Specialists to engage unsheltered persons, utilizing pre-Critical Time Intervention (CTI) and hiring staff who were focused on Housing Navigation. Following the PEC TA, we issued a competitive solicitation for comprehensive support services; implemented pre-CCTI, a strategy that reduces caseloads and offers each program participant the adequate level of services needed to exit to permanent destinations; enhanced access points by adding capacity of pre-CTI trained case managers who are housing focused; and marketed to landlords through tv and social media ads. In implementing strategies to provide immediate access to low-barrier shelter, we learned that we had to enhance Street Outreach to provide case management designed to quickly re-house persons who refuse shelter. We have also trained contracted shelters on Evidenced Based Practices such as Housing First, CTI and Trauma Informed Care to recognize the hardships of the persons they are serving, make intake a more welcoming and streamlined process, provide the adequate level of support and promote client retention and engagement in housing plans.

3) Current Strategy to Provide Immediate Access to Low Barrier Permanent Housing for Individuals and Families Experiencing Unsheltered Homelessness

Street Outreach (SO) teams and Access Points, Emergency Shelter (ES) and Transitional Housing (TH) providers use HMIS to conduct a centralized Coordinated Entry assessment (HMIS universal data elements and VI-SPDAT). Staff communicates and material are printed in English, Spanish and Creole. Additional translation services are available through the county, if needed. The CoC in turn produces a rank order by name list of persons in our system. Upon receiving CARES Act resources in 2020, we revised the ranking points to ensure those most at risk of severe illness in a pandemic were prioritized. We assigned points to seniors 65 or older; and people with medical vulnerabilities. We kept points for people with homeless lengths of time in excess of 300 days; victims of human trafficking, domestic violence, dating violence, sexual assault, and stalking; people with other system involvement (jail, foster care, crisis); and people with VI-SPDAT, TAY or family instruments recommending housing intervention. People with the highest rank were, and still are, prioritized for housing (RRH, PSH and other homeless preferences). Households in medium-term rental assistance bridge to EHV and PSH subsidies when needed. Because we are prioritizing the most vulnerable for ESG-CV RRH, we learned that many households needed a long-term solution. We have also aggressively used a Moving On strategy with HCV, Mainstream Vouchers and OPH to move households who no longer need the robust services offered in PSH to other affordable housing, which has freed up PSH for those who

need more intensive services. The by name list (BNL) has filters for families, chronic homeless, youth and veterans to help us match persons to units with preferences. Additional BNL filters count the number of days between referral and move-in date which is utilized during weekly case staffing meetings to review issues with cases referred to PH. For RRH, we have developed a report that tells us which households are most likely to return to homelessness (household income <120% of rent) and use this data to bridge households to long-term subsidies. Using data, we review the referral to PH process no less than annually with people with lived experiences and stakeholders to ensure equity, analyze trends and ensure we prioritize persons with greatest need. We have aggressively sought increases in PH inventory through NOFO bonus and reallocation; HCV, PBV, Mainstream, EHV, FUP, FYI, Public Housing, tax credit ELI units and, Multifamily Homeless Preference. We have acquired properties, leveraged additional housing opportunities, and funded new Permanent Housing programs for unsheltered persons. As part of this Special NOFO the CoC is requesting 54 units of PSH, 20 units of RRH, and including three PSH projects to support 150 Stability Vouchers; we are leveraging 50% of those units with 85 units of PBV from Public Housing and Community Development, the Housing Authority for Miami-Dade County and 95 clustered apartments made available through HOME ARPA and general revenue provided by Miami-Dade County. The Trust has secured HOME ARP and local funding to add at least 550 units of housing dedicated to persons experiencing homelessness. Together with other resources leveraged we anticipate 819 units coming online between September 1, 2022, and January 1, 2025. This includes acquisition of a 67 room/120 bed former Assisted Living Facility for senior citizens 65 and older; and cottages for 31 clients where specialized SMI/SUD outreach teams can quickly refer the hardest to serve directly from the streets to housing. Clients are provided basic living skills, stabilized, and moved on to other PH. Three additional acquisitions have been identified for PH acquisition/rehab, including hotel to housing conversions. PH programs are monitored on adherence the CoC's Housing First framework and RRH/PSH Standards of Care. Access to PH is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions; housing and service goals are tenant driven; substance use in and of itself is not a reason for eviction discharge and every effort is made to provide clients the opportunity to transfer between PSH programs to avoid a return to homelessness. We enhanced housing navigation for SO, ES and PH; an MOU with CareerSource facilitates job training and placement; we use of SOAR to expedite entitlements. We provide training, passed standards on and review compliance with Housing First and low barrier access. We require new respondents to provide minimum support services (at least \$4,000 in RRH & \$5,000 in PSH per household annually). Our competitive solicitations look at rate of exits to PH (PSH), returns, income growth and retention allowing us to select providers with the best performance. The CoC adopted Rental Assistance standards that outline a process workflow from referral to placement to set targets for improvement and promote housing retention. Providers have started to tie employee evaluations to SyS PM. We fund a CoC position which trains/supports housing navigators systemwide, maintains a housing and landlord directory and manages the landlord mitigation fund. We provide training on and have adopted restorative justice grievance standards to promote housing retention and fair housing standards. This year returns to homelessness were down 1% systemwide compared to the previous year. Returns for SO, TH and PH were only between 17-20%. Exits to permanent destinations directly from SO increased 53% compared to last year. Ninety-nine percent (99%) of persons in PH exit to other permanent housing destinations or retain current permanent housing. This year we exited 2328 people into permanent destinations and used ESG-CV to place an additional 446 people in RRH. According to Stella P, families exited to permanent destinations 76% of the time compared to adult only households who exited to permanent destinations 31% of the time.

d. Updating the CoCs Strategy to Identify, Shelter, and House Individuals Experiencing Unsheltered Homelessness with Data and Performance.

The CoC uses data tools including HMIS progress reports, Stella P and a customized dashboard to directly connect to HMIS data. The dashboard allows us to look at real-time system and project level performance with

key measures like number of persons experiencing unsheltered homelessness, length of time homeless, rates of exits to permanent destinations, employment and other income growth, and returns. It also allows us to analyze the By Name List in preparation for weekly case conferencing using Community Solution's Built for Zero functional zero metrics. With guidance from HUD TA with CSH this past winter and early spring, our Performance Evaluation Committee (PEC) utilized many of these data sources, and had several meetings with stakeholders, including persons with lived experience, service providers and subject matter experts to address system performance. The data pointed to the need for our system to improve resources to Adult Only populations experiencing Category 1 of the homeless definition, including youth and seniors, whose outcomes were poor compared to households with children and people meeting Category 2-4 of the homeless definition. The group identified two dozen strategies and later ranked them in order of difficulty to implement and likelihood of impact. At the tail end of the process they consolidated some strategies and recommended four targeted strategies (1) scale up marketing to landlords and housing navigation; (2) enhance specialized support services to include behavioral health support services offered by SO, ES, TH and PH; increase use of persons with lived experience and hire Certified Peer Specialists; (3) review prioritization strategy to ensure we are prioritizing those most likely to succeed with RRH and those who are most vulnerable for PSH and other PH opportunities coupled with CoC funded standalone support services; (4) and, reform the front door by enhancing pre-CTI case management for CE, SO, access points and the helpline. Following the PEC system analysis, we established a lived experience working group and issued a competitive solicitation that procured Specialized SO, enhanced the helpline, offered new low barrier ES and PSH, included bonus points for the use of Peer Counseling, and established threshold criteria for the use of pre-CTI. The CoC would still like to implement additional enhancements in street outreach such as housing navigation that meets the client where they are, assesses their housing needs and preferences, uses people with lived experiences, role plays the landlord/tenant meeting, transports unsheltered persons to obtain required documents for PH and look at housing leads, and offer clients who reject the first housing lead at least two more leads from which to choose. All SO uses HMIS and is expected to maintain data quality on universal data elements, completion of the VI-SPDAT and the Coordinated Entry and Local Questions Assessment developed by the CoC. The CoC has offered HMIS access to Managed Care Organizations to better triage unsheltered persons who are high utilizers of health care services and is working increase these partnerships in anticipation of an expanded Florida Medicaid Reform Pilot. The CoC is actively engaged with the 11th Judicial Circuit and Dr. Tim Simpatico, Director Psychiatry at the University of Vermont, to build a data warehouse/resource tool for the courts and the jail that interfaces with the CoC's HMIS. The CoC also uses a constituent services tracker brought to our attention by business owners and residents to engage unsheltered persons. The CoC and SO teams enjoy longstanding relationships with police, parks, local and state transit agencies and solid waste and work collaboratively to engage unsheltered persons within all 35 Miami-Dade County municipalities. These agencies also support the biannual census count. The data elements we will use to evaluate SO include number of persons served, number of contacts, days between engagement date and housing move-in date, number of exits to permanent destinations and the rate of returns between 0-6 months. The CoC's compliance review of SO will take place no less than annually and review HMIS data quality and implementation of pre-CTI and Housing First. The CoC will also encourage and provide additional training on the use of other evidenced based practices such as Motivational Interviewing and Trauma Informed Care. SO teams are the primary access point in the CoC's coordinated entry system using HMIS to collect Universal Data Elements and perform vulnerability assessments used to rank persons on the CoC By Name List (BNL) by priority for referral to permanent housing. Specialized access points serving youth and persons fleeing DV also complete HMIS or comparable database Universal Data Elements and perform vulnerability or lethality assessments contributing to the system BNL, and refer to dedicated beds for youth, persons fleeing DV or Human Trafficking. All SO and specialized access points have dedicated low barrier ES and Non-Congregate Shelter (NCS) beds assigned. These CE projects have developed Support Service Only HMIS projects, outside of the CES and SO projects to provide continuous case management to their clients, who sometimes move between shelters and treatment or return to places not meant for human habitation, until they move into permanent housing and achieve

housing stability. This is anticipated to reduce length of time homeless and more rapidly connect unsheltered persons to housing. The two SO teams run by the City of Miami and Miami Beach incorporate new partners like the City of Miami and Miami Beach Neighborhood Resource Officers (NRO) trained in Crisis Intervention and working with unsheltered persons and Downtown Development Authority (DDA). The City of Miami's NROs have dedicated ES beds and transport unsheltered persons to shelter; while the City of Miami Beach's NROs use the Marchman Act to obtain involuntary treatment for unsheltered persons who are substance abuse dependence is preventing them from making decisions about their wellbeing. The DDA funds street ambassadors trained to engage unsheltered persons and connect them to resources. Two specialized SO teams leverage healthcare resources. One SO team specializes in Substance Abuse counseling and has access to Out-Patient/Medicated Assisted Treatment, In-Patient Detox, TH and Residential Substance Abuse Treatment. Another SO team is affiliated with a FQHC and provides primary care, psychiatry and counseling as part of their street outreach. They also hire people with lived experiences through a grant awarded by the Downtown Development Authority. Through the Special NOFO we want to provide enhanced SO services that promote peer-to-peer engagement and housing navigation. By adding peer specialists and housing navigators to SO teams we are empowering them to transport unsheltered persons, whom they have already engaged to meetings with landlords; to role-play the land-lord tenant interview; to educate on tenant rights and responsibilities, and basic housing maintenance; to connect them to support groups and resources utilized by the very peers charged with helping them; to rapidly house unsheltered persons.

e. Identify and Prioritize Households Experiencing or with Histories of Unsheltered Homelessness.

Strategy to Reduce The CoC will focus all services rendered by SO, joint component TH-RRH and PH through the Special NOFO be provided to unsheltered persons. We will provide extensive training to sub-grantees on evidenced based approaches, as well as hold separate By Name List meetings to focus resources for unsheltered persons. Contracts Officers reviewing reimbursement requests will check monthly HMIS APRs to ensure data quality and that all persons served are coming from places not meant for human habitation. Compliance Officers will review programs no less than annually to ensure all persons served are coming from places not meant for human habitation prior to their engagement. The CoC will utilize the customized dashboard, mirrored after the Built for Zero model to review monthly progress with reducing unsheltered homelessness. The CoC, under contract with two City run SO teams and three specialized SO teams will engage unsheltered persons and utilize HMIS to collect universal data elements, the VI-SPDAT and custom Coordinated Entry and Local Questions assessment. Unsheltered persons will be prioritized for the PBV units leveraged from the Miami-Dade Housing Authority, Stability Vouchers and HOME ARP units providing over 550 units of housing for unsheltered persons, which we anticipate will have a 40-50% reduction in the unsheltered population for Miami-Dade County. **Program Eligibility and CE Process** For the purposes of this initiative, we are amending the CES to ensure (1) persons assisted are experiencing unsheltered homelessness prior to engagement, (2) the prioritization points used to rank persons on the by name list will consider persons 18-24 or 65 and older, persons with medical vulnerabilities including HIV/AIDS and Serious Mental Illness, persons fleeing domestic violence, persons who have been homeless for 300 days or longer, persons with previous or current crisis system involvement (foster care, jail/prison, crisis), persons with a VI-SPDAT score of 4 or more for RRH and OPH, and disabled persons with VI-SPDAT of 8 or more for PSH. The data collected in HMIS will be utilized to make referrals to RRH, PSH and Other Permanent Housing (OPH) set asides for persons experiencing homelessness. Referrals are centralized and made by the CoC Housing Specialist via HMIS. The CoC CES and referral process is reviewed regularly with people with lived experiences and stakeholders to ensure equity, analyze national trends and prioritize persons with the greatest need. **Using Street Outreach** SO teams will have access to ES/TH beds to place unsheltered persons who chose shelter, but also provide robust follow up services to sheltered and unsheltered persons designed to address their needs, obtain required documents for PH, facilitate housing navigation/mediation and place unsheltered persons in permanent destinations. SO teams have robust support services to address primary care and behavioral health issues that arise during their engagement of unsheltered persons. We utilize weekly case

conferencing to present challenging cases and connect them to the necessary services. **Additional Steps** We conduct weekly by name list meetings with stakeholders to review referrals, hear case presentations of persons who are appealing their ranking and discuss cases whose PH referral was made more than 30 days prior. The CoC has effectively sought increased housing through NOFO bonus and reallocation, and PHA/tax credit/Multifamily Homeless Preference set asides. We have enhanced housing navigation and increased job development pathways. We are utilizing HOME and ARPA dollars to acquire two new PH programs with an excess of 200 units of housing. We have established a Move-On strategy for households who no longer require extensive support services offered in PSH and persons in RRH that need additional support to prevent returns. To prevent returns, the CoC is leading grievance hearings, issuing orders of stay and laterally transferring households between PH programs when needs are not being met by a particular project. We provide training on and passed standards on low barrier access along with requiring new NOFO respondents to provide minimum, comprehensive support services utilizing evidenced based practices. Solicitations require providers from all components to incorporate Housing First, Housing Navigation and Critical Time Intervention (CTI). We train all components to use SOAR. We incorporate supportive employment through an MOU with CareerSource and Miami Job Corps. Our competitive solicitations look at rate of exits to PH, retention (PSH) and returns to homelessness, and we select new providers with the best performance. The CoC adopted new TBRA policies that outline a process workflow from referral to placement to set targets for improvement and promote housing retention. Providers have started to tie employee evaluations to SyS PM. We have used local dollars to fund a position which trains and supports housing navigators' systemwide, created online housing directory and manage a landlord mitigation fund.

f. Involving Individuals with Lived Experience of Homelessness in Decision Making.

Since its inception 27 years ago, the Homeless Trust, lead agency for Miami-Dade's CoC has included, by Ordinance, people with lived experiencing on its Board, Committees and Working Groups, including in leadership positions such as the Co-Chairs of our Housing and Services Development Committee. Contracted providers of SO, ES, and PH have also for many years included persons with lived experiencing in their ranks. For example, Chapman Partnership, our private sector partner who operates ES, SSO, RRH and EHV, has 9% of its workforce with lived experience. Another ES provide, Lotus House, has 32% of total staff with lived experience. Another partner, Camillus House and Health Concern, has long had a Consumer Advisory Board (CAB) consisting of persons with lived experiencing. The Homeless/Formerly Homeless Forum has designated seats on the CoC Board and hosts in partnership with the CoC our community's Homeless Memorial Day event. Our YAB, the Youth Voice Action Council, is entirely young people with lived experience and the Homeless Trust and Miami Homes for All, the collective impact lead for the CoC's youth work (i.e. "The Housing Our Miami-Dade Youth Collective"), are exploring a partnership with Americorps to both pay and create a continuous program for new youth with lived experience to rotate onto the YAB as members age out. To further embed persons with lived experience, the CoC earlier in the year created a Lived Experience Working Group exclusively made up of persons experiencing homelessness which were recruited from the streets, a homeless drop-in center and ES programs. The formation of this group was the result of our Performance Evaluation Committee (PEC) where a large group of stakeholders, in partnership with HUD TA, came together to develop strategies to improve System Performance. Among those invited to provide feedback and recommendations as part of the PEC was David Peery, a formerly homeless attorney and advocate for people experiencing homelessness. Mr. Peery, also an Emeritus Member of the Camillus House and Health CAB, provided a framework for the CoC to recruit and empower people with lived experiences to connect with the CoC, help shape policy and funding decisions, and design programs that address the needs of unsheltered persons. Beginning in July, CoC leadership held weekly sessions with a catered lunch with 18 volunteers, all with lived experiences and diverse representation of race, gender, sexual orientation and gender identity. Mr. Peery also urged us to engage people who have been recently housed, who may not just be thinking of their immediate needs to be part of the working group. We engaged three additional members who

are recently homeless and now in permanent housing. We also had one volunteer who prior to joining the working group started a non-profit dedicated to housing and providing support services to people exiting jail/prison who are homeless. He himself experienced homelessness after serving time in prison. The working group has established by-laws, received an overview of the CoC, commented on policies and procedures, is developing a monthly report for the CoC Board on recommendations for the CoC's approach to serving unsheltered persons, and reviewed the application and proposed projects in the 2022 CoC Program Competition and Supplemental NOFO. Working group recommendations carry with a unanimous vote or a 2/3 decision, and recommendations can then go directly to the CoC Board. By-laws promote onboarding of new members at the suggestion of working group members, the CoC or provider staff and when persons with lived experience attend three consecutive meetings. The CoC also seeks feedback from consumers year-round through customer satisfaction surveys and has taken a deeper dive on persons exiting ES programs without indicating why they exited and where. We learned that many people self-resolved and exited successfully. As a result, we determined that better connections need to be made with case managers upon ES entry so that households understand our commitment to ensuring their exit and successful retention. The CoC's local competitive solicitations now provide project points for how well providers engage program participants and bonus points for the utilization of peer specialists. Additionally, CoC Board Meetings, which are publicly noticed, also begin with Reasonable Opportunity to be Heard, where persons, including those with lived experience are invited to speak about issues involving the CoC.

g. Supporting Underserved Communities and Supporting Equitable Community Development.

Enhanced street outreach, twice yearly homeless censuses and data from HMIS, Stella P and the HIC, have shown that single adult males, senior citizens, and newly entering migrants are not being served at the same rate they are experiencing homelessness. Single adult men, many of whom have substance abuse and mental health disorders, make up 75% of our unsheltered population. To better serve single adult men, the CoC is seeking to remove a deed restriction from a federal parcel and renovate an existing building which will allow for PH placement for at least 180 single adult males with complex issues. Seniors 55+ experiencing homelessness account for more than 1 in 3 of all persons entering the CoC. The CoC used a combination of HOME-ARP and a special appropriation from the State of Florida to purchase a former Assisted Living Facility to serve as permanent housing providing 67 rooms/120 beds to persons experiencing homelessness 65 and over. Clients are placed directly into the facility from the streets and bridge to other CoC housing resources, when possible. Additional HOME-ARPA commitments from three Participating Jurisdictions, together with other county and municipal funding, is facilitating to two hotel to housing conversions dedicated to persons experiencing homelessness. The 4 projects described above will add no fewer than 500 units of Permanent Supportive Housing to the CoC. Funding commitments are as follows:

- \$1.75 million State of Florida Department of Children and Families
- \$5 million in HOME ARPA committed by Miami-Dade County
- \$20 million in local infrastructure funding committed by Miami-Dade County
- \$15 million committed by City of Miami, which includes \$12.8M HOME-ARPA
- \$30,000 in recurring revenue from the City of North Miami Beach
- At least \$1 million commitment from the City of Miami Beach
- Miami Foundation: \$127,430 (including \$40K for Mia Casa)

Renovations are also nearly complete on the Miami Center for Mental Health and Recovery which will provide a one-stop array of supports, including housing, for up to 200 chronically homeless persons with severe and persistent mental illness. This capital redevelopment project is overseen by the managing entity for substance abuse and mental health in Miami-Dade, a close CoC partner.

The CoC has also repurposed local and state funding to enhance case management for those on the streets as well as those seeking assistance through the helpline and access points. We are moving to centralize and further expand housing navigation and increase preferences and set asides with all four of our area PHA's. This work is being informed by our Lived Experience Working Group and Racial Disparity Working group because we know that within the homeless sub-populations described above, there are a disproportionate number of people of color. Local racial disparity assessments show 18 percent of the Miami-Dade population is black, yet they comprise 57 percent of persons experiencing homelessness. Successful exits to PH for blacks is 58%. Hispanics make up 71% of the population (90% are white) and represent 11% of persons experiencing homelessness with an exit rate to PH of 13%. Miami-Dade County has also been tremendously impacted by migrant inflow crossing the Mexican border. While the CoC does not specifically track migrant entrants or undocumented persons, we know that some ES programs have seen the number of undocumented persons in shelter double in recent months. Newly unsheltered persons include persons from Venezuela, Colombia, Nicaragua, Haiti, Cuba, Brazil, Peru and the Ukraine, among others. These new entrants include single adults, unaccompanied youth and families with minor children. Many of them are directed here by authorities because they are Spanish-speaking, yet they have no resources or supports in Miami-Dade. The Trust funds a specialized outreach team with expertise in identifying migrant resources and supports, including housing, legal services, employment, food, clothing, medical care, schooling, and has partnered with the county's new Office of New Americans to provide support to this homeless sub-population. The CoC also continues to engage the Miccosukee Indian Tribe in an effort to understand the need for new projects within the reservation as part of our community-wide commitment to ending homelessness.

The current strategies to serve populations experiencing unsheltered homelessness are designed to address system gaps and address underserved persons. These include (1) using HOME ARP combined with local funding to operate a PSH program that can assist undocumented persons; (2) using HOME ARP funding to secure a property within the geographic boundaries sex offenders can reside; (3) embedding SO Peer Specialists to promote engagement of hard to serve, unsheltered persons that have historically refused all services; (4) embedding SO Housing Navigation to connect unsheltered persons that refuse shelter and site-based services, to housing; (5) creating standards for Housing Navigation that promote assessment client choice, transportation to landlord/tenant meetings, coaching for the landlord/tenant interview, teaching tenant rights and responsibilities and life skills to promote housing stability and; (6) developing SO standards for the provision of continuous case management using a Pre-CTI approach for persons that may move between shelters, the streets, hospital, jail, crisis and treatment to avoid losing the progress they have made towards their housing applications and prevent the housing provider from closing their case for lack of follow up.

To recap, Miami-Dade's CoC has been aggressively expanding the front door of the CoC's CE with outreach teams, specialized outreach teams, new access points, non-traditional HMIS partners (faith-based groups, street feeders, business owners and managed care), as well as creating more responsive Homeless Helpline with enhanced case management. Teams are coordinated and utilizing HMIS workflow with the CoC monitoring of data quality, including SO collection of data on service areas/zip codes. The engagement rate is 75% while encounters have increase dramatically from 1492 in 2020 to 3531 in 2022, which include more remote and rural service areas and geographic areas with higher concentrations of underrepresented groups. We have developed real-time System Performance dashboards, worked to collaborate on data sharing with the courts and healthcare organizations, worked to embed peer specialists in programming and ensured Pre-CTI and CTI practices are being used. The CoC is also coordinating with the Managing Entity for Substance Abuse and Mental Health, which is adding four additional state-funded Mobile Response Teams to bring the total number of crisis teams to 5. At the same time, the CoC is working aggressively to scale up permanent housing resources for specialized populations (seniors, single adults) through acquisition and rehab, and set asides and preference with PHA's and affordable housing developers, and centralized and enhanced housing

navigation/landlord marketing, with behavioral health supports embedded in all housing added to the development pipeline. The Homeless Trust has worked with its private sector partner to create and expand a Social Enterprise Academy offering short-term (no more than 15 weeks), high quality training in in-demand industries with low worker supply and paying a living wage. Apprenticeships currently include Construction, Healthcare (Certified Nursing Assistant and Phlebotomy) and Information Technology. The CoC also amended Homeless Prevention prioritization at the start of COVID, to provide prioritization for persons at or below 30% AMI, with prior evictions or prior episodes of homelessness, fleeing DV, underlying health conditions, large rent/utility arrears or other large sums needing to be paid. Also, proactively mailed Help/Resource cards to all households with court filed evictions to triage cases at risk, and established emergency placement procedures with sheriff's office for vulnerable households being served writs of possession. All prioritization strategies are continually in review to meet needs of those currently experiencing homelessness. All of this is being done through a racial equity lens with technical assistance from Racial Equity Partners; new strategies recommended by our Performance Evaluation Committee; and input from our Lived Experience Working Group. The Homeless Trust, an agency of Miami-Dade County, has been further complemented by the administration and elected officials who in the past year have created an Office of Housing Advocacy, approved a Tenants Bill of Rights, embraced HUD's House America initiative, and emphasized Equity as one of the 4"E's" of the county with the goal of taking on injustices and dismantling barriers to opportunity.