

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

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

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: 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

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

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

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	No	Yes
29.	State Domestic Violence Coalition	Yes	No	No
30.	State Sexual Assault Coalition	Yes	No	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	11th Judicial Circuit	Yes	Yes	Yes
35.	Health Management Organizations	Yes	No	Yes

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	

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

(limit 2,500 characters)

1. 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 who include Homeless Providers' Forum; advocacy agencies; Lived Experience committees; School Superintendent; Dept. of Children and Families; Housing Chair, County Commission; 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 & committee seats to people with lived experience of homelessness that are representative of the persons we serve. The 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, LGBTQ, DV, disability advocates/jurisdictions, discharging institutions & others.

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

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

(limit 2,500 characters)

1. CoC staff attend meetings, made presentations & solicit online/in-person feedback from stakeholders. Publicly noticed meetings begin w/public comment period. Groups that intersect w/homelessness are often invited to present to the CoC & provide recommendations. Policies are posted online for public comment & discussed w/people w/lived experiences & other stakeholders ahead of adoption. Client satisfaction surveys are collected year-round & surveys are reviewed quarterly. Listening sessions are held w/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 w/homelessness. For the past 6 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 w/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. As part of the county the CoC considers persons with disabilities by offering accessible spaces for meetings, auxiliary aides, and we publish materials on our website using World Wide Web Consortium’s Web Content Accessibility Guidelines 2.1, Level AA. We also monitor subrecipients to ensure they are accessible to persons with disabilities. 4. People with lived experiences suggested we needed greater access to shelter for unsheltered persons engaged by SO teams. We solicited for additional ES beds (bought every bed available) and revisited the SO workflow to ensure more beds to teams working with the most vulnerable unsheltered persons. Lived experience is tasking us with developing programing for returning citizens. We met with federal agencies (including but not limited to HHS, USICH), and are planning on connecting with DOJ to learn more about how we can leverage funding for returning citizens.

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

(limit 2,500 characters)

1. The collaborative application for the NOFO is advertised in 3 languages in 3 major publications (on 5/1/23), posted on our website (on 5/25/23) & sent via several mass email (on 5/25/23). The CoC considers all applications received. Applications are submitted electronically. A Selection Committee appointed by the Mayor rates, ranks and recommends funding to respondents of our local solicitation, & those applications are submitted to HUD. All respondents receive electronic communication including them or rejecting them from of collaborative application to HUD, & they may appeal to our Board. 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. This year we were successful in engaging one new applicant that was not previously awarded CoC funds and recommending funding to their application. 2. 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 5/31/23. We posted written responses to questions on our website and emailed them to respondents on 6/20/23. Proposals were submitted in writing according to instructions outlined in the RFA. 3. 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 7/17/23 & 8/23/23. The CoC announced who would be included in the CA on 8/23/23 via mass email, targeted emails to respondents and on our website. The Board voted on recommendations on 8/11/23 & 9/8/23. 4. 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

1C. Coordination and Engagement

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC's geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	No
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/SAMH Managing Entity	Yes
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

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

(limit 2,500 characters)

1. The CoC & subrecipient of state ESG & entitlement ESG, collaborated with all local ESG recipients (Miami-Dade, Miami & Hialeah) and the state for the allocation of ESG 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 the City of Miami to help them utilize all ESG funding. 2. We performed compliance monitoring 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 consolidated 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 with all 4 PHAs which led to leveraging of State Housing Initiative Partnership Program (SHIP) funds for rental assistance with entitlement jurisdictions. 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 funding directly.

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

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

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

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

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

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

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

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

(limit 2,500 characters)

CoC has MOU with Miami-Dade Public Schools (MDCPS) the local education agency, 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 homelessness 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. Per ordinance, Miami-Dade School Superintendent sits on CoC Board. 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.

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

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

(limit 2,500 characters)

The 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. CAHSD a sister county department to the CoC 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 a nonprofit organization dedicated to providing school readiness to access day care and educational resources for pre-school aged children.

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

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

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

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

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

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

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

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

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

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

(limit 2,500 characters)

1. The CoC collaborates with its sister Miami-Dade County department: Community Action and Human Services Dept. (CAHSD), the local victim service provider, and its partners, to provide shelter, transitional housing, permanent housing and legal services to survivors of domestic violence and victims of human/sex trafficking. CAHSD has a seat on the CoC’s Housing and Services Development Committee and CoC Subcommittee. CoC Subcommittee conducts annual gaps and needs assessment, including strategies and implementation measures within Community Plan to End Homelessness: Priority Home. In August 2023, VAWA policies were reviewed with feedback from DV providers, victim advocates, people with lived experience and stakeholders incorporated. CES, RRH, PSH and OPH prioritization policies are also regularly reviewed and updated with victim service provider input. All CoC meetings are publicly noticed and all policies are posted online for public comment and input prior to adoption by the CoC Board. Following data analysis with victim service providers and PHAs, 22% of all EHV referrals went to victim service providers. 2. The CoC utilizes compliance review to ensure that all providers are following trauma informed practices. TA provides regular training and support to ensure that practices are trauma informed. The CoC and CAHSD have participated in joint TA to ensure our systems are addressing the needs of DV survivors. In 2020, one of the CoC providers led a gaps and needs assessment in partnership with CAHSD and the Domestic Violence Oversight Board. On April 26, 2022, CAHSD provided a training and Q&A session for CoC providers to ensure they are utilizing updated, evidenced based practices to identify survivors, assess for harm and develop a safety plan. TA from Housing Innovations led to our amending CES procedures and providing access point training to ensure survivors of DV and human/sex trafficking receive a comprehensive assessment, safety plan and are offered legal services and housing through the Coordinated Victims Assistance Center, a walk-in center for victims of crime with an array of co-located services. During annual compliance review, the CoC monitors that contracted providers (including CAHSD) have adopted trauma informed policies and an assessment and safety plan process for survivors. New compliance protocols were adopted to comply with the 2023 VAWA changes.

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

(limit 2,500 characters)

1. The CoC collaborates with Miami-Dade Community Action and Human Services Dept. (CAHSD), the local victim service provider, to provide CoC subrecipients with annual training and ongoing technical assistance. This year we asked providers to complete the VAWA Housing Service series of trainings. Last year, on April 26, 2022 CAHSD provided CoC direct service providers in CE, SO, ES, TH and PH projects with training on identifying DV, Dating Violence, Sexual Assault, Stalking and Human Trafficking; Safety Planning; and available resources. Materials are posted on our website. On 9/19/23 we provided provider training on the new VAWA changes. CAHSD also provides shelter, transitional housing, permanent housing and legal services to persons fleeing DV, Dating Violence, Sexual Assault, Stalking and Human Trafficking. 2. Part of the resource training provided by CAHSD goes into detail on the CoC's CES & how survivors can access support services like advocacy and legal services regardless of the survivors desire or readiness for crisis housing. It highlights crisis housing options including the collaboration with other DV systems outside of our CoC for persons who wish to relocate. The training talks about the importance of safety planning, and reviews the lethality tool used by CAHSD.

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

(limit 2,500 characters)

1. CoC CES safety protocols require providers to receive annual training on assessing for violence & refer clients to the Coordinated Victims Assistance Center (the only one-stop family justice center in FL w/40 on-site partners) for safety planning, connection to legal services & relocation assistance. The CES includes state certified DV providers who receive CoC funding for ES, TH & RRH & referred to EHV. Non-DV CES providers are cross trained in trauma informed care and safety planning. Miami-Dade implemented a 24/7 DV texting landline so victims can text an advocate when calling can place them in danger. CoC programs providing ES, TH, PH must allow DV/dating violence/sexual assault/stalking victims to request emergency transfer. The CoC prioritizes these transfers. HUD forms 5380/5382/5383 are provided & explained to survivors at intake & posted on our website. Landlord Participation Agreements incorporate VAWA & confidentiality rules. Survivors can request an emergency transfer which is available regardless of sex/gender identity/sexual orientation. Survivors of violence are offered relocation assistance to other counties or states upon request. Survivors can choose to go directly into PH and choose where they want to live using TBRA. New VAWA amendments reviewed with stakeholders, local policy amended, training provided to direct service providers, and subs welcomed to add costs to renewal and new NOFO apps. Domestic Violence Oversight Board of the CoC is staffed by CoC Executive Director and includes judiciary, law enforcement, human services, advocates & survivors w/lived experience who oversee the operation of certified shelters. The CoC & State Attorney provide training, housing and services to survivors of trafficking under an MOU.

2. DV providers use OSNIUM to protect DV client confidentiality and share deidentified data through a homeless module incorporated by their system (i.e. CAPER reports). The HMIS program is a secure platform protecting client confidentiality, but to add increased privacy, clients in HMIS participating programs may choose to enter anonymously per the CoC's policy posted on our website. Anonymous clients are assigned an alphanumeric HMIS ID and their name, SSN and DOB are not entered.

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

Describe in the field below:

1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

(limit 2,500 characters)

1. The CoC reviews de-identified data from OSNIUM, a database management information system used by all state certified domestic violence centers that includes a homeless module that aligns with the HMIS standards while providing additional data on safety. OSNIUM can produce APR and CAPER reports. The DV data helps us with the PIT/HIC and gaps and needs analysis. 2. We use the data to enumerate the number of persons served, perception of safety, exits to PH, number of persons calling DV helpline, number of victims being referred to mainstream CoC services, number of victims be relocated and number of victims being turned away because of the scarcity of resources. We utilize data on the number of persons engaged who develop a safety plan but are not offered services to establish a need for more DV focused crisis response and rental assistance. This assessment of DV gaps and needs led to our providing system training, awarding ESG and CoC RRH to a victim service provider. For the DV bonus project applications, respondents had to demonstrate (1) Rate of housing placement for survivors (% of persons who exit the program successfully), (2) Improvements in safety of survivors (% of persons whose risk of harm was reduced as a result of program participation) & (3) How the project addresses multiple barriers faced by survivors (% of barriers selected in the application). In 2018, the county’s Budget Office conducted a comprehensive review of CoC and non-CoC funded services provided to survivors & assessment of community needs, including role, membership & reporting structure of the Domestic Violence Oversight Board (DVOB). The report looked at LOS, cost per client, utilization of services, unmet requests for services, median rents & calls to the DV helpline among other data. Recommendations included adding flexibility to local tax dedicated to DV survivors, creation of DV Risk Mitigation/Landlord Assistance Fund, using ESG for DV RRH, maintaining a level of support for clustered style TH, conducting a separate evaluation to assess the specific impacts and effectiveness of DV programs on children, revision of client survey instruments, continuing review of performance data, and continued DV/CoC intersect.

** **

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

Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:

1.	whether your CoC has policies and procedures that include an emergency transfer plan;
2.	the process for individuals and families to request an emergency transfer; and
3.	the process your CoC uses to respond to individuals’ and families’ emergency transfer requests.

(limit 2,500 characters)

1. The CoC has a VAWA policy. We review the VAWA policy, including emergency transfer plans at least annually as part of the CoC Subcommittee and provide an annual training. We allow for public comment ahead of holding a stakeholder meeting with people with lived experiences, advocates and stakeholders to review procedures. Following the CoC Subcommittee our board votes on the policy. We publish changes and all VAWA forms on our website and provide training to contracted subrecipients. VAWA standards are published in program guidelines and housing assistance payment agreements or occupancy agreements. The emergency transfer plan allows any participant in a CoC program to request a transfer when they perceive the threat of violence or are a victim of violence. The CoC approves transfers between all levels of care ES to ES/TH, TH to ES/TH, PH to ES/TH/PH. One recent example of the policy workflow: a family living in PSH, husband was arrested for DV. When assessed by her case manager she acknowledged she was not safe. She was referred to and met with a DV advocate, developed a safety plan and was offered legal services & immediate transfer to shelter; she and the children were moved to another PSH program not disclosed to the husband. 2. Clients may request an emergency transfer through CoC project support service staff, DV helpline or via the CoC Housing Coordinator. As part of annual compliance review, the CoC ensures that subrecipients are providing program participants with documentation informing tenants and residents about emergency transfers at orientation and facilitating emergency transfers upon request. The CoC facilitates use of shelter/hotel and lateral transfer between PH-PBRA programs when a victim reports a threat. 3. The CoC prioritizes emergency transfers offering immediate relocation assistance. When clients want to remain in Miami we attempt to transfer laterally (PH to PH) but when that is not possible we may use crisis housing or hotel vouchers to transitionally place a survivor until a lateral transfer is available. Pursuant to the 2023 VAWA changes we are amending compliance tools and educating providers on using Budget Line Items to cover the costs of emergency transfers.

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

Describe in the field below how your CoC:

1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

(limit 2,500 characters)

1. The CoC prioritizes survivors of DV for referral to ES, TH & PH. Persons calling the DV helpline or presenting to DV access points complete a safety plan, are referred to legal services, and are offered ES/TH locally and also through relocation assistance to another county or state. When shelter is not available, hotel vouchers are used. Survivors may chose not to go to shelter but avail themselves of the support services (advocates, counseling and legal services). The CES has 6 unique factors prioritizing persons for referral to PH (age 65 and older, 18-24 year-olds, VI- SPDAT score, medical vulnerabilities, length of time homeless and victims of DV). DV providers who do not participate in HMIS submit a de-identified VI- SPDAT to the CoC Housing Coordinator to rank survivors of DV using the CoC prioritization strategy. We have allocated dedicated DV housing resources to the county DV provider using EHV, ESG, ESGCV and CoC DV Bonus funding to expand PH to survivors of DV and victims of human trafficking. 2. The CoC proactively identifies gaps in the CE that create safety barriers for survivors by holding listening sessions with persons with lived experience of human trafficking, domestic violence, dating violence, sexual assault, or stalking. The co-chair for the Lived Exp Working Group is a DV advocate and works for a Trauma Informed shelter that serves survivors and has published articles on their work with survivors. Feedback is utilized to develop training and amend policies that are designed to reduce safety barriers for survivors being approached for or seeking assistance. In May 2023, a year-long study of Intimate Partner Violence (IPV) in Miami-Dade County was completed at the urging of the Domestic Violence Oversight Board which analyzed barriers to safely housing and serving providers, including adequately addressing immigrant and refugee survivors, better supporting children exposed to IPV and improving the criminal justice response to IPV. Among the recommendations, increasing transitional housing units in the DV sector, centralizing various DV hotlines, and expanding trauma informed approaches.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
2.	accounted for the unique and complex needs of survivors.	

(limit 2,500 characters)

1. CAHSD, the county DV provider and CoC subrecipient recruits clients from the CES and crisis response system & they train people w/lived expertise of Domestic Violence on best practices so they may participate on the Domestic Violence Oversight Board and work in different capacities in the DV division of CAHSD. They hold listening sessions with clients in their ES and TH programs and collect feedback from persons served through an annual survey. CAHSD has developed a text/chat feature for survivors to seek help as a result of feedback received from survivors with lived expertise. The CoC recruits from SO & ES providers, people w/lived expertise to serve on the Lived Experience Working Group (LEWG) & trains members on DV. The LEWG Co-Chair has lived DV experience and currently works for a victim service provider. The LEWG reviews all CoC policy changes, including the new amendments to the VAWA policy ahead of the CoC Board adoption. The LEWG have begun presentations at public schools on CoC resources & engaging the YAB to do so as well. Starting in FY23-24 LEWG members will be paid for their service. 2. Survivors with lived expertise helped developed by-laws for the LEWG to ensure meeting communications are safe & confidential. Members are asked their names, how they wish to be addressed & their pronouns during introductions. At the top of each mtg members review confidentiality & no tolerance for racism policy & members are encouraged to share when they are comfortable & call out racism. A helpline routes survivors to DV specialists run by CAHSD the county's DV provider. CAHSD operators ensure persons are addressed based by their preferences and operators speak in their preferred language or translation services are requested. Persons are offered to talk via a phone call, text chat or in-person. CAHSD doesn't use HMIS and only shares CAPER and APR reports with the CoC unless they obtain consent from the survivor to share a VI-SPDAT with the CoC for the purpose of prioritizing them for PSH. We learned from the LEWG that survivors who chose other helpline options for Homeless Prevention, VA services or mainstream shelter were not being screened for safety planning. This led to our review of policy, provision of training and change in assessment tools to ensure survivors are screened at all levels of the CE, and connected to the appropriate support services with CAHSD regardless of the crisis housing or rental assistance path they take.

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

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

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

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

(limit 2,500 characters)

1. The CoC reviews anti-discrimination, the Equal Access Final Rule and Gender Identity Final Rule at least annually as part of the CoC Subcommittee to ensure processes are trauma informed. Reviewers include representation from LGBTQ+ led organizations and advocates. Public comment is allowed ahead of the process; people with lived experience, advocates, providers, legal services, and other stakeholders form part of the committee; meetings are open to the public; recommendations go before the CoC Board for adoption. 2. A CoC consultant & subject matter expert reviews & develops our anti-discrimination policy. This year Racial Equity Partners participated in the review. The CoC provides annual, mandatory training to sub-recipients on our anti-discrimination process, the Equal Access Final Rule and Gender Identity Final Rule; held on the last two years on 6/7/22 and 9/19/23. The training materials/recordings were also posted on our website. Last year we contracted with Racial Equity Partners to do a system assessment, plan and provider training. 3. At least annually, the CoC Compliance Officer is evaluating compliance with CoC antidiscrimination policies, they monitor sub-recipient compliance with posting the grievance process and customer satisfaction survey, the development of a sub-recipient program policy that align with CoC standards, logging of complaints and resolutions and use of CoC grievance process. 4. CoC policy for addressing non-compliance includes support in revising policies w/lived expertise. We also provide training on serving the LGBTQ population. Grievance procedures ensures clients receive a fair hearing using restorative justice techniques. Most complaints are handled at the sub-recipient level. The vast majority of complaints the CoC receives has to do with program terminations. In all circumstances the CoC has ensured clients can laterally transfer to the same level of care to prevent returns to homelessness. The Compliance Officer can issue findings and place subrecipients on Performance Improvement Plans. Outstanding issues can also impact scoring in competitive processes with point deductions.

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Miami-Dade Public Housing and Community Development	70%	Yes-Both	Yes
Hialeah Housing Authority	83%	Yes-Both	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	
	Describe in the field below:	
	1. steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or	
	2. state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.	

(limit 2,500 characters)

1. The CoC, w/ HUD & local TA, worked closely w/ administrators of all 4 PHAs (Miami-Dade, Hialeah, Homestead, Miami Beach) to amend their administrative plans in order to adopt homeless admission preferences. TA provided guidance on how to amend plans, drafted language to incorporate & provided guidance on how to communicate the preferences to persons on PHA waiting lists. This has allowed us to leverage HCV, PBV, Mainstream, EHV, FUP, FYI and Public Housing. The CoC also partnered w/ City of Miami and Carrfour which both received an allocation of Mainstream Vouchers w/ which the CoC makes referrals. Our CoC Housing Coordinator makes coordinated referrals to all homeless preferences and set-asides, including tax credit ELI units, Multifamily Homeless Preference units & OPH. With Miami-Dade's PHA, our CoC has locally funded stand-alone support services to couple w/ HCV's to create a PSH-like program for veterans & chronically homeless persons based on homeless longevity & need. They provided State Housing Initiative Partnership funds to provide housing leveraging in this NOFO. Also, w/ Miami-Dade's PHA, CoC identified local funding to rehabilitate units of Public Housing in exchange for referral rights. The CoC partnered w/ the Hialeah Housing Authority to promote Family Self Sufficiency (FSS) Program to both homeless & move-up households, promoting homeownership & credit repair. An FSS video was produced which is shown to all referral households at initial intake. The PHA & CoC launched its Move-Up Strategy w/ Housing Authority of the City of Miami Beach & together created a Move-Up Handbook & Assessment Tool. The partnership received a 2019 Best Practices Award by the Florida Association of Housing and Redevelopment Officials. In March 2021, HUD TA, CSH, invited Miami-Dade's CoC to participate in a national Move-Up webinar. CoC has used HUD Field Office to make PHA introductions, proactively partnered w/ PHA's on solicitations and MOU's, ensured timely referrals, presented at landlord engagement events, continually seeks increased allocations and assist w/ troubleshooting. 2. N/A.

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

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

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

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

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

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

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	2022 NOFO, S-NOFO, FUP, & FYI.

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	

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

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

Name of PHA: Miami-Dade Public Housing and Community Development

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

Name of PHA: Housing Authority of the City of Miami Beach (HACMB)

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

Name of PHA: Homestead Housing Authority

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

Name of PHA: Hialeah Housing Authority

1D. Coordination and Engagement Cont'd

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

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

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	50
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	50
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

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

(limit 2,500 characters)

1. The Homeless Trust, Miami-Dade's CoC utilizes the HUD Housing First Assessment tool to evaluate subrecipients fidelity to Housing First. The Homeless Trust Compliance Officer reviews the Housing First Assessment annually for each provider during monitoring. Subrecipients complete it as a self assessment and planning tool, and then it is reviewed during their annual compliance review. Performance improvement measures are imposed when appropriate for providers with areas for improvement. 2. Our CoC uses the HUD published Housing First Assessment Tool to collect information on each project, it's access protocols, how leases are structured and the provision of services; with some additional questions for specific components to rate the providers fidelity to Housing First. 3. The CoC Compliance Officer reviews client files - assessing case notes to assure compliance w/Housing First, they also carefully review all terminations and declined referrals for admissions. Completed Housing First assessments are reviewed at least annually by the Homeless Trust Compliance Officer, who reviews the self assessment tool, conducts staff and client interviews, reviews applicable programmatic policies as part of on-site program monitoring and may recommend performance improvement when areas of low fidelity to Housing First are identified.

1D-3.	Street Outreach—Scope.	
	NOFO Section V.B.1.j.	

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

(limit 2,500 characters)

1. City of Miami SO canvases the entire geography of Miami-Dade (except Miami Beach) engaging unsheltered & using HMIS to document helpline calls, street engagement, referral & placement. Miami Beach SO does the same for its geography. SO teams also answer the Homeless Helpline & have city-issued vehicles to transport clients, including vehicles with wheelchair lifts. Teams respond to calls from police, parks, transit, constituents & others. Fixed SO Access Points are in place for unsheltered persons with unique access points for vets, youth & human trafficking & DV victims. Teams include persons w/lived experience & are trained in Crisis Intervention, Motivational Interviewing, Critical Time Intervention & Trauma-Informed Care. This year they we received training from Housing Innovations on their triage assessment/referral protocols to promote connection to other housing resources when shelter is not available, and the CoC added 4 FTEs to perform HMIS/housing assessments. SO teams are culturally competent & offer trilingual services (English, Spanish, Creole). Rapport is created w/service resistant through regular, ongoing engagement and SO offers of coffee, meals, shoes and PPE. Miami Lighthouse offered a CoC-wide orientation & mobility training for serving blind persons. All SO teams use HMIS, serve as access points & make referrals to ES, TH & SH. SO clients are referred to PH based on Orders of Priority for referral. SO teams advertise availability of open PHA waitlists and when the CoC refers someone to PH. 2. Miami & Miami Beach SO cover 100% of the CoC's geography. 3. SO is provided weekdays during business hours w/bi-weekly evening SO performed year-round. 4. The CoC funds specialized SO, one team provides a behavioral health evaluation, prescribe meds & counsel service resistant persons. Another SO team, w/peer specialists focus on persons w/substance use disorders. A third team provides outreach has specialized in serving people with no legal status. The CoC provides HMIS access to an FQHC who provides SO primary care services & SAMHSA's PATH SO team providing services to unsheltered persons discharged from crisis units (CSU) & detox. The CoC has an MOU w/courts, hospitals, CSU's & the jail w/dedicated SO to prevent discharges into homelessness. Two homeless resource officer teams make referrals to CoC programs. We engage street feeders & religious groups to use HMIS & serve as SO.

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

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		
	Engaged 11th Judicial Circuit	Yes	Yes

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

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	1,749	1,821

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

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

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

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	

Describe in the field below how your CoC:

- systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
- works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
- works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1. CoC developed a Mainstream Policy w/checklist so staff engage clients w/array of service connections. CoC hosts topical trainings, including SSA updates; Legal Services on new tenants' rights; refugee services, voter registration... Webinars, materials & info is pushed via email, posted online, shared on social media & distributed at program/service sites. CoC collaboration w/Urban Impact Lab produced online platform w/resources for housing, utilities, food, groceries, job training, employment support, cash assistance... Resource directories are on CoC website, which also partners w/211, 311 & Hope Florida navigators. CoC partners w/state whose ACCESS sites are collocated in CoC sites enabling homeless households to enroll in Medicaid, food stamps, medical care & TANF. Legal Services, a CoC provider, offers benefit review, advocacy & representation to homeless. CoC pushes info on new developments, wait-list openings to program leaders for dissemination. The local Workforce Board is co-located at ES sites & mobile vehicles do targeted outreach. 2. Health Dept. provides infectious disease updates to CoC & on-site vaccinations at SO/ES/TH sites for COVID, Hep A & Monkeypox. Managing Entity for Substance Abuse & Mental Health funds CoC providers for HIV testing, treatment beds, detox. CoC provides managed care organizations HMIS access & includes in by-name list meetings, facilitating long-term care & other services. Most SO & PH providers are FQHCs, CMHCs or licensed substance abuse (SA) agencies that assist clients to enroll in insurance. Providers that do not bill insurance have MOUs w/FQHC or Substance Abuse provider to assist w/enrollment. ES providers have MOUs w/the public hospital or FQHC providing on-site medical offices so clients can access healthcare & enroll in insurance. Two FQHCs & SA providers perform SO & help unsheltered persons enroll. CoC partners w/Alliance for Aging to connect w/programs that benefit aging homeless. Healthcare navigators at state ACCESS sites provide CoC participants w/info on Medicaid, Medicare & work incentives for disabled persons. 3. The CoC Asst. Exe Dir is SOAR trained. We require subs to complete online & in-person SOAR training (most recent 9/22/23) & have trained SOAR staff. We signed an MOU w/DCF to which allows CoC subs to double as an ACCESS provider for DCF, giving them access to online Medicaid, SNAPs and other entitlement apps.

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

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

(limit 2,500 characters)

The CoC had great success w/non-congregate sheltering during the pandemic and has continued to work to scale up non-congregate options which offer rapid placement from the streets into private settings & serve as bridge housing to permanent destinations. Prior to the pandemic, seniors experiencing homelessness were a growing population. One of every 3 singles experiencing homelessness in Miami-Dade was 55+. The CoC partnered w/an Assisted Living Facility operator to contract for 85 beds to serve as a quarantine/isolation site for persons 65+. More than 500 intakes later, not a single death or community spread issue. Three years ago, the CoC received state funds to create NCS for persons with Severe Mental Illness, creating the Brother Bill project. The CoC has since purchased this facility with ARPA funds to serve up to 120 persons (2 per room). This specialized facility caters to the unique needs of seniors who bridge to other permanent housing made available through the CoC. More recently, the CoC secured funding from Miami-Dade County and the City of Miami to acquire & renovate a facility on former federal surplus land to provide non-congregate sheltering or bridge housing for up 200 individuals w/special needs. A 50 unit tiny home demonstration project (not shed-like structures) will also be sited on the parcel. The CoC has added specialized outreach teams w/expertise in SMI/SUD to place hard-to-serve clients directly from the streets where they are wrapped with services including basic life skills needed to stabilize before moving onto other permanent destinations. We also contracted w/a new specialized outreach provider which has utilized rental homes to provide noncongregate sheltering. The CoC has also long-used hotels & rental units to serve families w/minor children. Persons in non-congregate shelters are added to HMIS & considered for referral to other permanent housing based on CoC's Orders of Priority. Even congregate shelters within the CoC have set aside non-congregate spaces to accommodate COVID+ clients or other persons with special needs in an effort to successfully retain and outplace unsheltered persons. SO teams offer NCS to unsheltered persons who refuse congregate shelter. This has served as an engagement tool for persons who historically refused all services because they had bad experiences with congregate shelter. NCS has increased ES capacity and as new units come online, it will further increase the ES inventory.

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

(limit 2,500 characters)

1. The CoC’s infectious disease policies and procedures were developed in consultation w/Florida Department of Health in Miami-Dade (FDOH). The CoC Continuity of Operations Plan which includes a section on health emergencies, including infectious diseases, was developed in partnership w/FDOH and Miami-Dade’s Division of Emergency Management. COVID-19 policies developed during the pandemic include protocols for testing and vaccine distribution, isolation and quarantine, cleaning & disinfection, PPE, data collection, priority for referral, staffing, meal delivery, waste disposal, wellness checks, signage, etc. The CoC also developed telehealth protocols with the Florida International University College of Medicine and FDOH providing symptom monitoring, wellness checks, referral for off-site facility-based medical care and quarantine and isolation medical clearance. 2. FDOH provides ongoing vaccinations & education for COVID, Flu, Monkeypox and Hepatitis A at ES & Day Center, as well as COVID test kits, PPE, and toiletries. CoC also partners w/3 FQHCs, public hospital and VA to provide outreach, preventive care, emergency services and primary care to persons experiencing homelessness, including unsheltered. Substance use SO provides state-funded HIV testing and needle exchange. Health clinics embedded at all ES sites. As NCS hotels scaled down, shelters created onsite quarantine/isolation for persons who test positive for COVID and the CoC used ARP funds to expand NCS.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC:	
	1.	shared information related to public health measures and homelessness, and
	2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.

(limit 2,500 characters)

1. The Florida Department of Health in Miami-Dade (FDOH) alerts the CoC of emerging health emergencies & informs & educates when there are confirmed cases of COVID, Monkeypox, Influenza or other infectious disease threats within the homeless population. CoC conference calls, sharing of educational materials & site visits w/FDOH are all part a regular routine established prior to COVID. During the pandemic, vaccination information stored in state’s FL SHOTS database was shared with CoC & critical to preventing community spread. FDOH utilizes data collected in HMIS, like contact number, email, emergency contact, vaccine status when their database lacked records. FDOH helps the CoC conduct contract tracing & advises SO teams when someone who tested positive was thought to be unsheltered because they were being engaged by SO, recently exited a homeless program or had no active entry/exit in HMIS. The CoC is also a member of FDOH’s Health Equity Office Advisory Committee to address root causes of health inequities through policy, systems and environmental change. The CoC also sits on Miami-Dade County’s HIV/AIDS Partnership Advisory Board, the Ryan White planning body. 2. The CoC convenes calls as needed with ES/TH/SO/PH providers & FDOH leadership to discuss emerging health emergencies, best practices, changing guidance and data. FDOH makes rounds at all ES sites educating & vaccinating & worked to investigate close contacts during COVID. Providers can also contact FDOH directly to troubleshoot issues as needed. Public hospital prioritized CoC, especially 65+, as vaccines were first rolled out. All ES sites also have FQHC or public hospital clinic on site to educate staff and clients & provide primary care. HRSA funded FQHC conducts regular street outreach. Florida Div. of Emergency Management was instrumental during COVID, providing test kits, mobile vaccinations, PPE & shelf stable meals for unsheltered persons. During COVID, CDC visited CoC congregate ES to review CoC protocols & recommend suggestions. Annually, CoC works with Miami-Dade Office of Emergency Management (OEM) to review Continuity of Operations Plans (COOP) and plans of CoC provider partners and convenes the CoC and Voluntary Organizations Active in Disaster (VOAD). CDC, FDOH, OEM & HUD guidance regularly pushed to all providers and agencies prioritized CoC w/face masks/hand sanitizer/test kits/vaccine access and info on social distancing/personal hygiene during COVID.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC’s coordinated entry system:	
1.	covers 100 percent of your CoC’s geographic area;	
2.	uses a standardized assessment process; and	
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 characters)

1. The CoC CES cover 100% of CoC geographic area & Access Points are the front door to the CES. Miami & Miami Beach SO teams canvases the entire geography of Miami-Dade and use HMIS to collect Universal Data Elements & complete VI-SPDAT. CE teams answer the Homeless Helpline & have vehicles to provide transportation & proactively canvas areas. CE includes police, park, transit & other partners. CE Access Points (walk-in sites), posted on CoC website, are in place for unsheltered, vets, youth & DV victims. CE includes persons w/lived experience & are trained in Crisis Intervention, Motivational Interviewing & Trauma-Informed Care & are supported by specialized outreach teams providing primary care & behavioral health services who reach people who are least likely to apply for homeless assistance. The CE engages street feeders & religious groups who have built trust to use HMIS. CE teams offer coffee, meals, shoes and PPE to build rapport. A CoC Housing Coord refers to PH. 2. SO teams utilize the VISPDAT to facilitate the CoC's ranking/prioritization for referral to TH/PH. CoC uses data collected in HMIS/VI-SPDAT to prioritize referrals for PH. We have weekly case conferencing to make new referrals and discuss the progress/issues with existing referrals. We amended CES to prioritize persons who are either 65 or older or have a condition identified by CDC which makes them highly vulnerable to severe illness. Other prioritization factors include: (a) people experiencing chronic homelessness or length of time (LOT) homeless greater than 400 days or Trans LOT in HMIS projects exceeds 300 days; (b) High Crisis System Utilization; (c) VI-SPDAT Score of 4 or greater; (d) Fleeing DV, human or sex trafficking; (e) youth; & (f) highly vulnerable families. 3. The prioritization strategy, developed with HUD TA, is reviewed annually with people with lived experiences, advocates, sub-recipients and other stakeholders. This year changes to the orders of priority were made as a result of stakeholder feedback to ensure RRH programs included people who needed short-term asst & prevented persons from remaining homeless for long periods in order to be prioritized. This methodology adds to the current methodology that ensures people most in need of assistance are prioritized based on homeless longevity & vulnerability. The active client list shows how many days since referral to PH. Cases who exceed 60 days are discussed in weekly case conferencing.

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

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

(limit 2,500 characters)

1. CES efforts focus on people least likely to apply for homeless assistance. Many are only open to perm. housing (PH) options. We are perfecting housing straight from the streets & increasing the PH stock through PHA partnerships, a move-up strategy, acquire & renovating PH w/over \$43M in participating jurisdiction commitments. The CoC CE utilizes non-traditional partners including libraries, parks & transit to alert us to unsheltered persons not actively engaging w/the CoC. Local data suggests some unsheltered persons cycle in/out of shelter or fail to follow through w/PH referrals. Specialized CE teams target hard to serve unsheltered persons. We trained CES on pre-CTI. We asked CES teams to keep small caseloads & follow clients in shelter, when they accept ES or throughout the PH application process to promote successful outcomes. 2. Our prioritization strategy uses data collected in HMIS/VISPDAT to prioritize referrals to PH. We amended CES to prioritize ppl 65 or older or have a condition identified by CDC making them highly vulnerable to severe illness. Other prioritization factors include: (a) length of time homeless > 400 days or Trans LOT in HMIS projects exceeds 300 days; (b) High Crisis System Utilization; (c) VI-SPDAT Score of 4 or greater; (d) Fleeing DV, human or sex trafficking; (e) youth; & (f) highly vulnerable families. Clients & their case mgrs. can challenge their ranking to allow us to consider uncommon vulnerabilities not captured in our assessment. 3. The CoC By Name List ranks households by most vulnerable & tracks days btwn referral allowing to focus case staffing on vulnerable people who are not moving in quickly. A Business Analyst is also reviewing CE processes to ensure client choice, develop efficiencies & reduce LOT. 4. We have a no wrong door approach & over the past 3 yrs have expanded access points to the library, youth services providers, schools, PCWA, churches & feeding centers, while continuing a toll-free helpline, placing outreach in the courts, working w/institutions that discharge into homelessness (hospitals, jail) & canvassing the streets. We provide regular training & perform over the shoulder supervision to ensure SO & access pts are implementing best practices, identify training needs & prevent incorrect messaging or use of invasive/judgmental questions & we removed unneeded complexities thru simplified documentation checklist for PSH.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

1. The CoC affirmatively markets housing & services w/the help of MNetwork marketing who ensures our resources and success stories are aired on tv, social media & posted publicly in libraries, transportation & other highly trafficked places. We contract w/a wide array of SO teams who canvas the full geography daily day & evening hours. We collaborate w/others (library, airport, police...) to ensure we reach all persons experiencing homelessness. Our CoC refers persons to PH options based on their ranking on CoC orders of priority regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability. We regularly present CoC housing & services to agencies that are entrusted w/homeless clients, law enforcement, municipal gov't, partners & community based agencies. We market housing options and providers on our website and case managers staff cases in weekly by name list case staffing meetings and advise their clients of options available to them based on eligibility. 2. Our Grievance Process is shared w/& explained to new program participants during orientation at ES, TH & PH projects. Our Compliance Officer reviews this process as part of annual monitoring. The process is also available on our website, & shared w/persons who call our office w/a complaint. 3. The county Mayor established an Office of Housing Advocacy which works closely with the CoC and Legal Services to report any conditions or actions that impede fair housing choice for prospective program participants seeking HP assistance. The CoC also reviews Fair Housing policies established by subs as part of annual compliance review. We have a process to collect client feedback and have an established grievance process. We report any fair housing issues to the property authorities, advocates, legal services, including the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

1D-10.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	05/01/2023

1D-10a.	Process for Analyzing Racial Disparities—Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

Describe in the field below:	
1.	your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1. Historically our CoC conducted its own Racial Disparity Quantitative Assessment annually using HMIS and Stella P data on CoC funded programs (including the new “by race and ethnicity” questions). We compared the rates of system entry to the general census and rates of exits to positive destinations by race. When HUD TA assisted us in amending the CES, the CoC analyzed the impact of shifts to the prioritization strategy to ensure it did not have an adverse effect on our ability to equitably serve people of color and persons identifying as LGBTQ+ using Stella P. This analysis reached a plateau as we established CoC funded programs were equitable, but we were not addressing the factors that were contributing to significant disparities in the persons who entered our system. Last year we hired the Racial Equity Partners to do a system-wide assessment and help us amend our local plan. We formed a working group, including people with lived experiences; and completed a series of trainings for Board members, subrecipients, advocates and other stakeholders. HMIS Data; online surveys of CoC staff, Board, Committees and providers, including all frontline staff; and listening sessions were utilized to assess our system. 2. Our system evaluation observed that people of color (POC) represent 57% of all new referrals while the US census for our county suggests POC are 18% of the general population. The CoC itself is equitable, as evidenced by 58% of people who exit to permanent destinations are POC; but to tackle factors preceding the CoC experience that results in disproportionately more POC facing homelessness we are evaluating our role in partnering with the DOJ and developing programming for returning citizens.

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

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

1.	The CoC’s board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	

12.		
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1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

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

(limit 2,500 characters)

The CoC hired the Racial Equity Partners to do a system-wide assessment and help us amend our local plan. We formed a working group, including people with lived experiences being served by programs under contract with the CoC to provide feedback & help w/implementation steps. The CoC completed a series of trainings for Board members, Lived Experience Working Group (LEWG), subrecipients, advocates and other stakeholders. We surveyed clients on disparities during focus groups, & received suggestions that we are not doing enough to prevent recidivism for returning citizens. Our Lived Experience Working Group charged us with partnering with the DOJ and other federal agencies to expand our programming to assist returning citizens. We revamped our discharge planning procedures w/11th judicial circuit, Miami Dade Corrections, PCWA & hospitals. We invited various federal departments to present to the LEWG & are exploring their suggestions to seek funding specifically for returning citizens. We adopted procurement & contract monitoring practices designed to promote racial equity, including diversity requirements for selection committees. We included bonus points in solicitations for proposers that have racial equity goals/statements which directly impact the people they serve & include people with lived experiences on their Board/staff. Our annual risk assessments with our contracted providers reviews racial equity plans adopted by our subs; racial composition of board/staff/leadership; and steps taken to identify/understand underlying causes. We are expanding on partnerships to further efforts to address procurement barriers experienced by small organization & those led by people of color, most recently working w/the Circle of Brotherhood and Miami-Dade Black Affairs Advisory Board. A Racial Equity section has been added to CoC website, with our policy statement. Our CoC Board approved a Racial Equity Action Plan which identified an implementation team, timelines and action steps.

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

Describe in the field below:

- | | |
|----|--|
| 1. | the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and |
| 2. | the tools your CoC uses. |

(limit 2,500 characters)

1. The CoC completed an assessment led by Racial Equity Partners (REP). Currently we review the race of persons entering the system and the rates of exits to positive destinations by race. We compare the entry rates to the latest census data, and compare the exits to positive destinations to the percent of persons entering our system by race to assess the racial disparities at entry and assess the systems ability to have an equitable response to ending homelessness. We are able to analyze the data by project, by pathway and by population. The previous evaluations were instrumental in helping us assess any racial disparities in our system but did little to prevent people of color (POC) from disproportionately accessing the homeless system. We hired REP to help us make a greater impact on systems that disproportionately affect POC. 2. Stella P, and listening sessions with lived experience and other stakeholders.

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

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

(limit 2,500 characters)

Our CoC’s YAB plays a critical role in recruiting new YAB members annually. They recommend members through connections they make in focus groups & networking. We also approach the Homeless Formerly Homeless Forum (HFHF) and a Lived Experience Working Group (LEWG) to seek new members. To establish the LEWG we held a lunch at an access point serving hundreds of unsheltered persons at their drop-in center. We also included lived experience on our board and committees. The Lived Experiences Working Group includes people who had a recent experience of unsheltered homelessness, people who were recently sheltered and persons whose rent is being subsidized by the CoC. They are diverse with majority being people of color, some Hispanic representation, both male and female members, a member who identifies as LGBT, a survivor of domestic violence, people who receive behavioral health services, a senior, returning citizens, advocates, Peers Certified in Mental Health and Wellness Recovery Action Planning, and persons in recovery. The group has a self-sustaining leadership structure and has adopted by-laws with positions, terms and goals. The working group has reviewed and provided feedback on the CoC Plan, Standards of Care, the funding priorities for the NOFOs, and scoring criteria. The CoC developed a remuneration policy approved by the LEWG which will pay LEWG members beginning 10/1/23.

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	16	10
2.	Participate on CoC committees, subcommittees, or workgroups.	16	10
3.	Included in the development or revision of your CoC's local competition rating factors.	16	10
4.	Included in the development or revision of your CoC's coordinated entry process.	11	8

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

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

The CoC member organizations have hired Youth Action Board (YAB) & Lived Exp Working Grp (LEWG) members to perform advocacy jobs, outreach, Peer Specialists and other support services. The CoC Manager & a Contracts Officer are people with lived experience. The CoC pays members of the YAB & will begin to pay members of the LEWG in October. We have secured state & private funding for the Homeless Trust Social Enterprise Academy @ Chapman that will support YAB & LEWG members as well as other program participants. Persons experiencing homelessness are currently offered 15 weeks of quality training in in-demand industries w/low worker supply & paying a living wage (construction, Cert Nursing Assistant, Phlebotomy & IT). MOU's are also in place w/Workforce Investment Board CareerSource, Miami Job Corps Center & Miami Community Ventures (MCV) thru the Beacon Council (official Economic Development org. of Miami-Dade). CareerSource makes available one-stop employment centers co-located at CoC facilities, championing supp. employment opportunities, inc. Tech Hire. MCV has provided living wage jobs to CoC clients & the CoC has engaged in "Benefit Cliffs" discussion where families receiving public benefits assistance are discouraged from pursuing opportunities to gain more income due to fear of losing aid. The CoC promoted new ARP investments in workforce development, inc. an enhanced Miami employment program that hires formerly homeless, city vendor on-the-job training/apprenticeship program, & incorporating hiring of homeless in projects that receive city funding. Camillus House initiated CamillusYouniversity, a series of courses designed to help persons w/lived experience connect to employment. Lotus has a thrift store operated by persons with lived experience. The CoC owns land where a PSH program & farm were built, designed to employ formerly homeless at the farm & market.

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

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

(limit 2,500 characters)

1. YAB and Lived Experience Working groups provide feedback on their experiences, hold listening sessions with people experiencing homelessness, bring national expertise to meetings, and provide feedback on processes and funding priorities. The YAB meets weekly and the LEWG meets twice a month.
 2. The CoC disseminated QR code links to our new client satisfaction survey which was developed with feedback from persons with lived experiences at Lived Exp Working Group meetings. Access to the survey is also made available on our website. This provides persons in all levels of care the ability to provide feedback on access, case management engagement/competency, facilities and other factors of client satisfaction. Survey results are reviewed quarterly and a report is provided to the Board at least annually. Compliance staff ensure programs have QR codes posted in prominent areas and surveys are being received for all programs under contract with the CoC. We also openly solicit feedback from people with recent lived experiences in the CoC Lived Experience Working Group.
 3. The CoC has placed providers or projects with trends of poor satisfaction on Performance Improvement Plans and retrained them on evidenced based practices (Housing First, Motivational Interviewing, pre-CTI & CTI, Trauma Informed Care). We have held restorative justice grievance hearings with dissatisfied consumer and use their feedback to amend system policy and retrain providers.

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

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

(limit 2,500 characters)

1. The CoC, an agency of Miami-Dade County, has worked alongside the county admins & the Mayor's Building Blocks for Housing Affordability program to accelerate the supply of housing & expand resident protections. Reforming Zoning a) On the zoning & land use, w/support of the CoC, the Board of County Commissioners (BCC) in 9/22 approved the expansion of the Rapid Transit Zone to increase housing density & intensity along all current & planned Rapid Transit Zones. The legislation includes a min. development of 12.5% workforce housing when developing under these standards. The county permits up to a 25% density bonus if developing a property w/some affordable & workforce housing. When siting these units, the zoning code is relaxed w/respect to lot size & setbacks. b) In 6/22, following conversations w/the CoC, the county admins proposed changes to the Comp. Development Master Plan policy to enable more accessory dwelling units (ADU). In 5/23, the BCC adopted legislation to establish a pre-permitted design program for ADUs & guesthouses in Miami & invite private & non-profit sector partner to develop such pre-permitted design w/necessary funding in the FY23 budget. 2. Reducing Regulatory Barriers a) In 7/22, w/support from the CoC, the BCC adopted legislation to provide impact fee exemptions for affordable housing units up to 120% Area Median Income. b) A new, expedited zoning application review process is underway. Workforce, affordable housing, review of paving & drainage plans benefit from a 7-day expedited review of the application @ no additional charge. An expedited building permit plan review is offered for affordable & workforce housing projects w/initial plan review comments completed w/in 5 business days. A specially created, cross departmental county team helps to facilitate these expedites. c) With encouragement from the CoC, a process is now underway to accelerate the process for reallocating funding to developers of Infill Housing Program properties that are not fulfilling contract parameters to claw-back & re-appropriate funds. d) With support from the CoC, the Florida Legislature passed the Live Local Act in 7/23. The affordable housing legislation reduces parking requirements if a multifamily project is within 1/2 mile of a major transit stop and requires mixed use residential if the multifamily development is zoned for commercial or industrial use.

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

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

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

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	05/25/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	05/25/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

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

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

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	43
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC used the latest version of the CoC Program Rating and Ranking Tool created by HUD for the CoC Program NOFO. HMIS and comparable database APR exit destinations data was used to score each project. The CoC began the renewal project scoring early so we were able to run APRs for each renewal project between 10/1/21-9/30/22. We looked at employment and income growth, length of time between referral and move-in date and exits to PH/housing retention. For programs with exits to PH we looked for returns at 6, 12 & 24 months using the APR and client search in HMIS. Their monitoring score which includes adherence to Housing First, equity planning and participation in coordinated entry was used to rate projects. We also analyzed costs, providing 20 points to projects that are reasonable. Providers who adhered to Housing First by serving people regardless of income, substance use and legal history were awarded 10 points. Projects following CE, focusing on chronic homeless were awarded 10 points. DV providers had revised performance points considering lower performance levels through serving one of the hardest to serve sub-pop. 2. The CoC used APR data to determine length of time between referral and move-in & we awarded 20 points to projects who moved people in within 30 days. 3. Providers must take coordinated referrals from the CoC and the CoC makes referrals based on severity of need/orders of priority (a) people experiencing chronic homelessness or length of time (LOT) homeless greater than 400 days or Trans LOT in HMIS projects exceeds 300 days; (b) High Crisis System Utilization; (c) VI-SPDAT Score of 4 or greater; (d) Fleeing DV, human or sex trafficking; (e) youth; & (f) highly vulnerable families. 25 points were awarded to projects who achieve 90% housing stability as evidenced by exits to PH and PH retention. 4. Scoring criteria for new projects considered the low barrier practices implemented and the number of type of evidenced based practices utilized. DV providers SyS PM points were prorated to account for their providing services to a hard-to-serve pop. Providers who served a greater number of persons coming directly from unsheltered situations received 4 points.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
NOFO Section V.B.2.e.		
Describe in the field below:		
1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;	
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and	
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	

(limit 2,500 characters)

1. Per county rules Selection Committees must be racially balanced. The NOFO Selection Committee included 3 members who were black, 2 representing LGBTQ & 2 w/lived expertise. The CoC sought feedback from the YAB, Lived Experience Working Group and through listening sessions held through TA from the Racial Equity Partners from people of different races - predominantly people of color on rating factors ahead of publishing the solicitation. 2. Feedback from persons with lived experience was utilized to include the racial equity rating factors (70 points or 33% of total points) in renewal and new project applicants. This rating criteria looked at respondent's practices to promote racial equity and equity among the LGBTQ pop. People w/lived expertise supported the new equity questions HUD added to the rating tool that was adopted by the CoC & expands on existing questions on equity for new and renewal projects. The CoC encouraged members of the YAB & Lived Experience Working Group to receive Selection Committee training and serve in future committees. Selection committees are balanced by race and sex per county policy. 3. Rating criteria for new and renewal projects included points for providers who had equity in management positions, included a process for incorporating feedback from people w/lived experiences, developed internal policies promoting equity and assessed outcomes with an equity lens.

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

(limit 2,500 characters)

1. Our CoC Scoring, Ranking and Reallocation process is published on our website and reviewed annually with stakeholders as part of the CoC planning process between January and March. The process defines the involuntary strategy of reallocating programs with the poorest performance, unless we receive voluntary reallocation, the process for repurposing consistently underspent funds, the process for protecting projects considered essential and new projects with less than one year of data available. The policy also highlights the scoring criteria. 2. We identified reallocation opportunities early on, and held three public meetings to discuss strategies for reallocation ahead of reallocating projects based on their score. 3. The CoC exceeded 20% reallocation for the past 5 years. We are reallocating two entire projects based on their scoring/ranking, and partially reallocating a third project which has consistently not spent the full award. 4. The lower performing projects were reallocated.

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

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	Yes
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/10/2023

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/10/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	
	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/22/2023
1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	
	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	09/22/2023

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

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

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

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/28/2023
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2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

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

(limit 2,500 characters)

1. Our CoC and HMIS Lead has provided CAHSD, the DV housing and service provider in our CoC, TA to ensure they are utilizing the OSNIUM homeless module which allows them to run APR and CAPER reports for funded projects.
2. Yes, our DV housing and service provider (CAHSD) is using (Osnium) a HUD compliant comparable database which complies with the 2022 HMIS Data Standards.
3. Yes, our CoC HMIS is compliant with the 2022 HMIS Data Standards with very low rates of data quality issues that have not been resolved as part of provider monitoring.

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

Enter 2023 HIC and HMIS data in the chart below by project type:

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	2,379	173	2,206	100.00%
2. Safe Haven (SH) beds	20	0	20	100.00%
3. Transitional Housing (TH) beds	466	144	322	100.00%
4. Rapid Re-Housing (RRH) beds	520	40	480	100.00%
5. Permanent Supportive Housing (PSH) beds	4,897	0	4,897	100.00%
6. Other Permanent Housing (OPH) beds	296	0	296	100.00%

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

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

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

(limit 2,500 characters)

Not applicable.

2A-6. Longitudinal System Analysis (LSA) Submission in HDX 2.0.
 NOFO Section V.B.3.d.
 You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/26/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	06/28/2023
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

1. The Youth Action Board (YAB), has engaged Pridelines a non-profit founded by gay and bisexual youth for LGBTQ; Miami-Dade County Public Schools (MDCPS) Project Up-Start; Educate Tomorrow a holistic support services program for youth who aged out of foster care and are pursuing higher education; the Children’s Trust a dedicated source of revenue which funds strategic investments to improve the lives of children and families; and University of Miami to effectively count youth during the PIT. 2. The YAB approve the survey strategy, market the PIT to youth serving organizations, work with youth access points to collect data, and identify hotspots frequently visited by unsheltered youth. Once the count is completed, they work alongside with the University of Miami to analyze the data and present results to stakeholders. YAB members use what they learn through the PIT to contribute to the CoC’s system gaps and needs analysis. They are empowered by the CoC Board to develop community-wide goals, propose and lead the implementation of system changes. 3. The CoC continues to center lived expertise and authentic youth leadership through the YAB. Their members approved the PIT methodology. YAB members volunteer in the PIT count of unsheltered persons. YAB members are paid \$20 an hour.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
	3. describe how the changes affected your CoC’s PIT count results; or	
	4. state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

1. No changes. 2. This year we did not complete a youth service count. 3. Eliminating the youth service count reduced the need to have unique identifiers to rule out duplication. 4. We conducted a sheltered and unsheltered 2023 count.

2C. System Performance

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

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

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

(limit 2,500 characters)

1. 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 and Housing Innovations to review HP and diversion 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 crisis & 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, SHIP and TANF 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 of Greater Miami offers front line supports, including Fair Housing, legal representation & advocacy. The CoC collaborates with the sheriff's office to provide a postcard w/actions steps to prevent homelessness as leave-behind when serving writs, we published helpline info in court eviction docs and county established Office of Housing Advocacy and passed provisions (such as preventing evictions w/o 60 days notice for rent increases) to protect tenants. Axishelps.org website w/all HP housing & utility resources created w/Miami Housing Alliance. Housing Ombudsman created to coordinate assistance & 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.

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

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

1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	Yes

(limit 2,500 characters)

Last year nearly 2 million immigrants entered the US. Miami-Dade saw roughly 10% of all entrants (nearly 200K). Some immigrants gave addresses to our shelters to enter the country. It is difficult to enumerate the exact number of immigrants who entered homelessness because it is not a universal data element collected by HUD in the HMIS, but we suspect 15-20% of first time homelessness may be people entering our county for the first time. The issue was grave last year one of our outreach teams had to specialize in working with migrants almost exclusively.

Miami-Dade's CoC also saw people directly effected by Hurricane Ian. The storms 150 mph winds and heavy rains knocked out power for 2.6 million residents and caused \$12.6 billion in insured losses. The CoC, who has proximity to the affected victims provided shelter and short-term rental assistance to persons affected by Ian.

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

(limit 2,500 characters)

1. The 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 housing 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 including ESG, HOME, SHIP, Multifamily Homeless Preference, Tax Credit referrals, HCV, PBV, EHV, Mainstream & Stability Vouchers, 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; have a Director of Landlord Recruitment & Retention to work w/developers/property managers/investors/providers to facilitate the identification of new housing; deployed PadMission for landlords/navigators; commit local funds, & together w/ARP HOME funding & Miami Foundation Ending Homelessness Fund, acquire & operate new CoC PH/PSH; advocate for increased 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 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 6 rating factors used to rank persons on the CoC by-name list, for referral to PH, utilizes LOT homeless, crisis system utilization, youth and seniors are prioritized, vulnerable households (using VI-SPDAT), victims of DV and people who are medically vulnerable are prioritized. Weekly case staffing is 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 is responsible for overseeing CoC's strategy to reduce LOT

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

(limit 2,500 characters)

1. ES/SH/TH use a 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; seek increased housing inventory through NOFO bonus & PHA/tax credit/Multifamily Homeless Preference set-asides; reallocate underperforming projects; enhance housing navigation & increase job development pathways; \$43M+ in commitments from Participating Jurisdictions to acquire and renovate properties, including hotel to housing conversions, to create a minimum of 500 new units of housing. 2. For RRH, we have developed a report that tells us which households are most likely to return to homelessness (household income <120% of rent) & use bridge housing to ensure households are connected to long-term subsidies. 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 (\$4,000 in RRH & \$5,000 in PSH). Solicitations issued since 2018 require providers from all components to incorporate Housing First and Navigation. We train all components to use SOAR. We incorporate supportive employment through MOU w/CareerSource. Our 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 adopts TBRA policies that outline a process workflow from referral to placement to set targets for improvement & promote housing retention. High performing subrecipients tie employee evaluations to SyS PM. We have used local dollars to fund position which trains/supports housing navigators' systemwide, using Padmission online housing directory & manage landlord mitigation fund. We provide training on & have adopted restorative justice grievance standards to promote housing retention & fair housing standards. 3. The Homeless Trust, the CoC CA, is responsible for overseeing the CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1. 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. The PEC 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.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	
	In the field below:	
1.	describe your CoC's strategy to access employment cash sources;	
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.	

(limit 2,500 characters)

1. The CoC’s strategy to increase employment income includes 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 co-located at ES facilities or sends mobile employment units to ES facilities & has championed supportive employment opportunities, inc. Tech Hire, for CoC youth. MCV has provided living wage jobs to CoC clients & the CoC has engaged in “Benefit Cliffs” discussion where families receiving public benefits assistance are discouraged from pursuing opportunities to gain more income due to fear of losing aid. The CoC also promoted new ARP investments in workforce development, inc. an enhanced Miami employment program that hires formerly homeless, city vendor on-the-job training/apprenticeship program, and incorporating hiring of homeless in projects that receive city funding. The CoC leveraged Fit2Lead paid internships for high school youth. 2. The development of the Homeless Trust Social Enterprise Academy at Chapman Partnership is expanding workforce development apprenticeships. Clients are currently offered 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. A warehouse is being converted to expand the program. Camillus, another large ES/TH/PH provider has CamillusYOUiversity, a training curriculum to help their clients increase income and housing stability. Lotus operates thrift store run by people w/lived experiences. All ES/TH providers have created employment, training & volunteer opportunities, as well as partnered w/employers to create job opportunities for participants. The CoC owns land where a PSH program & farm were built. It is designed to employ formerly homeless at the farm & farmer’s market. CoC led the charge to forge relationships with employers who provide a veteran preference. 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.

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

(limit 2,500 characters)

1. The CoC's 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, food assistance, temp. cash assistance, Medicaid, SNAP and refugee services through the CoC program directly. 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 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 clients for long-term care and Assisted Living Placement when needed. New this year we created an HMIS assessment to screen for and track progress with mainstream benefit applications. 2. The HT, the CoC CA is responsible for overseeing the strategy to increase non-employment cash income.

3A. Coordination with Housing and Healthcare

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

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

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

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

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

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

Project Name	Project Type	Rank Number	Leverage Type
Old Cutler	PH-PSH	47	Both
Citrus Health You...	Joint TH-RRH	78	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? Old Cutler
2. Enter the Unique Entity Identifier (UEI): MR2FSK2Y2JA8
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 47
5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? Citrus Health Youth Housing Program Expansion
2. Enter the Unique Entity Identifier (UEI): MKEJWVSEURF3
3. Select the new project type: Joint TH-RRH
4. Enter the rank number of the project on your CoC's Priority Listing: 78
5. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	Yes
--	-----

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

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

We are submitting two applications for rehabilitation costs as part of two hotel to housing conversions we are acquiring with HOME ARPA and general funds.

Property # 1: (Hideaways by the Bay) Miami-Dade County received a signed offer to purchase a hotel property located at 10821 Caribbean Blvd., Cutler Bay, Florida with the intent of converting it to housing for persons within Miami-Dade County's Continuum of Care, including persons who are disabled and seniors experiencing homelessness. The existing property includes 107 rooms, each with a bathroom, which can accommodate singles and/or couples. Rehabilitation funding is sought through this application to add kitchens and bring the property to HQS standards. 1. Contractors selected for rehabilitation will be required to comply with HUD Section 3 requirements, training and employing persons with low or very low-income. Across the street from the property the town of Cutler Bay sold Southland Mall and have a billion dollar redevelopment project in the works that will provide employment opportunities to benefit formerly homeless, extremely-low income individuals residing in Hideaways by the Bay. 2. All the units in the Hideaways by the Bay property will be dedicated to extremely-low income individuals who are experiencing homelessness at the time of referral.

Property # 2: (The Walkways) Miami-Dade County is currently obtaining appraisals in order to submit an offer for The Walkways in Doral, in order to purchase the property located at 1212 NW 82nd Avenue, with the intent converting it to housing to assist persons experiencing chronic homelessness. The project includes 112 mixed units with a living area, kitchens and bathrooms. Units are already furnished. The Homeless Trust intends on using rehab funding sought for through this grant to fix the roof, and make repairs to bring the facility to HQS standards. 1. Contractors selected for rehabilitation will be required to comply with HUD Section 3 requirements, training and employing persons with low or very low-income. 2. All the units in the The Walkways property will be dedicated to extremely-low income individuals who are experiencing homelessness at the time of referral.

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

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

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

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

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

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

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

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

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

(limit 2,500 characters)

Not applicable.

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

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

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

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

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

4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.

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

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

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

1.	Enter the number of survivors that need housing or services:	6,911
2.	Enter the number of survivors your CoC is currently serving:	3,314
3.	Unmet Need:	3,597

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

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

(limit 2,500 characters)

1. The Domestic Violence Division of Miami-Dade County's Community Action and Human Services Dept (CAHSD) ran an report of encounter data between 10/1/2022-9/30/2023. Encounters include calls to the DV helpline for people seeking housing and services as well as visits to Violence Prevention and intervention Division access points such as the Coordinated Victims Assistance Center (CVAC), shelters, DV intake units collocated at the court house and DV TH programs. 2. OSNIUM. 3. The CoC is unable to place all survivors seeking help in crisis housing because a lack of funding to offer permanent housing options for survivors in DV shelter and TH, creating a demand for crisis housing for everyone in need. To address these gaps we are seeking to expand the Rapid Re-housing program in order to exit survivors who have developed a safety plan and make room for persons at greater risk. CAHSD, the largest DV provider in the county attempts to address gaps by referring to ESG, CoC RRH and EHV; or relocating survivors through the Office of Attorney General; or offering emergency direct relief that pays for hotel, travel costs & rental assistance; or providing standalone support services such as safety planning and legal services through the Coordinated Victims Assistance Center.

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

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

Applicant Name
Community Action ...
Chapman Partnersh...

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	Community Action and Human Services Department,
2.	Project Name	MDC Domestic Violence Rapid Re-Housing Project II
3.	Project Rank on the Priority Listing	49
4.	Unique Entity Identifier (UEI)	MKEJWVSEURF3
5.	Amount Requested	\$819,192
6.	Rate of Housing Placement of DV Survivors—Percentage	100%
7.	Rate of Housing Retention of DV Survivors—Percentage	100%

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

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

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

(limit 1,500 characters)

1. CAHSD used its Management Information System to determine the rate of exits to permanent destinations and rate of housing retention & returns. 2. These rates account for exits to safe housing destinations. 3. OSNIUM an HMIS comparable database licensed DV providers was used to calculate these rates. OSNIUM has a homeless module and uses HMIS Universal Data Elements.

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

Describe in the field below how the project applicant:

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

(limit 2,500 characters)

1. The CAHSD, Violence Prev & Intervention Div (VPID), CoC program currently provides RRH following the Housing First model by ensuring that homeless survivors fleeing domestic violence are able to address their immediate housing needs without any barriers. Staff actively engages the program participants & meets them where they are at the time to ensure that the target population is reached and that services are accessible. All referrals for rapid re-housing are processed by the Housing Coordinator who then assigns the case to one of the Housing Advocates that will contact the survivor within 24 hours or the next business day to begin the process for rapid re-housing placement. The Housing Advocates will assist program participants with identifying affordable properties & complete required housing documents. 2. CAHSD, VPID is the only certified DV provider and the largest access point for homeless survivors of DV in the county. Our prioritization for referral is based on the lethality assessment score. Per the CoC's emergency transfer policy, survivors requesting to move for safety reasons are transferred immediately. 3. The Housing Advocates provide/refer survivors to one of 38 partners such as the Trauma Resolution Center, legal services, Family and Community Job Developers, Early Learning Coalition, GED prep & Career Source. 4. The support services rendered are tailored to ensure survivor's income is increased so that they may sustain rental assistance beyond the program scope. Ongoing support services are rendered for 6 months after discontinuing rental assistance to promote housing stability. 5. Survivors that cannot afford their rent after six months into the program are offered move on EHV vouchers.

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

Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:

1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping information and locations confidential;
4.	training staff on safety and confidentiality policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1. CAHSD, Violence Prevention & Intervention Division (VPID), has a waiting room separated from private offices. Security is provided so that no person in the waiting room enters the private office space without an Advocates consent. 2. The Housing Advocates assist program participants to identify properties away from perpetrators, using client choice and safety planning measures. 3. The shelter location is confidential, visual barriers do not allow neighbors to see inside the property. 4. CAHSD, VPID staff is committed to providing safety to all program participants that are being serviced in the various programs. All staff is required to complete the DCF's Core Competency training, which includes Safety Planning, Risk Assessments, and Confidentiality. Each Advocate performs separate intakes with each member of a couple while the other member waits in the waiting area. 5. CAHSD DV programs utilize the highest measure of security. Congregate site addresses are not published, facilities hide behind tall brush and fences and are secured by armed guards and security cameras. RRH units will be selected by program participants with consideration of their safety plan and client choice.

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

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

(limit 2,500 characters)

The CAHSD Violence Prevention Intervention Division (VPID) and its properties are accredited by Council on Accreditation for Domestic Violence and reviewed annually by Dept. of Children and Families the accrediting organization. The accreditation and DCF monitoring process ensures facilities and programming are able to provide a safe haven to survivors. Files are reviewed to ensure safety plans are completed within 72 hours from intake. Staff training and credentialing is also critical for accreditation and monitoring.

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

Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:

1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;

5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. CAHSD offers rental assistance to survivors exiting ES/TH or survivors who present at access points and refuse shelter. A survivor can approach an access point, complete a safety plan and move directly into rental assistance. CAHSD currently provides RRH following the Housing First model by ensuring that homeless survivors fleeing domestic violence are able to address their immediate housing needs without any barriers. Staff actively engages the program participants and meets them where they are at the time to ensure that the target population is reached and that services are accessible. All referrals for rapid re-housing are processed by the Housing Coordinator who then assigns the case one of the Housing Advocates that will contact the survivor within 24 hours or the next business day to begin the process for rapid rehousing placement. The Housing Advocates will assist program participants with identifying affordable properties & complete required housing documents.

2. It is the policy of the Miami-Dade Community Action and Human Services, Violence Prevention and Intervention Division, to deliver excellent service every day and to treat all program participants with dignity, respect, and in a humanitarian manner utilizing standard professional practices including the Empowerment Model. If individuals believe they have been wrongfully denied access to services, dissatisfied with the quality of services, or dissatisfied with the treatment received by staff, he/she has the right to file a grievance. Clients safety plan are solely based on their choices, they are not steered to make choices they don't agree with.

3. CAHSD provides printed materials on DV resources including Trauma Informed Care to survivors who present at access points, ES or TH.

4. CAHSD uses the Empowerment Model which emphasizes and builds upon the survivors decision making power.

5. Miami-Dade County, CAHSD, VPID, provides services to eligible individuals regardless of race, religion, color, national origin, gender, age, mental or physical disability, sexual orientation, citizenship, immigration status, marital status, gender identity, or language spoken. As an organization seeking social and economic justice for all people. VPID is committed to promoting multi-racial coalition-building, advocacy and community organizing activities among Lesbian, Gay, Bisexual, Two-Spirit, Questionable, Trans and Gender Non-Conforming (LGBTQSTGNC), people of color, and with allies in struggles for equality and liberation. We respect their choices and honor them in the delivery of services. Our philosophy of service is victim centered with a multidisciplinary approach. Through extensive trainings, technical assistance, and on-going advocacy. Upon hiring, staff is required to complete several trainings along with the DCF's Core Competency training on: Access Civil Rights, Access Self Service Portal DCF Security Awareness, Advocacy- Individual and Systems, Anti-Bullying and Anti-Harassment, Annual Emergency Management Plan, Blood Borne Pathogens, Conflict Resolution/De-Escalation, Creating a Welcoming and Culturally Responsive Environment, Cultural Diversity, Culturally Responsive, Cultural Humility, Data Security, Awareness, Emergency Management/Fire Drill Safety, Domestic Violence in LGBTQ Relationships, First Aid and CPR, HIPPA, Limited English Proficiency, Mental Health and Substance Use Coercion, Office of Justice Civil Rights, Safety Planning, Serving our Customers who are Deaf or Hard of Hearing, Trauma Informed Care, Trauma Self Care, Privacy and Confidentiality, Victim-Advocate Privilege and Confidentiality.

6. VPID provides voluntary support groups, tutoring, empowerment groups, spiritual groups and peer support groups. Groups are provided in English, Spanish and creole.

7. The Trauma Resolution Center offers voluntary parenting classes on-site and the Children's Home Society offers parenting for DCF involved families on-site. CAHSD Early Head Start/Head Start and the Early Learning Coalition of Miami-Dade County

offer childcare to survivors referred by VPID.

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

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

(limit 5,000 characters)

CAHSD Violence Prevention Intervention Division (VPID) support services include a Advocate Coordinator who develops housing stability and safety plans for each program participant during screening. Advocates and Aides who perform direct services and maintain safety planning while connecting clients to services that promote housing stability. Housing Navigator to facilitate housing search and rapid placement. The budget includes child care, educational services, employment assistance and job training which leverages the CoC MOU with CareerSource of South Florida, food, legal services through Legal Services of Greater Miami/Cuban American Bar Assoc./Dade Legal Aid/State Attorneys Office/Office of Attorney General who may assist with custody issues, restraining orders and claims, life skills training inclusive of how to build your credit and repair bad credit, healthcare inclusive of mental health and transportation.

CAHSD Injunction for Protection project has assisted DV survivors to pursue child custody and obtain restraining orders through an internal unit comprised of 7 FTE Attorneys and 3 FTE Paralegals. Financial literacy workshops assess whether survivors needed credit repair services, establish savings, etc.. Financial literacy is provided through our partners, Employability unit of the Family and Community Division and the Economic Justice Advocacy which specialize in assisting survivors to restore their credit and budgeting which prepares survivors to pay market rent. CAHSD employs several housing navigators to identify local landlords and apartments. CAHSD partnered with Children of the Night to provide GED classes to survivors enrolled in our program.

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

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

1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;

	5. center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
	6. provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
	7. offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. CAHSD will continue to offer rental assistance to survivors exiting ES/TH or survivors who present at access points and refuse shelter using the current lethality scale to prioritize persons served. A survivor can approach an access point, complete a safety plan and move directly into rental assistance. CAHSD will continue to follow Housing First model and ensure survivors are able to address their immediate housing needs without any barriers. Staff will actively engage the program participants and meet them where they are at the time to ensure that the target population is reached and that services are accessible. All referrals for rapid re-housing will continue to be processed by the Housing Coordinator and assigned to Housing Advocates that will contact the survivor within 24 hours or the next business day to begin the process for rapid rehousing placement. The Housing Advocates will assist program participants with identifying affordable properties & complete required housing documents.

2. CAHSD will continue to enforce its policy to deliver excellent service every day and to treat all program participants with dignity, respect, and in a humanitarian manner utilizing standard professional practices and the Empowerment Model that leads with client choice. We have created Anti-Bullying and Anti-Harassment policies in line with Creating a Welcoming and Culturally Responsive Environment technical assistance. If individuals believe they have been wrongfully denied access to services, dissatisfied with the quality of services, or dissatisfied with the treatment received by staff, he/she has the right to file a grievance.

3. CAHSD will continue to provide printed materials on DV resources including TIC to survivors who present at access points, ES or TH.

4. CAHSD will continue to use the Empowerment Model which emphasizes and builds upon the survivors decision making power. Our safety and service plans focus on the survivors strengths, an example of this is matching survivors who had no work experience to jobs that align with their strengths, such as advocacy, counseling, hospitality...

5. Miami-Dade County, CAHSD, VPID, will continue to provide services to eligible individuals regardless of race, religion, color, national origin, gender, age, mental or physical disability, sexual orientation, citizenship, immigration status, marital status, gender identity, or language spoken. As an organization seeking social and economic justice for all people. VPID is committed to promoting multi-racial coalition-building, advocacy and community organizing activities among Lesbian, Gay, Bisexual, Two-Spirit, Questionable, Trans and Gender Non-Conforming (LGBTQSTGNC), people of color, and with allies in struggles for equality and liberation. We respect their choices and honor them in the delivery of services. Our philosophy of service is victim centered with a multidisciplinary approach. Through extensive trainings, technical assistance, and on-going advocacy. Upon hiring, staff is required to complete several trainings along with the DCF's Core Competency training on: Access Civil Rights, Access Self Service Portal DCF Security Awareness, Advocacy-Individual and Systems, Annual Emergency Management Plan, Blood Borne Pathogens, Conflict Resolution/De-escalation, Cultural Diversity, Culturally Responsive, Cultural Humility, Data Security, Awareness, Emergency Management/Fire Drill Safety, Domestic Violence in LGBTQ Relationships, First Aid and CPR, HIPPA, Limited English Proficiency, Mental Health and Substance Use Coercion, Office of Justice Civil Rights, Safety Planning, Serving our Customers who are Deaf or Hard of Hearing, Trauma Informed Care, Trauma Self Care, Privacy and Confidentiality, Victim-Advocate Privilege and Confidentiality.

6. VPID will continue to provide voluntary support groups, tutoring, empowerment groups, spiritual groups and peer support groups. Groups are provided in English, Spanish and creole. CAHSD will continue its partnership with the Trauma Resolution Center to offer voluntary parenting classes on-site and the Children's Home Society to offer

parenting for DCF involved families on-site. 7. CAHSD Early Head Start/Head Start and the Early Learning Coalition of Miami-Dade County will continue to offer childcare to survivors referred by VPID.

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(f)	

Describe in the field below how the new project will involve survivors:

1.	with a range of lived expertise; and
2.	in policy and program development throughout the project's operation.

(limit 2,500 characters)

1. The county's 15 member Domestic Violence Oversight Board includes lived expertise among their membership. The CoC's Lived Experience Working group co-chair has lived DV experience. Community Action and Human Services Department (CAHSD) hires survivors to provide direct services. They also have a Survivors Committee to listen to the expertise of people with lived experience, evaluate the DV system and make recommendations to policy and program development. The new project will also provide a hiring preference for people with lived expertise. 2. CAHSD will continue to obtain feedback from people with lived experience, empower them to evaluate the DV system and make recommendations to policy and program development through the Survivors Committee.

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	Chapman Partnership, Inc.
2.	Project Name	Chapman Partnership Cares
3.	Project Rank on the Priority Listing	50
4.	Unique Entity Identifier (UEI)	USJZJ13SM6Q7
5.	Amount Requested	\$1,408,156
6.	Rate of Housing Placement of DV Survivors-Percentage	49%
7.	Rate of Housing Retention of DV Survivors-Percentage	98%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:	
	1. how the project applicant calculated both rates;	
	2. whether the rates accounts for exits to safe housing destinations; and	
	3. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

(limit 1,500 characters)

APR data from HMIS between October 1, 2022 to August 30, 2023 was utilized by Chapman Partnership to observe number of DV survivors served. We served 198 survivors of DV that self-disclosed their domestic violence (DV) history at shelter admission. This represents nearly 20% of the total DV clients served throughout Miami-Dade County’s Homeless Continuum of Care (CoC) as documented in HMIS. Of the 198 clients served by Chapman Partnership, 97 were successfully outplaced into permanent housing (49%), 62 clients (32%) are still current shelter residents, and 38 clients (19%) did not disclose their exit destination or had a negative outcome. 98% of all DV exits to permanent destinations remain stably housed.

2. 49% or 97 DV clients were successfully placed in a safe housing destination.
3. HMIS was used to calculate the rate of exits to permanent housing from the emergency shelter setting, and the rate of housing retention based upon Follow-Up Case Management. Once awarded DV Survivors funding, we will create a project within HMIS that has the capability of better tracking metrics of this subpopulation.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project applicant:	
	1. ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
	2. prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan, etc.;	
	3. determined which supportive services survivors needed;	
	4. connected survivors to supportive services; and	
	5. moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1. Chapman Partnership operates two Homeless Assistance Centers that nightly house 800 men, women and children. At shelter admission, a Case Plan is created for every household. This plan identifies survivors feeling/attempting to flee DV based on self report. This includes an oral statement by the individual or head of household seeking assistance. From the intake documents, a safety plan is developed that includes identifying safe, affordable housing without barriers. The Housing Stability Plan is a component of the Case Plan and is based upon a Housing First model. Clients meet with their assigned case manager once weekly until successfully outplaced. A dedicated Housing Specialist assists clients in locating client-choice rental properties, provide lease negotiation/execution, move-in assistance, tenancy education and housing program support. Chapman also served as the support service provider to persons assigned EHV vouchers, including DV survivors. 2. All referrals to Chapman Partnership come from the CoC's Coordinated Entry. SO teams make referrals, staff discuss residents at CoC By Name List meetings to prioritize for referral to PH. The CoC prioritizes persons fleeing or attempting to flee DV for RRH or PSH if they are disabled. 3. Case Plan identifies the supportive services needed to address the varied and complex needs of DV survivors. This includes helping to facilitate reconnecting survivors that have been isolated and/or alienated from their family and support network by the perpetrator; and legal services and assignment of an advocate through referral to the county's Coordinated Victim Assistance Center. 4. Through weekly case management meetings, the client's assigned Case Manager tailor's client connections to a multitude of partnering agencies, such as CASHD and the Coordinated Victims Assistance Center, MUJER and legal services, as well as internal Chapman resources (i.e., onsite medical/psychiatric services, vocational education/training, HeadStart and afterschool/summer programming for children, etc.). 5. Focus is placed on increasing income (benefits access and earned income) in an effort to sustain housing once the housing subsidy ends. Survivors participate in the Follow-Up Program for up to 12 months, with low-to-high touch (once weekly to once monthly) case management as determined prior to shelter exit. Follow-Up Case Manager ensures that survivors are continually assessed as to the need for additional supportive services.

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

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

(limit 2,500 characters)

1. Chapman observes privacy and confidentiality. Persons entering the shelter may chose to do so anonymously, meaning their name, DOB and SSN are not entered into HMIS. Our facilities are not walk-up shelters and maintain a security guard at every entrance. Only clients with a Chapman ID are allowed entry into the facility. The intake/admissions process includes meeting the household and referring outreach team, with a designated Intake Coordinator in a private office. 2) Households w/children are placed in private dorms & no client names are visible in the dorms. Chapman Housing Specialists work with clients to identify and locate client-choice rental units, which ensures that properties are not within the vicinity of the perpetrator. Prior to outplacement, and as a component of the Case Plan, the goals/objectives within the plan include safety planning measures. 3. The shelter location is confidential, there are no signs on the outside of either Homeless Assistance Center (intentional for the safety and privacy of all residents), and there are visual barriers that do not allow neighbors to see inside of the property. All client information (i.e., intake/admission documents, case notes, etc.) is entered into HMIS and can only be accessed by staff as assigned at admission and for the purposes of case management. 4) Staff training is provided internally through ADP's Learning & Development platform, as well as contracted with outside providers/partners for specialized trainings. Employee training includes touch points throughout the employee life cycle (i.e., at onboarding, required annual trainings, periodic refreshers, needs based assigned development and/or compliance training). All case managers are required to take DCF's Core Competency training, which includes Safety Planning, Risk Assessments, and Confidentiality; and are trained in Trauma Informed Care (TIC). 5. Chapman allows clients to enter anonymously, not printing names on badges if chosen. Client names don't appear on rooms. Clients may transfer between facilities located several miles apart for safety. Housing Specialists work with clients to identify the PH that supports successful exit and retention in PH & links clients with resources augmenting housing stability. Community Housing Specialists work in the community to pre-identify landlords and units countywide that meet the client-centered needs of each outplacement, thereby speeding up the housing process.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects. NOFO Section I.B.3.I.(1)(d)	
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Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

Chapman Partnership identified an area for improvement during the course of serving survivors. They performed a safety risk analysis with the City of Miami police department which led to our adding camera's and purchasing ScanPoint a software that enables us to scan services through client ID cards. We operate as the primary private sector partner to the Miami-Dade County Homeless Trust, and serve as the primary coordinated entry point into emergency shelter in this community. Over the course of the past 10 months, 198 individuals self-identified at shelter admission as fleeing domestic violence. All clients that self-identify as DV victims/survivors are provided with safety planning to minimize danger, connected to the Coordinated Victims Assistance Center (CVAC) for legal services and to be assigned an Advocate, and offered relocation if they chose to leave the shelter, county or state. We work with CVAC when survivors chose to be relocated to a certified DV shelter or transitional housing program.

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

Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:

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

(limit 5,000 characters)

1. From shelter admission, Chapman’s client-centered Housing First model prioritizes stabilization of the family unit, with the Housing Stability Plan identifying victim-centered choice for permanent housing placement. The client, Case Manager and Housing Specialist work as a team to accommodate participant’s wishes and stated needs. Internal and external Housing Specialists facilitate a warm hand-off from the shelter setting to successful outplacement, including ensuring access to affordable housing, completing all required housing documents, and move-out assistance. 2. The mission of Chapman Partnership is to deliver program and services in collaboration with others that assist those we serve with dignity and respect to overcome homelessness and achieve and maintain long-term self-sufficiency and independence. Our core values are passion, compassion, teamwork, innovation, and results-driven accountability. Staff are trained to respect and support all clients, with case management using Motivational Interviewing as its primary counseling methodology to help clients resolve ambivalent feelings and insecurities to find the internal motivation they need to make difficult life changes. Chapman’s client Grievance Policy was developed in accordance with state guidelines, and to support each client’s right to voice grievances (e.g., complaints about treatment, care, quality of services, etc.). All efforts are made at every level of the organization to actively seek a resolution in the case of a client grievance, and keep the client appropriately apprised of our progress toward resolution. 3. While case management staff has been trained in TIC, Chapman is embarking upon a two-year process to thoroughly train the organization top-down in TIC practices. TIC training is funded through a recent Jeff Bezos Day 1 Families Fund grant, through which Chapman conducted an in-depth analysis of organizations offering TIC training and certification. Barry University was selected as the contracted provider based on its ability to create a customizable, individualized program and offer a locally accessible team. Barry is currently developing the training curriculum with training rollout to commence October 2023. 4. Chapman Case Managers serve as strength-based coaches and use the Empowerment Model to help clients emphasize and build upon their decision-making power. For example, survivors are exposed to several career opportunities during their stay and chose careers that align with their strengths. The Case Plan incorporates strengths-based, survivor-defined goals and aspirations, with objectives identifying actionable steps that lead to goal accomplishment. 5. Chapman Partnership’s services are grounded in cultural responsiveness and inclusivity, providing services regardless of race, religion, color, national origin, gender, age, mental or physical disability, sexual orientation, citizenship, immigration status, marital status, gender identity or language spoken. Services are available in English, Spanish and Haitian-Creole, with translation in other languages provided as determined by need. Our foundational principles were built upon ensuring that all human rights for all people are respected equally. Today more than ever, we value and work diligently toward a compassionate, collaborative environment built on mutual dignity and respect for all – from a corporate sponsor, to individual donor, Board of Trustee member, to the 3,000 men, women and children annually served at our two Homeless Assistance Centers. We exist so that all members of our community have the opportunity to share in the American Dream – safe, stable housing, a living wage, and opportunities to move beyond the confinements defined by their present situation. 6. Chapman’s two Homeless Assistance Centers offer a variety of onsite services that include Life Skills Training, Wellsprings Counseling (peer support and psycho-educational groups, family and individual counseling), and a Spiritual Life & Wellness Program (SL&WP). Spirituality and wellness are pillars of Chapman Partnership’s mission. The

SL&WP provides tools and resources to empower residents to embrace and strengthen body, mind and spirit. This includes Wonder Woman Wednesdays whereby guest speakers provide motivation and inspiration. 7. Parenting classes are a component of the onsite Family Resource Centers that provide afterschool/summer programming and evening family enrichment activities. Parenting classes are coordinated in partnership with Miami-Dade County Public Schools and local community- and faith-based providers. Legal services are outsourced to Legal Services of Greater Miami. Once outplaced, families are connected with the Early Learning Coalition of Miami-Dade County offering free childcare.

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

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

(limit 5,000 characters)

Chapman Partnership’s support services include a designated Case Manager at shelter admission that helps survivors develop a Case Plan that facilitates connections to the various services needed that support their movement into permanent housing and addresses their safety needs. The budget includes a percentage of salary for two Case Managers, the Director of Education & Training, and the Sr. Director of Support Services, all of which work collaboratively in assisting survivors in accomplishing the goals and objectives as outlined in the Case Plan. Connections provided to survivors include Life Skills Training; Wellspring Counseling (peer support and psycho-educational groups, family and individual counseling); Spiritual Life & Wellness Program which offers workshops that provide the tools and resources survivors need to embrace and strengthen their body, mind and spirit; reconnecting survivors to family and their support network, if alienated during the DV crisis; childcare; and legal services. Through Legal Services of Greater Miami and the State Attorney’s Office (SAO) clients are connected to the Domestic Assistance Response Team (DART). DART provides continuing contact with the victim on a regular basis long after involvement in Chapman Partnership’s 12-month Follow-Up Program. Legal Services of Greater Miami and the SAO assist with custody issues, restraining orders and claims, etc. Clients are additional provided financial management classes to foster financial literacy and security (i.e., managing expenses, budgeting, etc.) provided by collaborating financial institutions (e.g., Wells Fargo, Bank of America, etc.); onsite health and psychiatric care while residing at Chapman Partnership (Jackson Health System operates Chapman Partnerships medical clinics located at both Homeless Assistance Centers), with referrals to a Jackson community-based clinic prior to permanent housing outplacement; and employment education (upskilling and reskilling training) and job placement during and post shelter stay. Chapman Partnership maintains collaborative relationships with Miami-Dade College, Miami-Dade County Public Schools Adult Education Program and Dorsey College through which onsite, short-term apprenticeships are offered in industries specific to South Florida’s economy (i.e., healthcare, IT, construction, etc.). Chapman’s Housing Navigation program facilitates successful outplacements.

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

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

(limit 5,000 characters)

1. Chapman Partnership's Housing Specialists will continue to provide a highly specialized housing navigation model that includes internal and external resources that successfully connect clients with client-centered permanent housing based upon participant's wishes and stated needs. All clients assisted through the Chapman Partnership DV TH/RRH Project will be provided with sliding scale rental assistance, with the amount of assistance higher at the beginning and scaling down as clients become more stabilized. The amount of monthly assistance is determined during the shelter stay and based upon income assessments. Clients are provided assistance during shelter stay to secure income prior to outplacement that highly supports their housing stability. A savings plan is also developed prior to outplacement, and no client pays more than 30% of their income on rent. 2. Chapman Partnership will continue to operate in accordance with our core values of passion, compassion, teamwork, innovation, and results-driven accountability. Mutual respect is the cornerstone within which case management is provided and Motivational Interviewing will continue to be the primary counseling methodology used to help clients make difficult life changes. The client Grievance Policy is a steadfast component of the admissions process and ensures that program participants have the means and opportunities to express and voice grievances (e.g., complaints about treatment, care, quality of services, etc.), with Chapman committed to providing an environment where they can flourish. 3. Trauma Informed Care is integrated throughout our programming, and includes the way in which services are provided, with every effort made to minimize further trauma. While case management staff have been trained in TIC, Chapman is embarking upon a two-year process to thoroughly train the organization top-down in TIC, which will lead to our being certified as an organization in TIC practices. Barry University, the contracted training entity, is currently developing a customized curriculum with training rollout to commence October 2023. This training will elevate Chapman Partnership's implementation of the highest pinnacle in TIC throughout Miami-Dade County's Homeless CoC. 4. Case Managers will continue to serve as strength-based coaches and use the Empowerment Model to help clients emphasize and build upon their decision-making power. For example, our Case Plan incorporates questions about client strengths to help us develop strengths-based, survivor-defined goals and aspirations, with objectives identifying actionable steps that lead to goal accomplishment. 5. Chapman Partnership will continue to ground services in a culturally responsive and inclusive way that ensures that all clients are treated fairly and without discrimination. This includes providing services in English, Spanish and Haitian-Creole, with translation in other languages provided as determined by need. 6. All TH:RRH clients served will have access to Life Skills Training, Wellsprings Counseling (peer support and psycho-educational groups, family and individual counseling), and the Spiritual Life & Wellness Program (SL&WP) that provides workshops and other tools and resources to empower residents to embrace and strengthen body, mind and spirit. 7. Parenting classes will be offered through the onsite Family Resource Centers that provides afterschool/summer programming and evening family enrichment activities. Parenting classes will continue to be coordinated in partnership with Miami-Dade County Public Schools and local community- and faith-based providers. Legal services are a component of the budget and will be outsourced to Legal Services of Greater Miami, with additional referrals made to programs/services offered through the State Attorney's Office, to include addressing safety and confidentiality (i.e. working with the State Attorney's Office to obtain a substitute mailing address in order to prevent assailants from finding them). Once outplaced, families will be connected with the Early Learning Coalition of Miami-Dade County, which offers

free childcare.

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(f)		
Describe in the field below how the new project will involve survivors:		
1.	with a range of lived expertise; and	
2.	in policy and program development throughout the project's operation.	

(limit 2,500 characters)

1. Chapman Partnership is the private-sector partner of the CoC lead agency. The CoC's Lived Experience Working Group is co-chaired by a person with lived DV experience. Currently, 18% of Chapman Partnerships 170 staff members have lived experience of homelessness. This includes individuals who were former survivors of DV. 2. Chapman utilizes lived expertise to develop policies, programs and operational procedures that enhance the services provided to all residents. As the face of homelessness has changed dramatically since the opening of Chapman Partnership North in 1995 (500 nightly beds) and Chapman Partnership South in 1998 (300 nightly beds), we continue to evolve throughout our operational footprint to address new and emerging needs. Staff members work collaboratively with the Homeless Trust, the CoC, as well as other providers locally and nationally to develop a better understanding of the evidence-based practices specific to the populations served. Through the Empowerment Model, we too are enabled to develop a better understanding of how these practices are best aligned with the needs of current residents. Additionally, client surveys and feedback forms completed during and post-shelter provide essential feedback in the development of policies and the modification of programs, as warranted by need, with the ultimate goal to further our client's long-term housing stability, self-sufficiency and independence.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	07/27/2023
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	08/30/2023
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	08/30/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	08/30/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	07/27/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	08/30/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	07/27/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	08/30/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/13/2023
1E-5b. Local Competition Selection Results	Yes	Local Competition...	08/30/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting—CoC-A...	09/22/2023

1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	09/22/2023
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HUD's Homeless Da...	07/28/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/22/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/06/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: Web Posting–CoC-Approved Consolidated Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: HUD's Homeless Data Exchange (HDX) Competition Report

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	07/27/2023
1B. Inclusive Structure	09/22/2023
1C. Coordination and Engagement	09/22/2023
1D. Coordination and Engagement Cont'd	09/22/2023
1E. Project Review/Ranking	09/22/2023
2A. HMIS Implementation	08/30/2023
2B. Point-in-Time (PIT) Count	09/22/2023
2C. System Performance	09/22/2023
3A. Coordination with Housing and Healthcare	09/09/2023
3B. Rehabilitation/New Construction Costs	09/22/2023
3C. Serving Homeless Under Other Federal Statutes	09/22/2023

4A. DV Bonus Project Applicants	09/22/2023
4B. Attachments Screen	09/22/2023
Submission Summary	No Input Required

Section 8 Administrative Plan
for the
Public Housing and Community
Development

Housing Choice Voucher

Revised: 2/25/2021

Public Housing and Community Development
701 NW 1st Court, 14th Floor
Miami, Florida 33136-3914

Displacement Due to Government Action. Families living in Miami-Dade County displaced or at risk of being displaced due to a governmental action, including Public Housing Development Plans, must be referred and verified. The referral for Housing Choice Voucher assistance must be made within six (6) months of the displacement in order for such families to qualify for Housing Choice Voucher assistance. Written referrals may also be accepted from USHUD, appropriate federal, state and local law enforcement agencies, the State Attorney's Office, or by the courts, including requests for assistance for eligible clients under witness protection.

Homeless – In an effort to address the risk of homelessness, PHCD may collaborate with the Homeless Trust on referrals of persons transitioning out of a shelter, transitional housing program, rapid re-housing program or permanent supportive housing.

Veterans – PHCD, at its sole discretion, may provide an admission preference over new admissions to applicants whose head or co-head are eligible veterans. A veteran is a person who:

1. *had at least 180 days of regular active duties and was honorably discharged or released; or*
2. *had at least 90 days of active duty service, of which at least one (1) day of service was in a war conflict and was honorably discharged or released; or*
3. *served in a war conflict and was awarded a Purple Heart or became disabled, regardless of completion of days of active duty.*

The veteran status extends to spouses, widows, widowers and parents of the military killed during a time of war. Applicants claiming a veteran's preference must provide a copy military service record, proof of service, or the discharge documents (Form DD214) of the veteran for whom the preference is claimed.

Mainstream Preference – This preference is specific for non-elderly persons with disabilities who are homeless per 24 C.F.R. 576.2 or transitioning out of institutional and other segregated settings or are at serious risk of institutionalization.

ii. **Income Targeting Requirement [24 CFR 982.201(b)(2)]**

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income, whichever number is higher. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

PHCD Policy

- (4) The opening and closing of registration periods will be advertised on social media platforms, newspaper publications and the radio for the purpose of reaching all segments of the community and providing advanced notice.
- (5) PHCD may choose from various options regarding when and how to open, administer, and populate the waiting, subject to approval by the Board.
- (6) Some of these options may include an exclusive electronic open waiting list, where ranking is based on the date and time of application or any applicable factors that the agency may adopt, subject to approval by the Board.
- (7) Placement on the Waiting List

PHCD will determine the number of applications to be selected for placement on the waiting list based on historical and empirical data. The waiting list number represents the number of applications that need to be reviewed in order to result in the issuing of enough vouchers to absorb all underlying funding within a 12 to 18-month period. After that, subject to the Board of County Commissioners' approval, the list will be reopened.

PHCD will select applicants to be placed on the waiting list via an electronic drawing and random selection process. The applicants will be placed on the waiting list in order of the assigned numbers and according to PHCD admission preference(s) described in this chapter.

Those families not selected from the pool for placement on the waiting list will be sent a notice that they were not selected, informing that they may apply the next time PHCD's waiting list is open.

- (8) Subject to approval by the Board, PHCD proposes to establish site-based waiting lists for its Section 8 Project-Based Voucher Program and pursuant to the following policies:
 - Interested families will apply with PHCD.
 - Adopted admission preferences will be available for applicants to request during open registration.

Note that under the site-based waiting list approach, families apply for the properties that best meets their needs, such as access to employment, family support, school, public transportation, hospital, medical facility, etc. Implementing a site-based waiting list will expedite leasing process as families are only referred to properties, they expressed interest in residing.

(a) Initial Process

Subject to approval by the Board, existing applicant families on the 2008 Tenant-Based waiting list will be provided an opportunity to select and apply for the properties that best meets their needs prior to opening the waiting list to the general public.

(b) Search Time

- The initial term of the Section 8 voucher continues to be 60 days from the date of voucher issuance. PHCD may extend the initial term for 60 additional days not to exceed an overall total of 120 days in accordance with the Section 8 Administrative Plan.
- The voucher term may be extended beyond 120-day as a reasonable accommodation.

b) Admission Preference

(1) Admission preferences include:

- Veterans
- Homeless referred by the Miami-Dade County Homeless Trust pursuant to the executed memorandum of understanding.

HACMB's Administrative Plan is applicable to the operation of the Housing Choice Voucher Program, (including the Project-Based Voucher and Housing Choice Voucher-funded Homeownership Programs), Veterans Affairs Supportive Housing (VASH), Mod-Rehabilitation Program, Single Rental Occupancy (SRO), and Miami-Dade Homeless Trust Moving Up Program.

1-I.E. THE PHA'S COMMITMENT TO ETHICS AND SERVICE

As a public service agency, the PHA is committed to providing excellent service to HCV program participants, owners and to the community. The PHA's standards include:

INTRODUCTION - Project-Based Assistance (PBA)

This section applies to units developed or rehabilitated under the Section 8 Project-Based Assistance (PBA) Program and placed under an annual HAP contract between the owner and HACMB. The term of the contract is concurrent with the term of the funding increment under which the units were developed, but the contract can be renewed if the funding increment is renewed. Except with respect to the following, HACMB's policies for these units are the same as those for the HCV tenant-based program.

HACMB's PBA Program is located at the following:

Harding Village, 8500 Harding Avenue, Miami Beach, FL 33141, consists of 20 zero (0)-bedroom units designated for formerly homeless, disabled individuals. The preference for this program is:

Homeless and Disabled

1. When a PBA unit becomes vacant, the Owner is required to refer an applicant from its waiting list to HACMB to determine eligibility. If the applicant's name appears on another HACMB housing program waiting list, their name will not be removed from that list.
2. If the Owner leases a vacant unit anytime after the 1st of the month, HACMB will prorate the rent for that month starting the date the tenant moves in.
3. Owners who do not make required repairs to a PBA unit within 90 days will have their HAP contract terminated or, in the case of multiple units under one HAP contract, have their contract amended to exclude the unit.
4. Families living in PBA units that are terminated for Owner non-compliance or Owner opt-out will have their form of assistance converted to a Section 8 voucher.

Chapter 19

SECTION 8 MODERATE REHABILITATION SINGLE ROOM OCCUPANCY PROGRAM FOR HOMELESS INDIVIDUALS

[24 CFR 882, Subpart H]

INTRODUCTION

The following shall constitute the Housing Authority of the City of Miami Beach's (HACMB) policies and procedures for the implementation of the Section 8 Moderate Rehabilitation Single Room Occupancy (SRO) Program for Homeless Individuals. These procedures are in accordance with 24 CFR 882, Subpart H and are in conjunction with the Section 8 Administrative Plan. The designated Public Housing Agency (PHA) shall be the administering agency for the SRO Moderate Rehabilitation Program for HACMB.

The purpose of the program is to provide rental assistance targeting very low income elderly homeless persons, but not excluding an otherwise eligible person on the basis of age, in rehabilitated SRO housing. The housing assistance payments to owners/providers will be equal to the rent of the unit, including utilities, minus the tenant(s) portion of the rent payable by the tenant(s). The United States Department of Housing and Urban Development (US HUD) will make the assistance available for ten (10) years for each SRO project.

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HCV Admin Plan

All evictions must be carried out through the Judicial Process under State and local law. An owner/provider must not terminate or refuse to renew the lease except on the grounds identified under the Termination of Tenancy Section of this Administrative Plan.

XII. PARTICIPATION OF HOMELESS INDIVIDUALS

Miami-Dade County Homeless Trust ("Trust"), in compliance with its Charter, will ensure that at least one homeless or formerly homeless person is on the board of directors, or otherwise involved in consideration of policies and decisions. The Trust will involve, to the maximum extent feasible, homeless persons in employment, volunteer services, constructing or rehabilitating property, and in providing supportive services.

XIII. RECORDS AND REPORTS

HACMB will make any reports as US HUD may require in the time frame required. The owner/provider will be required to provide data collection information for each participant in the format required by the PHA.

Page 1914

HCV Admin Plan

Actual and imminent threat refers to a physical danger that is real, would occur within an immediate time frame, and could result in death or serious bodily harm. In determining whether an individual would pose an actual and imminent threat, the factors to be considered include:

- The duration of the risk;
- The nature and severity of the potential harm;
- The likelihood that the potential harm will occur; and
- The length of time before the potential harm would occur.

Eviction or termination of assistance should only be used by HHA or owner when there are no other actions or remedies to reduce or eliminate the threat, including when actions or remedies are unavailable. This is the case even when time periods could reasonably be called "immediate." Some possible actions for HHA or owner to take to reduce or eliminate the threat are listed at 24 CFR 5.2005(d)(4). HUD encourages HHA and owners to work with local law enforcement to prevent or remedy instances where a threat may occur to better protect the victim and other tenants in the community.

HHA may consider the following actions to reduce or eliminate an "actual and imminent" threat:

- a) Barring the perpetrator from the property;
- b) Changing the victim's locks;
- c) Installing basic security features (e.g., better lighting or an alarm);
- d) Encouraging the victim to seek an emergency transfer;
- e) Allowing an early lease termination;
- f) Allowing the victim temporary absence from the assisted unit;
- g) Helping the victim access available services and support (e.g., providing information for a local victim service provider and civil legal assistance providers, to help the victim get any necessary court orders); and/or
- h) Working with police and victim service providers to develop a safety plan for the property and victim.

3-III.B.17 Establishing Waiting List Preferences

The VAWA Final Rule clarifies that HHA may establish preference for victims of dating violence, sexual assault, and stalking, in addition to domestic violence. (See 24 CFR 960.206(b)(4), 982.207(b)(4).) HHA should consider whether to adopt a local preference for admission of families that include victims of domestic violence, dating violence, sexual assault, or stalking.

HHA's system of local preferences must be based on local housing needs and priorities by using generally accepted data sources and information obtained through the PHA Plan public comment process. HUD encourages HHA to work collaboratively with health care providers, social service providers, homeless services providers, Continuums of Care (CoCs), and local offices of government and community organizations to establish a system of preferences based on local housing needs collectively identified by the community.

Adopted by Board of Commissioners: August 27, 2019

4-II.C. OPENING AND CLOSING THE WAITING LIST [24 CFR 982.206]

Closing the Waiting List

The HHA should consider closing its waiting list when it has insufficient funds available to assist all applicants on the waiting list over a reasonable period of time. The HHA may choose to close only a portion of its waiting list instead of the entire waiting list. For example, the HHA may continue to receive applications from families qualifying for a specific local preference category, i.e. homeless families, while closing its waiting list to all other groups.

HCVP Administrative Plan

4-6

Any local preferences established must be consistent with the HHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

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

HHA Policy

The HHA will offer public notice when changing its preference system. The notice will be publicized using the same guidelines as those for opening and closing the wait list.

The HHA uses the following Local Preference system:

1. Disaster
2. Homelessness
3. Elderly or Disabled
4. Non-elderly disabled applicants who are transitioning out of institutional and other segregated settings at serious risks of institutionalization, homeless or at risk of becoming homeless.

Preferences defined:

1. Disaster 25 points:

Families whose dwelling unit has been declared uninhabitable by a disaster declared or otherwise formally recognized pursuant to federal disaster laws.

2. Moving Up ("MU") 20 Points

HCVP Administrative Plan

4-10

1. The units are specifically made available to house individuals and families that meet the definition of homeless under section 103 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302), and contained in the Continuum of Care Interim Rule at 24 CFR 578.3.
2. The units are specifically made available to house families that are comprised of or include a veteran. A veteran is an individual who has served in the United States armed forces. The HHA may further define "veteran" for purposes of determining if the units are eligible for this exception. For example, HHA could require that the veteran must be eligible to receive supportive services from the Department of Veterans Affairs or require that the veteran was not dishonorably discharged. HHA requires that the veteran was not dishonorably discharged.
3. The units provide supportive housing to persons with disabilities or to elderly persons. The definitions of a person with disabilities and an elderly person are found at 24 CFR 5.403. Supportive housing means that the project makes supportive services available for all of the assisted families in the project and provides a range of services tailored to the needs of the residents occupying such housing. Such services may include (but are

As required by statute, a voucher under this program that is used to provide housing assistance to a youth is time limited to a period of a maximum of 36 months. There is no statutory limitation on the time a family may receive housing assistance under this program. The Hialeah Housing Authority works in conjunction with the Florida Department of Children and Families and Our Kids Inc.

18.I.B. FAMILY SELF SUFFICIENCY PROGRAM.

The FSS Program coordinates existing public and private sector resources and integrated them into personal development programs to assist individuals who need coordinated help. All of our present Section 8 recipients are being offered the opportunity to participate in this program. Interested families meet with our FSS coordinator and together they develop an individual needs assessment. The Head of Household is required to participate

18.I.C. HOMELESS PROGRAM.

In 2016 the Hialeah Housing Authority entered into a Memorandum of Understanding with the Miami Dade County Homeless Trust ("Trust") where 50 Vouchers were allocated to referrals from the Trust for eligible homeless families. The McKinney-Vento Homeless Assistance Act amended by S.896 and the Homeless Emergency and Rapid Transition to Housing "(HEARTH)" Act of 2009 define "homeless" as: "(a) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or

camping ground; (b) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or (c) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.” The Homeless Trust serves both as a referral and source of case management to these individuals. This Trust was subsequently amended in 2019 by adding an additional 25 vouchers to this Trust totaling 75.

18.I.D. MAINSTREAM FOR PEOPLE WITH DISABILITIES PROGRAM.

The purpose of the Mainstream Program is to assist non-elderly families with disabilities by providing rental assistance.

18.I.E. NED – the HHA has administered the Non-Elderly Disabled NED (1) Program since 2001. The program serves income eligible families whose head of household, spouse or co-head is non-elderly (under age 62) and disabled.

18.II.A. FAMILY UNIFICATION PROGRAM (FUP)

INTRODUCTION

The purpose of the Family Unification Program (FUP) is to promote family unification by providing a Housing Choice Voucher to families for whom the lack of adequate housing is a primary factor in the imminent placement of the family’s child, or children, in out of home care; or the delay in the discharge of the child, or children, to the family from out of home care. Youths at least 18 years old and not more than 24 years old who left foster care at age 16 or older, or will leave foster care within 90 days, in accordance with a transition plan described in section 475 (5)(H) of the Social Security Act, and is homeless or is at risk of becoming homeless. As required by statute, a voucher under this program that is used to provide housing assistance to a youth is time limited to a period of a maximum of 36 months.

The HHA works in conjunction with the Florida Department of Children and Families, its subcontracted entity, Our Kids Inc. and the Miami Dade County Homeless Trust.

Application Waiting List

The HHA will accept families and youths certified by Our Kids Inc. as eligible for the Family Unification Program. Upon receipt of the Our Kids Inc. list of eligible families and youths currently in their caseload, HHA will compare the names with those of families and youths currently on HHA’s HCV waiting list. Any family or youth on HHA’s HCV waiting list that

4-III.C. SELECTION METHOD

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

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

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

HHA Policy

The HHA will use the following local preferences with the highest preference following the order of the numbered categories, whereas Category 1 will indicate the highest preference and followed by Category 2:

Category 1: Families terminated from its HCV Program due to insufficient program funding..

Category 2: **Homelessness:** To qualify for this preference, families must qualify as homeless under the HUD Hearth Act's Category 1 definition of homeless which advises that:

- (a) *An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; (b) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or (c) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution."*
- (b) *The HHA has committed no less than eight (8) Vouchers to Homeless Referrals by the Miami Dade Homeless Trust.*

Therefore, the HHA will first assist families that have been terminated from the HCV program due to insufficient funding and then assist families that qualify for the Homeless Preference.

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

Income Targeting Requirement [24 CFR 982.201(b) (2)]

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

4-III.C. SELECTION METHOD

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

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

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

HHA Policy

The HHA will use the following local preferences with the highest preference following the order of the numbered categories, whereas Category 1 will indicate the highest preference and followed by Category 2:

Category 1: Families terminated from its HCV Program due to insufficient program funding..

Category 2: **Homelessness**: To qualify for this preference, families must qualify as homeless under the HUD Hearth Act's Category 1 definition of homeless which advises that:

(a) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; (b) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or (c) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution."

(b) The HHA has committed no less than eight (8) Vouchers to Homeless Referrals by the Miami Dade Homeless Trust.

Therefore, the HHA will first assist families that have been terminated from the HCV program due to insufficient funding and then assist families that qualify for the Homeless Preference.

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

Income Targeting Requirement [24 CFR 982.201(b) (2)]

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

The Housing Authority

of the

City of Miami Beach

Section 8

Housing Choice Voucher

Administrative Plan

Board Approved: Dec. 11, 2018

Effective: Dec. 11, 2018

OUTLINE OF ADMINISTRATION PLAN

CHAPTER 1	OVERVIEW OF THE PROGRAM AND PLAN
CHAPTER 2	FAIR HOUSING AND EQUAL OPPORTUNITY
CHAPTER 3	ELIGIBILITY
CHAPTER 4	APPLICATIONS, WAITING LIST AND TENANT SELECTION
CHAPTER 5	BRIEFINGS AND VOUCHER ISSUANCE
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CHAPTER 7	VERIFICATION
CHAPTER 8	HQS AND RENT REASONABLENESS DETERMINATIONS
CHAPTER 9	GENERAL LEASING POLICIES
CHAPTER 10	MOVING WITH CONTINUED ASSISTANCE AND PORTABILITY
CHAPTER 11	RE-EXAMINATIONS
CHAPTER 12	TERMINATION OF ASSISTANCE AND TENANCY
CHAPTER 13	OWNERS
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CHAPTER 15	SPECIAL HOUSING TYPES
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CHAPTER 18	PROJECT-BASED ASSISTANCE AND SPECIAL PROGRAMS MOD-REHAB
CHAPTER 19	SECTION 8 MOD-REHAB SRO PROGRAM
CHAPTER 20	VETERANS ASSISTED SUPPORTIVE HOUSING PROGRAM (VASH)
CHAPTER 21	"MOVING UP" PROGRAM
CHAPTER 22	GLOSSARY
CHAPTER 23	ATTACHMENTS

CHAPTER 21 MOVING UP PROGRAM

The HACMB has partnered with the Miami-Dade County Homeless Trust ("MDHT"), lead agency for the Miami-Dade County Continuum of Care (CoC), to identify individuals and families ready to transition or "move up" from Permanent Supportive Housing ("PSH") into the HCV Program ("Moving Up Program"). These are families that were homeless prior to entry into the PSH program and who continue to need a rental subsidy but no longer require intensive supportive services.

The HACMB has allocated up to ten (10) vouchers from its Section 8 Housing Choice Voucher Program specifically for targeted households under the MU Program.

The HACMB will accept referrals from the CoC's Coordinated Entry Program following pre-screening by CoC PSH providers, who will use a common assessment tool to identify those individuals and families that are a good candidate for a successful transition from PSH to a HCV.

Qualifying applicants will be given absolute priority over other applicants until the number of HCVs allocated under the MU Program is reached, taking into account any additional preferences for which they qualify, and the availability of vouchers. Once these vouchers have been utilized, no additional priority will be given under the MU Program until a participating "move up" household ends participation in the HCV program, at which point the HACMB will accept a referral for a replacement "move up" eligible family for the next available voucher.

A. Eligibility for Moving Up Program

The eligibility criteria for the MU Program is:

1. The individual/family currently resides in CoC PSH within the City of Miami Beach or if residing in CoC PSH outside of the City of Miami Beach, has had contact with the City of Miami Beach, as evidenced by records in the Continuum of Care (CoC) Homeless Management Information System (HMIS), a local information technology system used to collect client-level data on the provision of housing and services to homeless individuals and families;
2. The individual/family has a stable housing history and no longer needs the intensive support of PSH as determined by the Moving Up Assessment;
3. The individual/ family is willing to participate in the "move-up" strategy voluntarily, understands the nature of the HCV tenant-based program, and provides a written request for Housing Choice Voucher assistance; and

4. The individual/family is a low-income family and otherwise eligible for the HACMB Housing Choice Voucher Program.
5. Local Preferences will then be applied in accordance with the HACMB HCV Program's Administrative Plan to give priority to serving families that meet those criteria.



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 16, 2019

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

Dear Ms. Mallette:

Miami-Dade County Public Housing and Community Development (PHCD) has entered into a Memorandum of Understanding (MOU) with the Miami-Dade County Homeless Trust, the Lead Agency for the Continuum of Care (CoC), to utilize Mainstream (Section 811) Vouchers to assist persons in transitioning out of Permanent Supportive Housing.

To date, the Homeless Trust, through its Housing Coordinator, has referred 44 non-elderly, disabled households to the Mainstream Voucher Program in line with the CoC's Move-Up Orders of Priority and PHCD's admission preference of accepting families referred by the Trust. Additionally, an amendment to PHCD's Annual Plan, currently out for public comment, is being revised to amend its Mainstream non-elderly disabled preference to include non-elderly disabled families who previously experienced homelessness and are currently in permanent supportive housing. Referrals are made in line with the jointly developed Move-Up Assessment Tool and the commitment of CoC-contracted providers to ensure housing navigation and continuing support for households, as needed. Our partnership also serves to further the goals of the Americans with Disabilities Act by helping persons with disabilities live independently in the most integrated community settings. We look forward to expanding this partnership as part of successful award in the FY 2019 Mainstream Voucher Program Competition and working with technical assistance provided by U.S. HUD through CSH to further develop our Move-Up Strategy.

We are grateful for the collaboration and support, including our partnership on the Family Unification and Mainstream Voucher Programs. We look forward to continuing to work with you and your staff to enhance the quality of life for those we serve.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Liu".

Michael Liu
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

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

JULIO PONCE
EXECUTIVE DIRECTOR

September 5, 2019

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

Dear Ms. Mallette:

The Hialeah Housing Authority (HHA) is pleased to expand its partnership with the Miami-Dade County Homeless Trust to better serve homeless and formerly homeless families. HHA has provided 75 Housing Choice Vouchers to the Miami-Dade County Homeless Trust for referrals of homeless households and has committed an additional ten (10) vouchers as part of a Move-Up Strategy to be developed with support from technical assistance provided by U.S. HUD through CSH. As with homeless households, referrals for Move-Up households exiting Continuum of Care (CoC) Permanent Supportive Housing programs will be provided through the Homeless Trust's Housing Coordinator. HHA has also embraced participation in the Homeless Trust's Homeless Management Information System (HMIS) to better track clients and outcomes.

We are grateful for the collaboration and support, including our partnership on the Family Unification and Mainstream Voucher Programs. We look forward to continuing to work with you and your staff to enhance the quality of life for those we serve.

Sincerely,


Julio Ponce
Executive Director
Hialeah Housing Authority



We are an equal opportunity housing provider. We do not discriminate on the basis of race, color, national origin, religion, sex, familial status or disability. This document is available in an alternate, accessible format upon request. Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity offered by the Hialeah Housing Authority should contact the Section 504 Coordinator.

**Memorandum of Understanding (MOU) Between
Miami-Dade Homeless Trust and Miami Beach Community Development
Corporation**

I. OVERVIEW

- Miami Beach Community Development Corporation has adopted an admissions preference for people experiencing homelessness at the following designated affordable housing multifamily properties:
Villa Maria, 2800 Collins Avenue, Miami Beach, FL 33140
- To qualify for the admissions preference, applicants will meet the following definition of homelessness:
 1. "Households that qualify as homeless under the HUD HEARTH Act:¹ Homeless definition paragraph one: (i) those whose primary nighttime residence is not designed as a sleeping accommodation for human beings, (ii) those in shelter, transitional housing, or motels paid for by charitable organizations, and (iii) those exiting institutions after 90 days or less and who were previously homeless."
- Furthermore, all homeless households are subject to a universal screening assessment by the Miami-Dade County Homeless Trust. Homeless households referred to Owner/Agent will be those households deemed best served for rapid placement into rental housing with minimal need for support.
- The Owner/Agent will apply this admissions preference as follows:
 1. Every third vacancy will be dedicated to the homeless preference. The units will be available upon vacancy and held for a minimum of one week (7 calendar days).
 2. The property will have a maximum cap of no more than four (4) units filled by the preference.

II. GENERAL ROLES

- The Owner/Agent will systematically alert the Miami-Dade Homeless Trust of anticipated unit vacancies that can be filled by the homeless preference, the timing of the property's needs for referrals of households, and all of the property's requirements for screening and admitting new tenants under the preference. Details outlined below.
- The Miami-Dade Homeless Trust will assume responsibility for readying eligible homeless applicants to quickly apply to fill those vacancies and efficiently meet all requirements of the tenant screening and lease up process to the Owner/Agent's satisfaction. Details outlined below. Referred households will have the following characteristics:
 1. Homeless status has been certified.
 2. Household's vulnerability and risk level are assessed to be at the lower end of a numeric scale of acuity.²
 3. Household matches the property's income, household size etc.

¹ *The Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH)*; May 20, 2009. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act.

² Note that household's on the highest end of the numeric scale are referred to other models of affordable housing that includes formal support services.

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

- For each referral, the Miami-Dade Homeless Trust will alert any service provider from within the local Continuum of Care network that has an established case management relationship with the household. These are support service programs, not governed by the Miami-Dade Homeless Trust, that are often positioned to provide short term and/or long term human services to the households during their new tenancy that will promote their stability as tenants. Details outlined below.
-

III. RESPONSIBILITIES OF OWNER/AGENT

- Provide the Miami Dade Homeless Trust, as attachments to this MOU or in separate email, with the following documents:
 1. Standard Application
 2. Standard Lease Agreement - including specifications regarding utility payments
 3. Property's screening criteria
 4. List of documents needed for a complete application
 5. Property rules related to smoking, parking, pets, etc.
 - Email the Miami-Dade Homeless Trust point of contact with timely notification of a vacancy that will be assigned to the homeless preference and provide relevant information about the vacant unit.
 - Copy the Miami-Dade Homeless Trust on all communication with a homeless applicant. Note that the Miami-Dade Homeless Trust will obtain a Release of Information for each household to allow this communication to proceed.
 - All applications must be provided in person or via mail reflecting an original signature.
 - Screen the batch of up to three referred applicants for eligibility and suitability in the order received from the Miami-Dade Homeless Trust (i.e. Applicant #1 and Applicant #2).
 - Alert the Miami-Dade Homeless Trust and applicants of any deficiencies in applications.
 - Make an eligibility determination within five (5) business days.
 1. If an applicant is denied housing, consider mitigating documentation that may be supplied by the applicant during the appeal process.
 - Respond to brief quarterly emails from the Miami HUD Field Office asking for updates on move-ins, move-outs under the homeless preference.
 - Request Miami-Dade Homeless Trust to provide service provider connections to residents in need in order to preserve their housing.
 - Ensure a general timely response time for all communications with the MOU partner of not more than two (2) business days.
-

IV. RESPONSIBILITIES OF THE MIAMI-DADE HOMELESS TRUST

- Review the current waitlists at the affected sites to determine if any of the applicants meet the definition of homeless.
- Provide Owner/Agent with a batch of up to three (3) applicants that meet the property's eligibility criteria within seven (7) business days after being notified by the Owner/Agent of an available housing

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

unit. If the applicants are rejected or decline an offer of housing, the Miami-Dade Homeless Trust can refer more applicants if requested by the Owner/Agent. If a suitable new applicant is not identified within five (5) business days, then the property may revert back to its standing waiting list to fill the vacancy.

- Provide the Owner/Agent with a complete referral package for each referral that includes:
 1. Completed housing application of the Owner/Agent.
 2. Required supporting documentation needed by the Owner/Agent to process applications:
 - a. Birth certificates and social security cards for ALL household members
 - b. Picture IDs for all adults
 - c. Income and asset documentation
 3. Verification of homelessness for the homeless preference definition.
 4. Determination that household scored at the lower end of a numeric scale for risk/vulnerability.
 5. Release of Information from the referred households to authorize the Miami-Dade Homeless Trust and the Owner/Agent to share information regarding the households' applications, including third party documents the development receives from doing third party verifications (i.e. bank statements, credit reports, etc).
- Inform the applicants referred that this is only a referral and does not constitute an offer of housing and that the Owner/Agent will confirm eligibility for the housing.
- Coordinate with the service provider to accompany the referred applicants for interviews with the Owner/Agent and lease signing at the property if the household needs that support.
- If an applicant is denied housing, coordinate with the service provider to work with the household to schedule an appeal, if desired, and assist the household to gather mitigating documentation and accompany the applicant to the appeal meeting.
- For each referral, the Miami-Dade Homeless Trust will alert any service provider from within the local Continuum-of-Care network that has an established, active case management relationship with the household. These are support service programs, not governed or guaranteed by the Miami-Dade Homeless Trust, that are often positioned to provide short term and/or long term human services to the households during their new tenancy that will promote their stability as new tenants. The Miami-Dade Homeless Trust's role will be to announce news of a new housing opportunity being presented to the client of one of these organizations which could include.
 1. The Advocate Program
 2. Citrus Health Network
 3. Volunteers of America
 4. Chapman Partnership
- Miami-Dade Homeless Trust commits to communicate the names of service providers to residents requiring services at the request of the owner/agent for the preservation of the resident's housing.
- Ensure a general response time for all communications with the MOU partner of two (2) business days.

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

V. SUMMARY OF TIME LIMITATIONS TO COORDINATION

Party	Step	Time Limitation
Owner/Agent	Email announcement of vacancy to be dedicated to homeless preference	Immediately upon vacancy - or as soon as anticipated
Miami-Dade Homeless Trust	Submit 3 referrals to fill vacancy in a ranking order for consideration	Within 7 business days
Owner/Agent	Announce eligibility determination	5 business days
Miami-Dade Homeless Trust	Second attempt to fill unit before vacancy may go to general waiting list	5 business days
All parties	General response time for all communications between parties	2 business days

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VI. ESTABLISHED POINTS OF CONTACT

Miami Dade Homeless Trust Point of Contact

Name: Carlos Laso

Title: Housing Coordinator

Phone: 305 375 4410

Email: Claso@miamidade.gov

Address: 111 NW 1st Street, Miami, FL, 33128

Website: www.homelesstrust.org

Owner/Agent Point of Contact

Name: Mery Agelvis

Title: Property Manager

Phone: 305 538 0090

Email: mery@miamibeachcdc.org

Fax:

Address: 945 Pennsylvania Avenue, Miami Beach, FL 33139

Website:

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VII. VACANCY INFORMATION

Vacancy Announcement Email Contents

Property Name: Villa Marla

Contact Person: Mary Agelvis

Phone: 305 538 0090

Email: mery@miamibeachcdc.org

Date unit will be ready for occupancy:

of Bedrooms:1

Tenant is responsible for utilities and electric.

Is this a first floor or elevator unit? Elevator building

Is this an accessible unit? Depends on unit.

Anything else an applicant should know about the unit? Great location – on bus line close to local market.

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VIII. MOU ATTACHMENTS

- The Owner/Agent should attach the following to this MOU:
 1. Property Screening Criteria
 2. Rental Application and related document requirements
 3. Standard Lease and utility payment specifications

- The Miami-Dade Homeless Trust should attach the following to this MOU:
 1. Sample Release of Information

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

IX. MOU SIGNATURES

Miami-Dade Homeless Trust

Name: Victoria Mallette

Title: Executive Director

Phone: 305 375 1490

Email: vmallette@miamidade.gov

Address: 111 NW 1st Street, Miami, FL, 33128

Website: www.homelesstrust.org

Signature: *V. Mallette*

Date: 5/31/16

Owner/Agent

Name: *Donna L. Gunther*

Title: *Deputy Director*

Phone: *305-538-0090 office 1-305-334-6349 cell*

Email: *donna@miami-beachadc.org*

Address: *945 Pennsylvania Ave, 3rd floor, Miami Beach, FL 33139*

Website: *www.miami-beachadc.com*

Signature: *Donna L. Gunther*

Date: 5/26/2016

Note: As per HUD Notice 2013-21, the owner/agent has discretion to choose to stop implementing the homeless preference at any time which would conclude the partnership outline in this MOU.

Memorandum of Understanding (MOU) Between Miami-Dade Homeless Trust and POAH Communities

I. OVERVIEW

- Cutler Meadows has adopted an admissions preference for people experiencing homelessness at the following designated affordable housing multifamily properties:
Cutler Meadows Glen Apartments, 11100 SW 196th St, Cutler Bay, FL 33157
- To qualify for the admissions preference, applicants will meet the following definition of homelessness:
 1. "Households that qualify as homeless under the HUD HEARTH Act ¹Homeless definition paragraph one: (i) those whose primary nighttime residence is not designed as a sleeping accommodation for human beings, (ii) those in shelter, transitional housing, or motels paid for by charitable organizations, and (iii) those exiting institutions after 90 days or less and who were previously homeless."
- Furthermore, all homeless households are subject to a universal screening assessment by the Miami-Dade County Homeless Trust. Homeless households referred to Owner/Agent will be those households deemed best served for rapid placement into rental housing with minimal need for support.
- The Owner/Agent will apply this admissions preference as follows:
 1. The set-aside units listed under the amended TSP will be dedicated to the homeless preference. The units will be available upon vacancy and held for a minimum of one week (7 calendar days).
 2. Only units in the above-listed property will be filled by the preference.

II. GENERAL ROLES

- The Owner/Agent will systematically alert the Miami-Dade Homeless trust of anticipated unit vacancies that can be filled by the homeless preference, the timing of the property's needs for referrals of households, and all of the property's requirements for screening and admitting new tenants under the preference. Details outlined below.
- The Miami-Dade Homeless Trust will assume responsibility for readying eligible homeless applicants to quickly apply to fill those vacancies and efficiently meet all requirements of the tenant screening and lease up process to the Owner/Agent's satisfaction. Details outlined below. Referred households will have the following characteristics:
 1. Homeless status has been certified.
 2. Household's vulnerability and risk level are assessed to be at the lower end of a numeric scale of acuity.²
 3. Household matches the property's income, household size etc.

¹ *The Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH)*; May 20, 2009. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act.

² Note that household's on the highest end of the numeric scale are referred to other models of affordable housing that includes formal support services.

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

- For each referral, the Miami-Dade Homeless Trust will alert any service provider from within the local Continuum of Care network that has an established case management relationship with the household. These are support service programs, not governed by the Miami-Dade Homeless Trust, that are often positioned to provide short term and/or long term human services to the households during their new tenancy that will promote their stability as tenants. Details outlined below.

III. RESPONSIBILITIES OF OWNER/AGENT

- Provide the Miami Dade Homeless Trust, as attachments to this MOU or in separate email, with the following documents:
 1. Standard Application
 2. Standard Lease Agreement - including specifications regarding utility payments
 3. Property's screening criteria
 4. List of documents needed for a complete application
 5. Property rules related to smoking, parking, pets, etc.
- Email the Miami-Dade Homeless Trust point of contact with timely notification of a vacancy that will be assigned to the homeless preference and provide relevant information about the vacant unit.
- Copy the Miami-Dade Homeless Trust on all communication with a homeless applicant. Note that the Miami-Dade Homeless Trust will obtain a Release of Information for each household to allow this communication to proceed.
- All applications must be provided in person or via mail reflecting an original signature.
- Screen the batch of up to three referred applicants for eligibility and suitability in the order received from the Miami-Dade Homeless Trust (i.e. Applicant #1 and Applicant #2).
- Alert the Miami-Dade Homeless Trust and applicants of any deficiencies in applications.
- Make an eligibility determination within five (5) business days.
 1. If an applicant is denied housing, consider mitigating documentation that may be supplied by the applicant during the appeal process.
- Respond to brief quarterly emails from the Miami HUD Field Office asking for updates on move-ins, move-outs under the homeless preference.
- Request Miami-Dade Homeless Trust to provide service provider connections to residents in need in order to preserve their housing.
- Ensure a general timely response time for all communications with the MOU partner of not more than two (2) business days.

IV. RESPONSIBILITIES OF THE MIAMI-DADE HOMELESS TRUST

- Review the current waitlists at the affected sites to determine if any of the applicants meet the definition of homeless.
- Provide Owner/Agent with a batch of up to three (3) applicants that meet the property's eligibility criteria within seven (7) business days after being notified by the Owner/Agent of an available housing

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

unit. If the applicants are rejected or decline an offer of housing, the Miami-Dade Homeless Trust can refer more applicants if requested by the Owner/Agent. If a suitable new applicant is not identified within five (5) business days, then the property may revert back to its standing waiting list to fill the vacancy.

- Provide the Owner/Agent with a complete referral package for each referral that includes:
 1. Completed housing application of the Owner/Agent.
 2. Required supporting documentation needed by the Owner/Agent to process applications:
 - a. Birth certificates and social security cards for ALL household members
 - b. Picture IDs for all adults
 - c. Income and asset documentation
 3. Verification of homelessness for the homeless preference definition.
 4. Determination that household scored at the lower end of a numeric scale for risk/vulnerability.
 5. Release of Information from the referred households to authorize the Miami-Dade Homeless Trust and the Owner/Agent to share information regarding the households' applications, including third party documents the development receives from doing third party verifications (i.e. bank statements, credit reports, etc).
- Inform the applicants referred that this is only a referral and does not constitute an offer of housing and that the Owner/Agent will confirm eligibility for the housing.
- Coordinate with the service provider to accompany the referred applicants for interviews with the Owner/Agent and lease signing at the property if the household needs that support.
 - If an applicant is denied housing, coordinate with the service provider to work with the household to schedule an appeal, if desired, and assist the household to gather mitigating documentation and accompany the applicant to the appeal meeting.
 - For each referral, the Miami-Dade Homeless Trust will alert any service provider from within the local Continuum-of-Care network that has an established, active case management relationship with the household. These are support service programs, not governed or guaranteed by the Miami-Dade Homeless Trust, that are often positioned to provide short term and/or long term human services to the households during their new tenancy that will promote their stability as new tenants. The Miami-Dade Homeless Trust's role will be to announce news of a new housing opportunity being presented to the client of one of these organizations which could include.
 1. The Advocate Program
 2. Citrus Health Network
 3. Volunteers of America
 4. Chapman Partnership

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

- Miami-Dade Homeless Trust commits to communicate the names of service providers to residents requiring services at the request of the owner/agent for the preservation of the resident's housing.
- Ensure a general response time for all communications with the MOU partner of two (2) business days.

V. SUMMARY OF TIME LIMITATIONS TO COORDINATION

Party	Step	Time Limitation
Owner/Agent	Email announcement of vacancy to be dedicated to homeless preference	Immediately upon vacancy - or as soon as anticipated
Miami-Dade Homeless Trust	Submit 3 referrals to fill vacancy in a ranking order for consideration	Within 7 business days
Owner/Agent	Announce eligibility determination	5 business days
Miami-Dade Homeless Trust	Second attempt to fill unit before vacancy may go to general waiting list	5 business days
All parties	General response time for all communications between parties	2 business days

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VI. ESTABLISHED POINTS OF CONTACT

Miami-Dade Homeless Trust Point of Contact

Name: Carlos Laso

Title: Housing Coordinator

Phone: 305 375 4410

Email: Claso@miamidade.gov

Address: 111 NW 1st Street, Miami, FL, 33128

Website: www.homelesstrust.org

Owner/Agent Point of Contact

Name: Maria Navarro

Title: Property Manager

Phone: 305.233.6154

Email: mnavarro@poahcommunities.com

Fax: 305.256.6622

Address: 11100 SW 196th Street / Miami, FL 33157

Website: www.poahcommunities.com

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VII. VACANCY INFORMATION

Vacancy Announcement Email Contents

Property Name:

Contact Person:

Phone:

Email:

Date unit will be ready for occupancy:

of Bedrooms:

Utilities tenant is responsible for:

Is this a first floor or elevator unit?

Is this an accessible unit?

Anything else an applicant should know about the unit?

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VIII. MOU ATTACHMENTS

- The Owner/Agent should attach the following to this MOU:
 1. Property Screening Criteria
 2. Rental Application and related document requirements
 3. Standard Lease and utility payment specifications

- The Miami-Dade Homeless Trust should attach the following to this MOU:
 1. Sample Release of Information

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily.

IX. MOU SIGNATURES

Miami-Dade Homeless Trust

Name: Victoria Mallette

Title: Executive Director

Phone: 305 375 1490

Email: vmallette@miamidade.gov

Address: 111 NW 1st Street, Miami, FL, 33128

Website: www.homelesstrust.org

Signature: 

Date: 5-6-16

Owner/Agent

Name: Brenda Hernandez

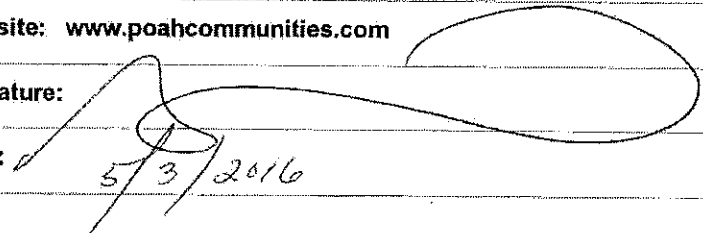
Title: Senior Regional Property Supervisor

Phone: 774.452.6933

Email: bhernandez@poahcommunities.com

Address: 40 Court Street / Suite 700 / Boston MA 02108

Website: www.poahcommunities.com

Signature: 

Date: 5/3/2016

Note: As per HUD Notice 2013-21, the owner/agent has discretion to choose to stop implementing the homeless preference at any time which would conclude the partnership outline in this MOU.

Memorandum



Date: April 6, 2016
To: Michael Liu, Director
Public Housing and Community Development
From: Clarence D. Brown, Division Director
Housing and Community Development Division
Subject: Memorandum of Understanding between Public Housing and Community Development and Miami-Dade Homeless Trust

Attached for your review and signature is a Memorandum of Understanding (MOU) between Public Housing and Community Development (PHCD) and Miami-Dade Homeless Trust (HT) for homeless preference in HUD-assisted Multifamily. The effective date of implementation is April 15, 2016.

PHCD has adopted an admissions preference for people experiencing homelessness. The policy will be implemented at the five (5) designated affordable housing multifamily properties, as follows:

Section 8 New Construction Property	# of Units	Unit Type (Bedroom / Bath)
Coconut Grove	1	3/2
Goulds	3	2/2, 3/2, and 4/2
Miami Gardens Apartments	2	2/2
Perrine Rainbow	3	2/1, 3/2, and 4/2;
Wynwood	2	2/2

Royal American Management on behalf of PHCD will systematically alert the HT of anticipated unit vacancies that can be filled by the homeless preference, the timing of the property's needs for referrals of households, and all of the property's requirements for screening and admitting new tenants under the preference. HT will assume responsibility for readying eligible homeless applicants to quickly apply to fill those vacancies and efficiently meet all requirements of the tenant screening.

If you have any questions or concerns relating to this MOU, please contact me at 786-469-2258.

Attachments

c: Delores Holley, Special Projects Administrator 2

Memorandum of Understanding (MOU) Between Miami-Dade Homeless Trust and Public Housing and Community Development

I. OVERVIEW

- Public Housing and Community Development (the Owner/Agent) has adopted an admissions preference for people experiencing homelessness at the following designated affordable housing multifamily properties:
 1. Coconut Grove (One Unit) 3/2
 2. Goulds (Three Units) 2/2, 3/2 and 4/2
 3. Miami Gardens (Two Units) 2/2
 4. Perrine Rainbow (Three Units) 2/1, 3/2, and 4/2
 5. Wynwood (Two Units) 2/2
- To qualify for the admissions preference, applicants will meet the following definition of homelessness:
 1. "Households that qualify as homeless under the HUD HEARTH Act ¹Homeless definition paragraph one: (i) those whose primary nighttime residence is not designed as a sleeping accommodation for human beings, (ii) those in shelter, transitional housing, or motels paid for by charitable organizations, and (iii) those exiting institutions after 90 days or less and who were previously homeless."
- Furthermore, all homeless households are subject to a universal screening assessment by the Miami-Dade County Homeless Trust. Homeless households referred to the Owner/Agent will be those households deemed best served for rapid placement into rental housing with minimal need for support.
- The Owner/Agent will apply this admissions preference as follows:
 1. The set-aside units listed above will be dedicated to the homeless preference. The units will be available upon vacancy and held for a maximum of one week (7 calendar days).
 2. Only the units listed above will be filled by the preference.

Additional Rental Assistance

PHCD Section 8 Housing Choice Voucher Program will also provide a preference to elderly families who qualify as homeless.

II. GENERAL ROLES

- The Owner/Agent will systematically alert the Miami-Dade Homeless trust of anticipated unit vacancies that can be filled by the homeless preference, the timing of the property's needs for referrals of households, and all of the property's requirements for screening and admitting new tenants under the preference. Details outlined below.
- The Miami-Dade Homeless Trust will assume responsibility for readying eligible homeless applicants to quickly apply to fill those vacancies and efficiently meet all requirements of the tenant screening

¹ *The Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH)*; May 20, 2009. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act .

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

and lease up process to the Owner/Agent's satisfaction. Details outlined below. Referred households will have the following characteristics:

1. Homeless status has been certified
 2. Household's vulnerability and risk level are assessed to be at the lower end of a numeric scale of acuity.²
 3. Household matches the property's income, household size etc.
- For each referral, the Miami-Dade Homeless Trust will alert any service provider from within the local Continuum-of-Care network that has an established case management relationship with the household. These are support service programs, not governed by the Miami-Dade Homeless Trust, that are often positioned to provide short term and/or long term human services to the households during their new tenancy that will promote their stability as tenants.

III. RESPONSIBILITIES OF OWNER/AGENT

- Provide the Miami-Dade Homeless Trust, as attachments to this MOU or in separate email, with the following documents:
 1. Standard Application
 2. Standard Lease Agreement - including specifications regarding utility payments
 3. Property's screening criteria
 4. List of documents needed for a complete application
 5. Property rules related to smoking, parking, pets, etc.
- Email the Miami-Dade Homeless Trust point of contact with timely notification of a vacancy that will be assigned to the homeless preference and provide relevant information about the vacant unit.
- Copy the Miami-Dade Homeless Trust on all communication with a homeless applicant. Note that the Miami-Dade Homeless Trust will obtain a Release of Information for each household to allow this communication to proceed.
- Whenever possible, accept initial applications by secure email or fax in order to decrease the number of visits the applicant and service provider need to make to the property.
- Screen the batch of up to three referred applicants for eligibility and suitability in the order received from the Miami-Dade Homeless Trust (i.e. Applicant #1 and Applicant #2).
- Alert the Miami-Dade Homeless Trust and applicants of any deficiencies in applications.
- Make an eligibility determination within 2 business days whenever possible.
 1. If an applicant is denied housing, consider mitigating documentation that may be supplied by the applicant during the appeal process.
- Respond to brief quarterly emails from the Miami HUD Field Office asking for updates on move-ins, move-outs under the homeless preference.

² Note that household's on highest end of the numeric scale are referred to other models of affordable housing that includes formal support services.

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

- Request Miami-Dade Homeless Trust to provide service provider connections to residents in need in order to preserve their housing.
 - Ensure a general response time for all communications with the MOU partner of not more than 2 business days.
-

IV. RESPONSIBILITIES OF THE MIAMI-DADE HOMELESS TRUST

- Review the current waitlists at the affected sites to determine if any of the applicants meet the definition of homeless.
- Provide Owner/Agent with a batch of up to three applicants that meet the property's eligibility criteria within 2 business days upon notification from the Owner/Agent of an available housing unit. If the applicants are rejected or decline an offer of housing, the Miami-Dade Homeless Trust can refer more applicants if requested by the Owner/Agent. If an eligible applicant is not identified within 1 business day, then the property may revert back to its standing waiting list to fill the vacancy.
- Provide the Owner/Agent with a complete referral package for each referral that includes:
 1. Completed housing application of the Owner/Agent.
 2. Required supporting documentation needed by the Owner/Agent to process applications:
 - a. Birth certificates and social security cards for ALL household members
 - b. Picture IDs for all adults
 - c. Income and asset documentation
 3. Verification of homelessness for the homeless preference definition.
 4. Determination that household scored at the lower end of a numeric scale for risk/vulnerability.
 5. Release of Information from the referred households to authorize the Miami-Dade Homeless Trust and the Owner/Agent to share information regarding the households' applications, including third party documents the development receives from doing third party verifications (i.e. bank statements, credit reports, etc).
- Inform the applicants referred that this is only a referral and does not constitute an offer of housing and that the Owner/Agent will confirm eligibility for the housing.
- Coordinate with service provider to accompany the referred applicants for interviews with the Owner/Agent and lease signing at the property if the household needs that support.
- If an applicant is denied housing, coordinate with the service provider to work with the household to schedule an appeal, if desired, and assist the household to gather mitigating documentation and accompany the applicant to the appeal meeting.
- For each referral, the Miami-Dade Homeless Trust will alert any service provider from within the local Continuum-of-Care network that has an established, active case management relationship with the household. These are support service programs, not governed or guaranteed by the Miami-Dade Homeless Trust, that are often positioned to provide short term and/or long term human services to the households during their new tenancy that will promote their stability as new tenants. The Miami-Dade Homeless Trust's role will be to announce news of a new housing opportunity being presented to the client of one of these organizations which could include:

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

1. The Advocate Program
 2. Citrus Health Network
 3. Volunteers of America
 4. Chapman Partnership
- Miami-Dade Homeless Trust commits to communicate the names of service providers to residents requiring services at the request of the owner/agent for the preservation of the resident's housing.
 - Ensure a general response time for all communications with the MOU partner of 1-2 business days.
-

V. SUMMARY OF TIME LIMITATIONS TO COORDINATION

Party	Step	Time Limitation
Owner/Agent	Email announcement of vacancy to be dedicated to homeless preference	Immediately upon vacancy - or as soon as anticipated
Miami-Dade Homeless Trust	Submit 3 referrals to fill vacancy in a ranking order for consideration	Within 2 business days
Owner/Agent	Announce eligibility determination	2 business days
Miami-Dade Homeless Trust	Second attempt to fill unit before vacancy may go to general waiting list	2 business days
All parties	General response time for all communications between parties	2 business days

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VI. ESTABLISHED POINTS OF CONTACT

Miami-Dade Homeless Trust Point of Contact

Name: Carlos Laso

Title: Housing Coordinator

Phone: 305 375 1490

Email: Claso@miamidade.gov

Address: 111 NW 1st Street, Miami, FL, 33128

Website: www.homelesstrust.org

Owner/Agent Point of Contact

Name: Ana Monte

Title: Regional Manager

Phone: 305 477 9545

Email: Ana.Monte@royalamerican.com

Fax: 305 477 9843

Address: 1400 NW 107th Avenue, Suite 405, Miami, FL 33172

Website: www.royalamerican.com

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VII. VACANCY INFORMATION

Vacancy Announcement Email Contents

Property Name:

Contact Person:

Phone:

Email:

Date unit will be ready for occupancy:

of Bedrooms:

Utilities tenant is responsible for:

Is this a first floor or elevator unit?

Is this an accessible unit?

Anything else an applicant should know about the unit?

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

VIII. MOU ATTACHMENTS

- The Owner/Agent should attach the following to this MOU:
 1. Property Screening Criteria
 2. Rental Application and related document requirements
 3. Standard Lease and utility payment specifications

- The Miami-Dade Homeless Trust should attach the following to this MOU:
 1. Sample Release of Information

Memorandum of Understanding (MOU) for Homeless Preference in HUD-assisted Multifamily

IX. MOU SIGNATURES

Miami-Dade Homeless Trust

Name: Victoria Mallette

Title: Executive Director

Phone: 305 375 1490

Email: vmallette@miamidade.gov

Address: 111 NW 1st Street, Miami, FL, 33128

Website: www.homelesstrust.org

Signature: 

Date: 3-2-16

Owner/Agent

Name: Michael Liu

Title: Director

Phone: 786 469 4106

Email: mliu88@miamidade.gov

Address: 701 NW 1st Court, Miami, FL 33136

Website: www.miamidade.gov/housing

Signature: 

Date: 4/7/16

Note: As per HUD Notice 2013-21, the owner/agent has discretion to choose to stop implementing the homeless preference at any time which would conclude the partnership outline in this MOU.

Tenant Selection Plan Amendment

Suggested Model Language for Adopted Preferences for Homeless Individuals

Coconut Grove is adding a homeless admissions preference to all of the HUD-assisted housing pursuant to HUD Notice 2013-21 to establish a preference for those who meet the following definition(s) of homelessness:

□ Paragraph 1 of the HUD HEARTH Act definition of homeless:

1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

(i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

This preference will include the following:

1. It will be effective 4/15/16 and/or when approved by HUD.
 2. The current waiting list for each property will be maintained consistent with HUD 4350.3 guidelines and the property's Affirmative Fair Housing Market Plan (AFHMP).
 3. Current persons on the waiting list will be notified of the addition of a homeless preference and how they may apply for the preference. They will be granted a first right to an available unit under the preference should they meet the definition of "homeless." Notice to persons on the waiting list will be done by mail thirty (30) days prior to adoption of the preference.
 4. Upon unit turnover, one in every one vacancies will be offered to a homeless person who is on the existing waiting list or who is referred to the respective property by an organization that refers people transitioning out of a shelter or temporary housing program. We will cap our number of units committed to the homeless preference at a maximum of One Three Bedroom Two Bath units.
 5. Referrals for available units will be accepted from the Miami-Dade Homeless Trust referral agency (owner/management choice), pursuant to paragraph V (d) of HUD Notice 2013-21. All applicants must comply with current admissions requirements at the specific property, including income, age, and criminal/credit screening. Applicants who are denied will be provided with the basis of the denial in writing and notified of their right to request a meeting to dispute the rejection and offered the opportunity to establish if they are eligible for a reasonable accommodation under the Fair Housing Act.
 6. This preference can be amended as needed and/or removed with proper notification of such to all affected parties, including written notification to HUD.
-

Tenant Selection Plan Amendment

Suggested Model Language for Adopted Preferences for Homeless Individuals

Perrine Rainbow is adding a homeless admissions preference to all of the HUD-assisted housing pursuant to HUD Notice 2013-21 to establish a preference for those who meet the following definition(s) of homelessness:

□ Paragraph 1 of the HUD HEARTH Act definition of homeless:

1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

(i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

This preference will include the following:

1. It will be effective 4/15/16 and/or when approved by HUD.
 2. The current waiting list for each property will be maintained consistent with HUD 4350.3 guidelines and the property's Affirmative Fair Housing Market Plan (AFHMP).
 3. Current persons on the waiting list will be notified of the addition of a homeless preference and how they may apply for the preference. They will be granted a first right to an available unit under the preference should they meet the definition of "homeless." Notice to persons on the waiting list will be done by mail thirty (30) days prior to adoption of the preference.
 4. Upon unit turnover, one in every one vacancies will be offered to a homeless person who is on the existing waiting list or who is referred to the respective property by an organization that refers people transitioning out of a shelter or temporary housing program. We will cap our number of units committed to the homeless preference at a maximum of One - Two Bedroom One Bath, One - Three Bedroom Two Bath and One Four Bedroom Two Bath unit.
 5. Referrals for available units will be accepted from the Miami-Dade Homeless Trust referral agency (owner/management choice), pursuant to paragraph V (d) of HUD Notice 2013-21. All applicants must comply with current admissions requirements at the specific property, including income, age, and criminal/credit screening. Applicants who are denied will be provided with the basis of the denial in writing and notified of their right to request a meeting to dispute the rejection and offered the opportunity to establish if they are eligible for a reasonable accommodation under the Fair Housing Act.
 6. This preference can be amended as needed and/or removed with proper notification of such to all affected parties, including written notification to HUD.
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Tenant Selection Plan Amendment

Suggested Model Language for Adopted Preferences for Homeless Individuals

Wynwood is adding a homeless admissions preference to all of the HUD-assisted housing pursuant to HUD Notice 2013-21 to establish a preference for those who meet the following definition(s) of homelessness:

□ Paragraph 1 of the HUD HEARTH Act definition of homeless:

1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

(i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

This preference will include the following:

1. It will be effective 4/15/16 and/or when approved by HUD.
 2. The current waiting list for each property will be maintained consistent with HUD 4350.3 guidelines and the property's Affirmative Fair Housing Market Plan (AFHMP).
 3. Current persons on the waiting list will be notified of the addition of a homeless preference and how they may apply for the preference. They will be granted a first right to an available unit under the preference should they meet the definition of "homeless." Notice to persons on the waiting list will be done by mail thirty (30) days prior to adoption of the preference.
 4. Upon unit turnover, one in every one vacancies will be offered to a homeless person who is on the existing waiting list or who is referred to the respective property by an organization that refers people transitioning out of a shelter or temporary housing program. We will cap our number of units committed to the homeless preference at a maximum of Two - Two Bedroom Two Bath unit.
 5. Referrals for available units will be accepted from the Miami-Dade Homeless Trust referral agency (owner/management choice), pursuant to paragraph V (d) of HUD Notice 2013-21. All applicants must comply with current admissions requirements at the specific property, including income, age, and criminal/credit screening. Applicants who are denied will be provided with the basis of the denial in writing and notified of their right to request a meeting to dispute the rejection and offered the opportunity to establish if they are eligible for a reasonable accommodation under the Fair Housing Act.
 6. This preference can be amended as needed and/or removed with proper notification of such to all affected parties, including written notification to HUD.
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Tenant Selection Plan Amendment

Suggested Model Language for Adopted Preferences for Homeless Individuals

Goulds Homes is adding a homeless admissions preference to all of the HUD-assisted housing pursuant to HUD Notice 2013-21 to establish a preference for those who meet the following definition(s) of homelessness:

□ Paragraph 1 of the HUD HEARTH Act definition of homeless:

1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

(i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

This preference will include the following:

1. It will be effective 4/15/16 and/or when approved by HUD.
 2. The current waiting list for each property will be maintained consistent with HUD 4350.3 guidelines and the property's Affirmative Fair Housing Market Plan (AFHMP).
 3. Current persons on the waiting list will be notified of the addition of a homeless preference and how they may apply for the preference. They will be granted a first right to an available unit under the preference should they meet the definition of "homeless." Notice to persons on the waiting list will be done by mail thirty (30) days prior to adoption of the preference.
 4. Upon unit turnover, one in every one vacancies will be offered to a homeless person who is on the existing waiting list or who is referred to the respective property by an organization that refers people transitioning out of a shelter or temporary housing program. We will cap our number of units committed to the homeless preference at a maximum of One - Two Bedroom Two Bath, One - Three Bedroom Two Bath and One Four Bedroom Two Bath unit.
 5. Referrals for available units will be accepted from the Miami-Dade Homeless Trust referral agency (owner/management choice), pursuant to paragraph V (d) of HUD Notice 2013-21. All applicants must comply with current admissions requirements at the specific property, including income, age, and criminal/credit screening. Applicants who are denied will be provided with the basis of the denial in writing and notified of their right to request a meeting to dispute the rejection and offered the opportunity to establish if they are eligible for a reasonable accommodation under the Fair Housing Act.
 6. This preference can be amended as needed and/or removed with proper notification of such to all affected parties, including written notification to HUD.
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Tenant Selection Plan Amendment

Suggested Model Language for Adopted Preferences for Homeless Individuals

Miami Gardens is adding a homeless admissions preference to all of the HUD-assisted housing pursuant to HUD Notice 2013-21 to establish a preference for those who meet the following definition(s) of homelessness:

□ Paragraph 1 of the HUD HEARTH Act definition of homeless:

1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

(i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

This preference will include the following:

1. It will be effective 4/15/16 and/or when approved by HUD.
 2. The current waiting list for each property will be maintained consistent with HUD 4350.3 guidelines and the property's Affirmative Fair Housing Market Plan (AFHMP).
 3. Current persons on the waiting list will be notified of the addition of a homeless preference and how they may apply for the preference. They will be granted a first right to an available unit under the preference should they meet the definition of "homeless." Notice to persons on the waiting list will be done by mail thirty (30) days prior to adoption of the preference.
 4. Upon unit turnover, one in every one vacancies will be offered to a homeless person who is on the existing waiting list or who is referred to the respective property by an organization that refers people transitioning out of a shelter or temporary housing program. We will cap our number of units committed to the homeless preference at a maximum of Two - Two Bedroom Two Bath unit.
 5. Referrals for available units will be accepted from the Miami-Dade Homeless Trust referral agency (owner/management choice), pursuant to paragraph V (d) of HUD Notice 2013-21. All applicants must comply with current admissions requirements at the specific property, including income, age, and criminal/credit screening. Applicants who are denied will be provided with the basis of the denial in writing and notified of their right to request a meeting to dispute the rejection and offered the opportunity to establish if they are eligible for a reasonable accommodation under the Fair Housing Act.
 6. This preference can be amended as needed and/or removed with proper notification of such to all affected parties, including written notification to HUD.
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Lived Experience Advisory Board Miami-Dade County

August 17, 2023.

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) the Lived Experience Working Group for the Continuum of Care (CoC) was incorporated on July 21, 2022 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 homelessness. It is the LEAB's pleasure to support the CoC's application to the Department of Housing and Urban Development's 2023 NOFO to address homelessness. This letter confirms:

- **The LEAB working group has five (5) 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 Homeless Plan**
- **We reviewed and approved the scoring criteria for respondents seeking to apply for the 2023 NOFO collaborative application**

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

Warm regards,



Giovanni Sairras, Co-Chair



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	Camillus House
Acronym (If Applicable)	
Year Incorporated	1960
EIN	650032862
Street Address	1603 N.W. 7th Ave., Miami, FL.
Zip Code	33136

Project Information	
Project Name	Archbishop Carroll Homes
Project Budget	\$1,154,943.00
Grant Number	FL0311L4D002012
Name of Project Director	Hilda Fernandez
Project Director Email Address	hildafernandez@camillus.org
Project Director Phone Number	305-374-1065 Ext. 308
Which best describes the project *	Permanent Supportive Housing
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	None of the above

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Hilda Fernandez
CEO Email Address	Hfernandez@camillus.org
CEO Phone Number	305-374-1065 Ext. 308
Name of Staff Member Guiding Assessment	Hilda Fernandez
Staff Email Address	Hfernandez@camillus.org
Staff Phone Number	305-374-1065 Ext. 308

Assessment Information	
Name of Assessor	Angela Miller
Organizational Affiliation of Assessor	Homeless Trust
Assessor Email Address	Angela.Miller@miamidade.gov
Assessor Phone Number	305-903-7953
Date of Assessment	8/25/23



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source.	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	<p>Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	<p>Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/</p> <p><i>Optional notes here</i></p>	Somewhat	Always	Always
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable.	Always	Always	Always

Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project.	Always	Always	Always
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented. <i>Optional notes here</i>	Always	Always	Always
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies. <i>Optional notes here</i>	Always	Always	Always
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction. <i>Optional notes here</i>	Always	Always	Always
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services. <i>Optional notes here</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select “Not at all” or “Sometimes” or “Always”. Marking “Always” signifies full compliance for the standard.

	Standard	Lease and Occupancy Definition / Evidence	Say It	Document It	Do It
Leases 1	Housing is considered permanent (not applicable for Transitional Housing)	Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party. <i>Optional notes here</i>	Always	Always	Always
Leases 2	Participant choice is fundamental	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit. <i>Optional notes here</i>	Always	Always	Always
Leases 3	Leases are the same for participants as for other tenants	Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants’ and owner’s choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market. <i>Optional notes here</i>	Always	Always	Always
Leases 4	Participants receive education about their lease or occupancy agreement terms	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities. <i>Optional notes here</i>	Always	Always	Always

Leases 5	Measures are used to prevent eviction	Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.	Always	Always	Always
Leases 6	Providing stable housing is a priority	<p>Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 7	Rent payment policies respond to tenants' needs (as applicable)	<p>While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.</p> <p><i>Optional notes here</i></p>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

Standard	Services Definition / Evidence	Say it	Document it	Do it
Services 1 Projects promote participant choice in services	Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services. <i>Optional notes here</i>	Always	Always	Always
Services 2 Person Centered Planning is a guiding principle of the service planning process	Person-centered Planning is a guiding principle of the service planning process <i>use this</i>	Always	Always	Always
Services 3 Service support is as permanent as the housing	Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing. <i>Optional notes here</i>	Always	Always	Always
Services 4 Services are continued despite change in housing status or placement	Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays. <i>Unless client was violent or threatened violence.</i>	Always	Always	Somewhat

Services 5	Participant engagement is a core component of service delivery	Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time.	Always	Always	Always
		<i>Optional notes here</i>			
Services 6	Services are culturally appropriate with translation services available, as needed	Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate, culturally-specific services. Translation services are provided when needed to ensure full comprehension of the project. Projects that serve families with children should have family-friendly rules that allow for different schedules based on work and school hours and have services that allow parents to participate in activities without having to constantly supervise their children themselves (i.e. can use the bathroom or take a shower without their children being in the bathroom with them).	Always	Always	Always
		<i>Optional notes here</i>			
Services 7	Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)	Services support a participant's ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and addiction are a part of some participants' lives. Participants are engaged in non-judgmental communication regarding their behavior and are offered education regarding how to avoid risky behaviors and engage in safer practices.	Always	Always	Always
		<i>use this</i>			
	Standard	Housing Definition / Evidence	Say It	Document It	Do It
Housing 1	Housing is not dependent on participation in services	Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or demonstration of progress made on a service plan. Services must be offered by staff, but are voluntary for participants.	Always	Always	Always
		<i>use this</i>			
Housing 2	Substance use is not a reason for termination	Participants are only terminated from the project for violations in the lease or occupancy agreements, as applicable. Occupancy agreements or an addendum to the lease do not include conditions around substance use or participation in services. If the project is a recovery housing model focused on people who are in early recovery from drugs or alcohol (as outlined in HUD's Recovery Housing Brief), different standards related to use and subsequent offer of treatment may apply. See HUD's Recovery Housing brief here: https://www.hudexchange.info/resource/4852/recovery-housing-policy-brief/	Always	Always	Always

use this

Housing 3	The rules and regulations of the project are centered on participants' rights	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets.	Always	Always	Always
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Optional notes here

Housing 4	Participants have the option to transfer to another project	Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.	Always	Always	Always
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Optional notes here



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

Standard		Project -Specific Standards	Say It	Document it	Do it
Project 1	Quick access to RRH assistance	A permanent supportive housing project ensures quick linkage to a unit and wrap around services, based on participant needs, preferences, and resource availability. <i>Not Applicable</i>	Please select answer	Please select answer	Please select answer
Project 2	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with the most severe service needs and help participants stay housed, regardless of other perceived barriers.	Always	Always	Always
Project 3	Property Management duties are separate and distinct from services/case management	In order to provide clear roles of staff for participants in terms of lease and rules enforcement as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communications and meetings regarding Participants to address tenancy issues in order to preserve tenancy. <i>Optional notes here</i>	Always	Always	Always
		No additional standards <i>Optional notes here</i>			



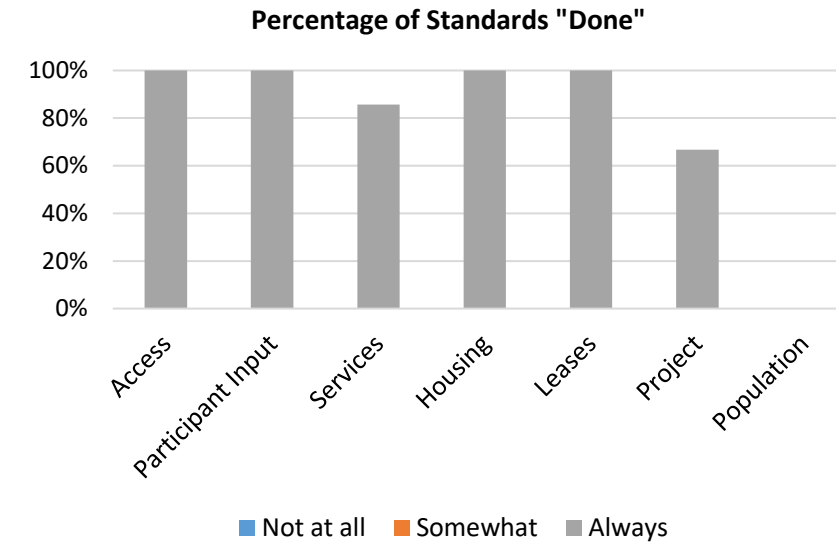
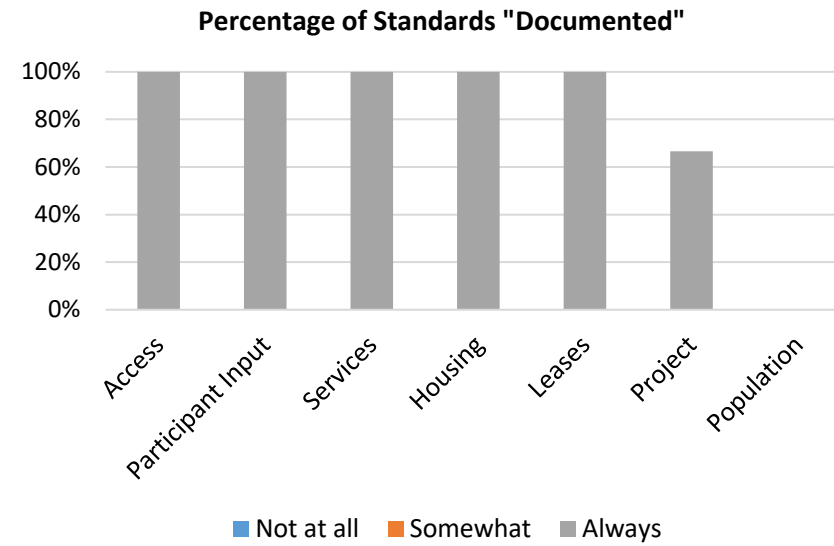
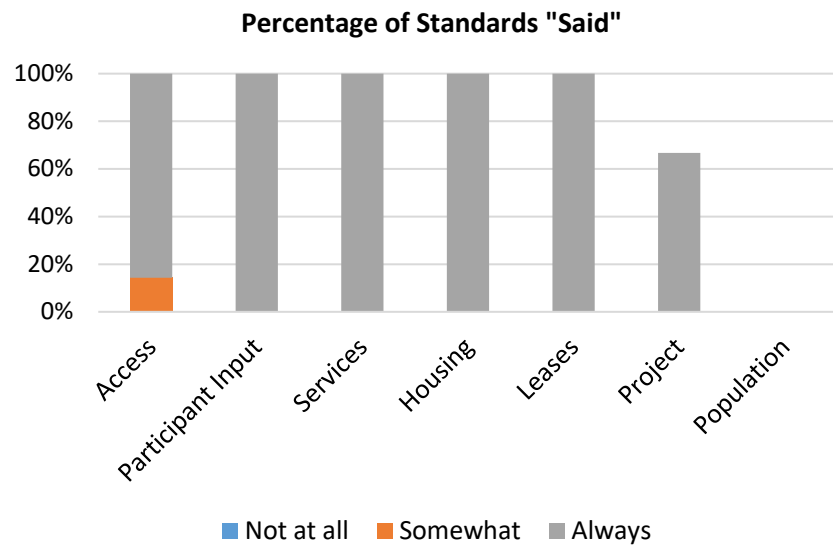
Housing First Standards: Assessment Summary

Camillus House
8/25/23

Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Your score: 171
Max potential score: 180

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



Providers x +

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

HMS Remote2PC BH HDX1.0 HDX2.0 HTwebsite Compliance COM Add Task Grantium™ GRANTS.GOV 457 Help Desk Sage Informs DAVID

Training Resources +

U.S. HUD Program Competition -

(Published 5/25/2023)

Miami-Dade County, through the Miami-Dade County Homeless Trust (Homeless Trust), is requesting applications to renew existing United States Department of Housing and Urban Development (USHUD) Continuum of Care funds OR apply for new federal funding to provide housing, support services, and other eligible activities benefiting persons experiencing homelessness, including persons fleeing Domestic Violence. A Collaborative Application will be submitted to USHUD in response to its Notice of Funding Opportunity (NOFO) for Fiscal Year 2023 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 apply to renew existing projects or 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 and questions emailed to the RFA contact person. Respondents must avoid private communications with prospective applicants 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 June 30, 2023 at 2:00 p.m. eastern standard time.

A PRE-APPLICATION WORKSHOP FOR INTERESTED RESPONDENTS WILL BE HELD at 10:00 a.m. on Wednesday, May 31, 2023 via zoom. Please read the solicitation carefully and in its entirety. Attendance to the Pre-Application Workshop is strongly recommended. To join the Zoom Meeting enter:
<https://miamidade.zoom.us/j/88598058086?pwd=T1Vhb0xjUDBFVEVncnhjYmVSRlQ09>
OR
Dial by your location
+1 786 635 1003 US (Miami)

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Providers x +

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

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+1 786 635 1003 US (Miami)
Meeting ID: 885 9805 8086
Passcode: 295791

Please refer to the RFA and application materials posted below for instructions on how to compile and submit responses to this solicitation.

- 2023 HUD NOFO RFA
- Attachment 1 Scoring, Ranking and Reallocation Process
- Attachment 2 RFA Checklist
- Attachment 3 Consolidated Project Application
- Attachment 4 New Project Application
- Attachment 5 Detailed Budget (New Project)
- Attachment 6 Renewal Project Application
- 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 18 Renewal Project Scoring Tool
- Attachment 19 Code of Conduct
- Attachment 20 New Project Score Sheet
- Grant Inventory Worksheet (GIW)

Addenda 1

- 2023 HUD NOFO RFA

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Providers

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

- Attachment 20 New Project Score Sheet
- Grant Inventory Worksheet (GIW)

Addenda I

- 2023 HUD NOFO RFA
- Attachment 2 RFA Checklist

Addenda II

- 2023 HUD NOFO RFA

Addenda III

- Response to written questions

Addenda IV

- 2023 HUD NOFO RFA
- Attachment 16 Renaming a Renewal Project Application

Addenda V

- 2023 HUD NOFO RFA

Youth Homelessness Demonstration Program

Supplemental Notice of Funding Opportunity to Address Unsheltered Homelessness

FW: 2023 NOFO RFA - Message (HTML)

File Message Help Acrobat

Delete Archive Reply Reply All Forward

Share to Teams

NOFO To Manager Team Email

Move Tags Editing Immersive Translate Zoom Reply with Scheduling Poll Send to OneNote Viva Insights Report Message Report Phishing

FW: 2023 NOFO RFA

MS Spiegel, Martha (HT)
 To: ahapple; Althea Birch; Ana Rubirosa; Angel Evans; Anjuli Castano; Anna Kopper; Antonio Villasuso; Arti Pallin; Beatrice Gonzalez; Brittany Rosen; Cary YeeQuee; Chania Somarrriba; Cici Cici; Constance Collins; Cristy Martinez; Donna MacDonald; +81 others
 Cc: Sarria, Manuel (HT)

Reply Reply All Forward

Thu 5/25/2023 1:00 PM

Shared on behalf of Manny Sarria, Asst. Executive Director
 Miami-Dade County Homeless Trust

Dear colleagues,

Miami-Dade County, through the Miami-Dade County Homeless Trust (Homeless Trust), is requesting applications to renew existing United States Department of Housing and Urban Development (USHUD) Continuum of Care funds OR apply for new federal funding to provide housing, support services, and other eligible activities benefiting persons experiencing homelessness, including persons fleeing Domestic Violence. A Collaborative Application will be submitted to USHUD in response to its Notice of Funding Opportunity (NOFO) for Fiscal Year 2023 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 apply to renew existing projects or submit an application for a new project(s). **Application materials are posted on our website**, visit <https://www.homelesstrust.org/homeless-trust/providers/home.page> and scroll down to the section titled *US HUD Program Competition*. 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 and questions emailed to Manuel.Sarria@miamidadegov. Respondents must avoid private communications with prospective applicants 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 June 30, 2023 at 2:00 p.m. eastern standard time.

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FW: 2023 NOFO RFA - Message (HTML)

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Reply with Scheduling Poll Send to OneNote Viva Insights Report Message Report Phishing

FW: 2023 NOFO RFA



Spiegel, Martha (HT)

To ahapple; Althea Birch; Ana Rubirosa; Angel Evans; Anjuli Castano; Anna Kopper; Antonio Villasuso; Arti Pallin; Beatrice Gonzalez; Brittany Rosen; Cary YeeQuee; Chania Somarriba; Cici Cici; Constance Collins; Cristy Martinez; Donna MacDonald; +81 others
Cc Sarria, Manuel (HT)

Reply Reply All Forward

Thu 5/25/2023 1:00 PM

2:00 p.m. eastern standard time.

A PRE-APPLICATION WORKSHOP FOR INTERESTED RESPONDENTS WILL BE HELD at 10:00 a.m. on Wednesday, May 31, 2023 via zoom. Please read the solicitation carefully and in its entirety. Attendance to the Pre-Application Workshop is strongly recommended. To join the Zoom Meeting enter:

<https://miamidade.zoom.us/j/88598058086?pwd=T1Vhb0xjUDBFVEVncnhJYmIYSERlQT09>

OR

Dial by your location
+1 786 635 1003 US (Miami)
Meeting ID: 885 9805 8086
Passcode: 295791

Thank you,

Manny Sarria, LCSW
Asst. Executive Director
Miami-Dade County
Homeless Trust
Manuel.Sarria@miamidade.gov
(305)546-4427

Windows taskbar showing various application icons and system tray information including temperature (84°F) and time (9:13 AM 7/7/2023).

FROM PAGE 1A
FLOODS

new Risk Rating 2.0 calculation for your home.

If you're buying a new flood-insurance policy, however, you'll get hit with the new premium all at once. Since April 2022, new policyholders have had to enroll at the full Risk Rating 2.0 price.

FEMA says the new premiums reflect the reality of Florida's increasing flood risk as people continue to build homes in flood-prone areas and climate change raises sea levels and makes "rain bomb" events, such as the 1,000-year floods that recently inundated Fort Lauderdale, more common.

The agency also argues that the new premium regime is more fair.

"The new methodology allows FEMA to equitably distribute premiums across all policyholders based on the value of their home and the unique flood risk of their property. Currently, many policyholders with lower-value homes are paying more than they should and policyholders with higher-value homes are paying less than they should," FEMA wrote in an April 2021 press release announcing the change.

Mortgage lenders and



JOSE A. IGLESIAS / iglesias@elnuevoherald.com

Floods like the one that hit Fort Lauderdale last month are expected to happen more frequently due to climate change.

banks often require that home and property owners get federal flood insurance. Although Florida has the highest number of policies in the country, roughly 4 out of 5 Florida homes aren't covered. Emergency-management experts warn that just about anyone in a state vulnerable to hurricanes and heavy rains should get it.

The number of Florida flood-insurance policies is likely to rise. This year, Florida lawmakers passed a bill requiring anyone with hurricane and wind policies from Citizens Insurance to also get flood insurance. That affects 1.2 million Citizens policyholders in the state.

Across South Florida, the

biggest premium hikes will go to policyholders in the Keys, South Miami-Dade and coastal Broward and Palm Beach counties. Rates will remain relatively stable in North Dade and inland Broward and Palm Beach.

The 10 biggest premium hikes in South Florida affect ZIP codes up and down the coastline from Summerland Key to Jupiter — and three ZIP codes in inland Miami-Dade County.

Those hikes will eventually lead to average increases in annual insurance bills as high as \$4,056 in ZIP code 33036, which covers Islamorada. But the increases will phase in gradually. In ZIP code 33469, which covers parts

of Jupiter and Tequesta, the average policyholder will see eight straight years of 18% insurance hikes before their premiums stabilize at the new Risk Rating 2.0 level.

Under the new risk-rating regime, the highest average premiums in South Florida will all be in ZIP codes in Miami-Dade and Monroe counties. Key Biscayne, Islamorada, Marathon, Miami Beach, North Bay Village, Bal Harbour, Surfside, and Sunny Isles Beach will be among the most expensive areas to insure against flooding in South Florida.

Key Biscayne will have the sixth-highest insurance premiums of any ZIP code in the state.

South Florida ZIP codes with the biggest flood insurance premium hikes under Risk Rating 2.0

County	ZIP code	Average premium hike	Impact on annual insurance bill
1 Palm Beach	33469	342%	+\$2,669
2 Miami-Dade	33170	287%	+\$1,609
3 Palm Beach	33432	229%	+\$2,178
4 Palm Beach	33477	226%	+\$1,705
5 Monroe	33001	222%	+\$3,044
6 Miami-Dade	33033	217%	+\$1,544
7 Miami-Dade	33146	214%	+\$1,580
8 Broward	33305	209%	+\$2,301
9 Monroe	33036	207%	+\$4,056
10 Monroe	33042	198%	+\$2,996

In Miami-Dade, the biggest premium increases are coming in the southern part of the county, in ZIP codes where home prices are particularly high (33146, i.e. Coral Gables) or where premiums have been historically low (33033, i.e. Leisure City and 33170, which runs west from Goulds to the Everglades).

In Broward, the biggest premium increases are concentrated on the coast, especially in ZIP codes surrounding Fort Lauderdale. ZIP code 33315, which covers Edgewood, one of the worst-hit neighborhoods in the Fort

Lauderdale floods, will see a relatively modest 64% premium hike. But a few miles north in ZIP code 33305, premiums are expected to double on average.

This climate report is funded by Florida International University, the Knight Foundation and the David and Christina Martin Family Foundation in partnership with Journalism Funding Partners. The Miami Herald retains editorial control of all content.

Nicolás Rivero:
@NicolasFuRivero

For 24 years, she had no name. Investigators now focused on finding her killer

BY GRETHEL AGUILA
gaguila@miamiherald.com

For more than two decades, she was the face of a police sketch. Now, Broward detectives have a name for the woman, who was found sexually assaulted and murdered in 1998, the Broward Sheriff's Office said Thursday.

Eileen Truppner's body was discovered by a boater in a grassy area off U.S. 27 in southwest Broward in December 1998. Investigators believe she died by strangulation no more than three days before she was found.

Identifying Truppner is only the first mystery that Broward detectives solved. They're now focused on finding her killer.

DNA was instrumental to Truppner's identification. The Broward Sheriff's Office worked with the Florida Department of Law Enforcement to track the vic-

tim's family tree.

Genealogy led them to three sisters, one of whom vanished in the late 1990s. BSO Cold Case Homicide Detective Zack Scott then prepared to break the news to Truppner's family.

"The upside is you're able to give them some answers," Scott said in a video. "The downside is that you have to tell them: 'Listen, she was the victim of a murder.' It's certainly not the outcome that they wanted."

When Nancy Truppner received Scott's call, she thought her sister was finally found and her decades in anguish would be over. But hearing about her sister's fate broke her.

"The way she died, when she was a kind person," Nancy, in tears, said in a video. "She was so good, and she died the way she died. She did not deserve that."

Years before her murder,

Truppner, a mother of two, moved to South Florida from her native Puerto Rico. Though she had struggles, Truppner remained hopeful, Nancy said.

That's why it was a shock for the family when Truppner vanished in 1998. The last time Nancy heard from her was August that year, the month she vanished, prompting the family to hire a private investigator to track her down.

Scott said he has narrowed in on several leads — including a potential suspect — and now needs to connect that suspect to Truppner. At this point, the investigation is focused on piecing together a timeline.

Broward detectives are urging people who knew Truppner or came across her from August to December 1998 to come forward.

"If they can tell us anything about her life during that four-month period, no matter how insignificant



Eileen Truppner

they may think it is, it could be what we're looking for to kind of connect the dots."

Anyone with in-

formation about Eileen Truppner's murder should to contact Det. Zack Scott at 954-321-4214 or Broward Crime Stoppers at 954-493-TIPS (8477).

Gretzel Aguilas:
@GretzelAguila



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MIAMI-DADE COUNTY PUBLIC NOTICE

MIAMI-DADE COUNTY HOMELESS TRUST REQUEST FOR APPLICATIONS (RFA) FOR INCLUSION IN THE FISCAL YEAR 2023 CONTINUUM OF CARE PROGRAM COMPETITION

Miami-Dade County, through the Miami-Dade County Homeless Trust (Homeless Trust), is requesting applications for our Annual Continuum of Care (CoC) Competition to renew existing programs funded under the United States Department of Housing and Urban Development (U.S. HUD) CoC funds. This competition will also allow respondents to reallocate existing programs and apply for new bonus and reallocation funding to provide housing, support services, and other eligible activities benefiting persons experiencing homelessness. A Collaborative Application will be submitted to U.S. HUD in response to this NOFO for Fiscal Year 2023. Funding being sought as part of this solicitation is contingent on the Homeless Trust being awarded funds. The Request for Applications package is available on the Homeless Trust's website at <https://www.homelesstrust.org/homeless-trust/providers/home.page> under the U.S. HUD Program Competition tab.

A Virtual Pre-Application Workshop will be held at 10:00 a.m. on Wednesday, May 31, 2023 via zoom. To join the Zoom Meeting enter <https://miamidade.zoom.us/j/88598058086?pwd=T1Vhb0xjUDBFVEVncnhJYmVSRiQT09> OR Dial by your location 1-786-635-1003 in the US. The meeting ID is 885 9805 8086, and the passcode is 295791.

Attendance to the Pre-Application Workshop is strongly recommended. We invite currently funded and new non-profit providers and government agencies to review the Requests for Applications (RFA) and apply to renew existing projects or submit an application for a new project(s). **THE 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 and must avoid private communications with prospective applicants 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. **The deadline for submission of responses to this application is 2:00 p.m. EST on Friday, June 30, 2023. Please refer to the Homeless Trust website for instructions on how to compile and submit your response(s) to this solicitation.**

Miami-Dade County is not liable for any cost incurred by the applicant in responding to the Request for Applications, and we reserve the right to modify or amend the application deadline schedule if it is deemed necessary or in the interest of Miami-Dade County. Miami-Dade County also reserves the right to accept or reject any and all applications, to waive technicalities or irregularities, and to accept applications that are in the best interest of Miami-Dade County. Miami-Dade County provides equal access and opportunity in employment and services and does not discriminate on the basis of age, gender, race or disability.

For legal ads online, go to <http://legalads.miamidade.gov>

10 DAYS OF CONNECTION

MAY 1ST-10TH, 2023

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Over 50+ FREE Connection Experiences in Miami, Broward and beyond.

**REGISTER AT:
WWW.10DAYSOFCONNECTION.ORG**

#SOSNUESTRAAMÉRICA: BRASIL

Congreso brasileño pospone Ley de Censura por falta de votos

Algunos de los riesgos identificados con la aprobación de esta propuesta serían: censura previa; restricción de la libertad de expresión y vigilancia masiva



El juez del Supremo Alexandre de Moraes ordenó rendir testimonio ante la Policía a los directivos de Google, Meta, Spotify y Brasil Paralelo, por publicaciones sobre el proyecto de ley. (AP)

LUCAS RIBEIRO
@LucasRibeiro_RI
Especial

SALVADOR DE BAHÍA. El martes 25 de abril se aprobó el régimen de urgencia del Proyecto de Ley 2630. Es conocido por el gobierno como "PL das Fake News" y por la oposición como "PL da Censura".

El régimen de emergencia fue aprobado por 238 votos a favor y 192 en contra, y la expectativa es que la próxima semana se vote la ley a fondo. La prisa del gobierno por aprobar el proyecto sin pasar por comités era un motivo de preocupación. Entretanto, después de una fuerte movilización popular y presiones a los congresistas, el gobierno de Lula da Silva perdió los votos necesarios para la votación. El relator de la propuesta de ley y el gobierno decidieron posponer la votación para no perder la votación.

El día 2 de mayo, hubo mucho movimiento en las redes sociales en Brasil. Las Big Techs han sostenido una gran pelea contra los sectores tradicionales de la prensa. Las Big Techs en contra del proyecto; y sectores tradicionales de la prensa alineados al gobierno, favorecidos por la promesa de recursos financieros.

Google anunció en su plataforma que estaba contra el proyecto de ley PL 2630;

la reacción del ministro de la Justicia, el comunista Flavio Dino, fue de una multa de 1 millón de reales por hora contra el Google. De alguna manera, la censura al gigante de los buscadores ha servido como un anticipo de lo que va a ocurrir si pasara el proyecto de ley.

Después de aclarar algunas situaciones ocurridas en los últimos días, es necesario precisar lo que es el proyecto de ley 2630.

El nombre del proyecto de ley, como sucedió en Venezuela y Nicaragua, disfraza los objetivos reales de la legislación, y se llama: "Ley Brasileña de Libertad, Responsabilidad y Transparencia en Internet". También podría llamarse "Ley de Vigilancia y Control de Internet" o Ley de la Mordaza si se entendiera el contenido con mayor precisión.

El polémico "Consejo para la Transparencia y Responsabilidad en Internet" que fue considerado una suerte de "Ministerio de la Verdad" del PT fue eliminado del texto para llegar a la votación en el Congreso, pero puede insertarse como destaque luego de su aprobación. Incluso con la eliminación de esta sección, el proyecto de ley sigue siendo malo y peligroso.

Algunos de los riesgos identificados con la aprobación de esta ley serían: censura previa; restricción de la libertad de expresión; vigilancia masiva; y arbitrariedad en la

aplicación de la ley.

La censura previa y la restricción de la libertad de expresión ocurrirán debido a las grandes cantidades de multas y sanciones contra las plataformas de redes sociales por eliminar contenido. Las multas por quitar contenido pueden llegar a 1 millón de reales por hora o 50 millones de reales por infracción (hoy 1 dólar equivale aproximadamente a 5 reales). Lo que crearía un incentivo enorme para que las empresas tecnológicas eliminen contenidos que podrían generarles multas; e incluso fomentar la autocensura para evitar nuevas sanciones.

El proyecto también contempla la vigilancia masiva y la posibilidad de monitorear mensajes y contenidos compartidos en redes sociales y aplicaciones de mensajería. Esto amenaza fuertemente la privacidad del usuario. El control y la vigilancia viene bajo el nombre distópico de "transparencia". En el que la llamada transparencia es en realidad el fin de la privacidad de cualquier usuario y más obligaciones de control de las plataformas.

La arbitrariedad en la aplicación de la ley ocurrirá tal como sucedió en elecciones pasadas. Durante la jornada electoral se consideró "fake news" decir que Lula da Silva era aliado del dictador Daniel Ortega; que estaba a favor del aborto; e incluso se prohibió llamar al entonces

candidato "ex convicto" o "corrupto". Todo esto en nombre de combatir las noticias falsas y la desinformación adoptadas tanto por las Big Techs como por el poder judicial brasileño (en particular, el tribunal electoral que tuvo poderes de censura en las últimas elecciones).

Por tanto, no resulta exagerado esperar arbitrariedad en un proyecto anunciado por un diputado comunista; y tras las numerosas acciones de censura y control ejercidas por el poder judicial siempre a favor de un bando.

La bancada cristiana en el Congreso teme la interpreta-

ción de algunas partes de la ley que hablan de "discurso de odio" o discriminación. ¿Se consideraría "discurso de odio o discriminación" si un pastor evangélico publicara en sus redes que el matrimonio debe ser entre "hombre y mujer"? Este tipo de cuestionamiento es fundamental porque el concepto de "discurso de odio" o "noticias falsas" es extremadamente subjetivo y puede usarse para varios pasajes de la Biblia que corren el gran riesgo de que se prohíban y censuren.

No debemos olvidar que dictaduras aliadas al actual gobierno brasileño hicieron

leyes con objetivos supuestamente nobles. En Venezuela, la ley que aumentó la censura en el país se denominó "LEY CONSTITUCIONAL CONTRA EL ODIOS, POR LA CONVIVENCIA PACÍFICA Y LA TOLERANCIA" en 2017; en Nicaragua se creó en 2020 la "Ley contra ciberdelitos". Tras la aprobación de estas leyes, el avance dictatorial no tuvo fin entre los aliados del Foro de São Paulo en la región. Cuando se aprobó la ley, los gobiernos dictatoriales también afirmaron que la ley castigaría el "discurso de odio" y las "noticias falsas".

La expectativa del gobierno es que el proyecto fuera votado el martes; entretanto los sectores opositores han logrado movilizar la opinión pública y se logró cambiar los votos de los diputados de centro. El gobierno de Lula puede intentar volver a votar en cualquier momento, pero por ahora no tiene los votos necesarios y la libertad de expresión respira, por ahora ●

MIAMI-DADE COUNTY

AVISO PÚBLICO

PETICIÓN DE SOLICITUDES (RFA) DEL FIDEICOMISO DE LOS DESAMPARADOS DEL CONDADO DE MIAMI-DADE PARA INCLUSIÓN EN EL PROCESO COMPETITIVO DEL PROGRAMA DE ATENCIÓN INTEGRAL DEL AÑO FISCAL 2023

El Condado de Miami-Dade, mediante el Fideicomiso de los Desamparados del Condado de Miami-Dade (Fideicomiso de los Desamparados), convoca a la presentación de solicitudes para el proceso competitivo anual del Programa de Atención Integral (CoC, sigla en inglés) con el objetivo de renovar programas existentes financiados por el CoC del Departamento de Vivienda y Desarrollo Urbano de los Estados Unidos (U.S. HUD). Este proceso competitivo también permitirá a los interesados reasignar programas existentes y solicitar nuevos fondos de bonificación y reasignación para proporcionar vivienda, servicios de apoyo y otras actividades admisibles que beneficien a las personas sin hogar.

En respuesta a estos Avisos de Oportunidad de Financiación (NOFO, siglas en inglés) se presentará al HUD una Solicitud de Colaboración para el Año Fiscal 2023. 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 la pestaña "Proceso Competitivo del U.S. HUD" (U.S. HUD Program Competition).

El taller virtual previo al proceso de solicitud tendrá lugar el miércoles, 31 de mayo del 2023, a las 10:00 a. m., a través de Zoom. Para participar en la reunión a través de Zoom, use el enlace

<https://miamidadade.zoom.us/j/88598058086?pwd=T1Vhb0xjUDBFVEVncnhJYmVlSERiQT09>

O llame al 1-786-635-1003, si se encuentra en los Estados Unidos. La identificación (ID) de la reunión es 885 9805 8086 y el código de acceso 295791.

Se recomienda enfáticamente asistir al taller previo 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 revisar esta petición de solicitudes (RFA) y a presentar solicitud para renovar proyectos existentes o presentar 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 viernes 30 de junio del 2023, a las 2:00 p. m. hora estándar del este. Refiérase al sitio web del Fideicomiso de los Desamparados para 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.

More migrants are showing up nightly at a Boston hospital. Dozens, most from Haiti, slept in the lobby this week

Amid humanitarian and security crises in their home country, Haitian migrants arriving in Boston have been sleeping overnight at one of the city's major hospitals. The dramatic increase of migrants arriving in recent weeks has stretched resources, the hospital told CNN.

About 55 people, most from Haiti, spent Wednesday night in the lobby of the Boston Medical Center, according to hospital spokesperson David Kibbe.

The medical center in Boston's South End has sheltered more than 400 families for overnight stays so far in 2023 – most of whom were from Haiti, according to Kibbe. Last year, the hospital sheltered more than 600 families, he said.

The Boston Medical Center is a 514-bed academic medical center and provides care for infants, children, teens and adults, according to its website.

Kibbe said those who have taken refuge at the hospital have no where else to go but said the facility is not a shelter, nor is it a permanent home for any of the migrants.

"Families have stayed overnight in our lobby or overflow areas because they have nowhere to go, and we provide transportation to housing agencies the next morning so they can apply for housing when the agencies reopen," Kibbe wrote in a statement to CNN. "People have stayed overnight in our lobby but are not living at the hospital. The hospital is not a housing agency, and we are not a shelter."

While "it's not unusual" for families to show up at the hospital in search of housing, whether they are refugees or not, the arrivals are stretching hospital resources, Kibbe said.

"The number of families arriving on a nightly basis has risen dramatically in recent weeks, stretching the resources of our emergency department, social work and support teams," he said.

Haiti's crime rate has more than doubled since last year, as the Caribbean island nation faces widespread insecurity and gang violence, CNN reported this week.

Haiti is among the countries with the greatest inequality in the region, according to the US Department of Homeland Security, and also has one of the highest levels of chronic food insecurity in the world.

Gang violence and kidnappings spiked after Haitian President Jovenel Moïse's assassination in 2021 and "Haiti has experienced a sharp deterioration in an already fragile security situation," according to DHS.

The department extended a form of humanitarian relief to Haitians in January, citing simultaneous "economic, security, political, and health crises" in the country. The Biden administration also launched a program in January that allows Haitians, among other nationalities, to apply to legally migrate to the US.

The medical center in Boston said it is working with the state and city to connect



families with housing resources. CNN has reached out to local resettlement agencies and non-profits about the issue.

"If not otherwise in need of medical care, a hospital setting is not the place for families in need of shelter," a statement from Boston Medical Center reads.

Boston mayor calls on federal government to do more

In a statement to CNN, a spokesperson for the Boston mayor's office said it is working closely with partners at hospitals, nonprofits, churches and within the community to support families.

"We will continue to monitor the situation and are ready to be a strong partner to the state as it leads on this crisis," the

statement said.

The City of Boston spokesperson called on the federal government "to provide the necessary support to deal with this crisis." Specifically, the spokesperson wrote, the federal government should provide that support "by increasing their capacity to issue work permits to asylum seekers, providing additional funding to provide support services through a community-centered approach, better coordinating with states and cities on anticipated arrivals, and establishing clear protocols for Department of Homeland Security personnel to return all documents to migrants upon release." *Source: CNN*

CELEBRITY

Haitian rapper Pras Michel found guilty in scheme to help China influence US government

(Le Floridien) — Haitian-American rapper Pras Michel was found guilty in federal court in Washington on Wednesday of 10 criminal counts related to an international conspiracy reaching the highest levels of the US government. He faces up to 20 years in prison.

Born Prakazrel Samuel Michel, the Grammy-winning artist and former member of the Fugees who rose to fame with the hip hop group Fugees, alongside his cousin Wyclef Jean and former high-school classmate Lauryn Hill, in the 90s, faced multiple counts over the failed conspiracy to help Malaysian businessman Jho Low and the Chinese government gain access to US officials, including former presidents Barack Obama and Donald Trump.

After deliberating for two days, a jury in U.S. District Court in Wash-



Michel testified that he did not know it was illegal to lobby for foreign nationals without registering with the U.S. government.

ington found Michel guilty of all the charges against him, including lying to banks, in a convoluted case arising tangentially from one of the world's biggest financial scandals: the looting of \$4.5 billion from Malaysia's sovereign wealth fund.

The 50-year-old former rap star, who sat impassively as the verdicts were announced, was not accused of participating in the gargantuan theft. The charges he faced stemmed from his association with the alleged

architect of the embezzlement, a wild-spending, lavish-partying Malaysian financier named Low Taek Jho, who is a fugitive from justice.

No sentencing date has been set. Some of the offenses he was convicted of are punishable by up to 20 years in prison, but under advisory federal sentencing guidelines, Judge Colleen Kollar-Kotelly probably will impose a shorter prison term.

HAITIAN RAPPER Page 10



AVI PIBLIK

DEMAND POU APLIKASYON (RFA) HOMELESS TRUST KONTE MIAMI-DADE POU ENKLIZYON NAN KONPETISYON PWOGRAM CONTINUUM OF CARE ANE FISKAL 2023 A

Konte Miami-Dade, atravè Homeless Trust (Homeless Trust) Konte Miami-Dade ap mande aplikasyon pou Konpetisyon Anyèl Continuum of Care (CoC) nou an pou renouvle pwogram ki egziste deja yo ke fon Depatman Lojman ak Devlopman Iben Etazini (US HUD) finanse. Konpetisyon sa a va pèmèt moun ki reponn yo re-alwe pwogram ki egziste deja yo epi aplike pou nouvo avantaj ak finansman re-alokasyon pou bay lojman, sèvis sipò, ak lòt aktivite elijib ki nan avantaj moun ki sanzabri.

Yo va soumèt yon Aplikasyon Kolaboratif bay HUD Etazini an repons a NOFO sa a pou Ane Fiskal 2023. Finansman yo ap chèche nan kad demann sa a depann de fon ke Homeless Trust resevwa. Pake Demann pou Aplikasyon yo disponib sou sit entènèt Homeless Trust la nan <https://www.homelesstrust.org/homeless-trust/providers/home.page> anba tab U.S. HUD Program Competition.

Va gen yon Atelye Vityèl Anvan Aplikasyon ka va fèt a 10:00 a.m. mèkredi 31 me 2023 atravè zoom. Pou w patisipe nan reyinyon Zoom lan, antre

<https://miamidade.zoom.us/j/88598058086?pwd=T1Vhb0xjUDBFVEVncnhJYmVSRlQ0T09>

OSWA

Rele kote ou ye a 1-786-635-1003 nan peyi Etazini. Idantifyan reyinyon an se 885 9805 8086, ak paskod la se 295791.

Nou vrèman rekòmande prezans moun nan Atelye Anvan Aplikasyon an. Nou envite founisè ki ap resevwa finansman kounye a ak nouvo founisè san bi likratif ak ajans gouvènman yo revize Demann pou Aplikasyon (RFA) epi aplike pou renouvle pwòjè ki deja egziste oswa soumèt yon aplikasyon pou nouvo pwòjè. **RFA A SIJÈ A KÒN SILANS LA, ÔDANANS KONTE 98-106.** Pou Konte a kenbe yon pwosesis kompetitif ki jis e san patipri, li kapab reponn kesyon sèlman nan Atelye Anvan Aplikasyon an epi li dwe evite kominikasyon prive avèk aplikan evantyèl yo pandan pwosesis preparasyon ak evalyasyon aplikasyon an. Tanpri kontakte Homeless Trust si dokiman Demann pou Aplikasyon nesèsè nan yon fòm oswa yon lang altènatif. **Dat limit pou soumèt repons pou aplikasyon sa a se 2:00 pm EST nan dat 30 jen 2023. Tanpri gade sou sit entènèt Homeless Trust la pou w ka jwenn enstriksyon sou fason pou konpile epi soumèt repons ou pou demann sa a.**

Konte Miami-Dade pa responsab okenn depans aplikan an fè pandan li ap reponn Demann pou Aplikasyon an, epi nou rezève dwa pou nou modifiye oswa amande orè dat limit aplikasyon an si nou konsidere sa nesèsè oswa si sa nan enterè Konte Miami-Dade. Konte Miami-Dade rezève dwa tou pou li aksepte oswa rejete tout aplikasyon, pou li pa konsidere teknikite oswa iregilarite, epi pou li aksepte aplikasyon ki nan meyè enterè Konte Miami-Dade. Konte Miami-Dade bay aksè egal ak opòtinite egal pou travay ak sèvis epi li pa fè diskriminasyon ki baze sou laj, sèks, ras oswa andikapdoes.



NOFO 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	
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: oIn 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 oAn 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: ovalue of the commitment, and odates the healthcare resources will be provided.	6 Points	

Comments:

D. Equity 4 points (4% of total score)

1. Provider has identified steps and strategies to promote racial equity	2 Points	
2. Provider has addressed the needs of LGBTQ+ individuals (i.e. implementing training for their staff on anti-discrimination policies that ensure LGBTQ+ individuals and families receive supportive services free from discrimination)	2 Points	

Comments:

TOTAL:	0
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Raters Name:	Date:
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NOFO 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: oIn 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 oAn 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: ovalue of the commitment, and odates 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. Equity 4 points (3% of total score)		
1. Provider has identified steps and strategies to promote racial equity	2 Points	
2. Provider has addressed the needs of LGBTQ+ individuals (i.e. implementing training for their staff on anti-discrimination policies that ensure LGBTQ+ individuals and families receive supportive services and housing free from discrimination)	2 Points	
Comments:		
TOTAL:		0

Raters Name:	Date:
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NOFO RFA PH 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"> oIn 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 oAn 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"> ovalue of the commitment, and odates 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. Equity 4 points (3% of total score)		
1. Provider has identified steps and strategies to promote racial equity	2 Points	
2. Provider has addressed the needs of LGBTQ+ individuals (i.e. implementing training for their staff on anti-discrimination policies that ensure LGBTQ+ individuals and families receive supportive services and housing free from discrimination)	2 Points	
Comments:		
TOTAL:		0

Raters Name:	Date:
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NAVIGATION

- GO Customize Threshold Requirements
- GO Filter Rating Factors
- GO Customize Renewal/Expansion Project Rating Tool
- GO Customize New Project Rating Tool

CUSTOMIZE NEW AND RENEWAL/EXPANSION PROJECT THRESHOLD REQUIREMENTS

CoC Threshold Requirements

(Delete the X in the box next to any requirements you do not wish to include.)

- Coordinated Entry Participation
- Housing First and/or Low Barrier Implementation
- Documented, secured minimum match
- Project has reasonable costs per permanent housing exit, as defined locally
- Project is financially feasible
- Applicant is active CoC participant
- Application is complete and data are consistent
- Data quality at or above 90%
- Bed/unit utilization rate at or above 90%
- Acceptable organizational audit/financial review

(The first five requirements are the rating process either as Threshold or Financially Feasible)

FILTER RATING FACTORS

Select project type to edit

Select...

Using these drop-down menus, select which rating factors to show and customize

Select special population

Select...

CUSTOMIZE RENEWAL/EXPANSION PROJECT RATING TOOL

Delete the X in the box besides any rating factor below that you do not wish to include. If desired, adjust the factor/goal and point value for each measure. You can add additional locally-defined criteria below. See the Data Source Chart for information about where to obtain data to use in scoring.

Performance Measures

Length of Stay

	Factor/Goal	Max Point Value
<input checked="" type="checkbox"/> RRH (General) - On average, participants spend XX days from project entry to residential move-in	30 days	20 points
<input type="checkbox"/> RRH (DV) - On average, participants spend XX days from project entry to residential move-in		
<input checked="" type="checkbox"/> PSH (General) - On average, participants spend XX days from project entry to residential move-in	30 days	20 points
<input type="checkbox"/> PSH (DV) - On average, participants spend XX days from project entry to residential move-in		
<input type="checkbox"/> TH (General) - On average, participants stay in project XX days		
<input type="checkbox"/> TH (DV) - On average, participants stay in project XX days		
<input checked="" type="checkbox"/> TH+RRH (General) - TH Component (General) - On average, participants stay in project XX days	180 days	10 points
<input type="checkbox"/> TH+RRH (DV) - TH Component - On average, participants stay in project XX days		
<input checked="" type="checkbox"/> TH+RRH (General) - RRH Component - On average, participants spend XX days from project entry to residential move-in	15 days	10 points
<input type="checkbox"/> TH+RRH (DV) - RRH Component - On average, participants spend XX days from project entry to residential move-in		

Exits to Permanent Housing

<input checked="" type="checkbox"/> RRH (General) - Minimum percent move to permanent housing	90 %	25 points
<input type="checkbox"/> RRH (DV) - Minimum percent move to permanent housing		
<input checked="" type="checkbox"/> PSH (General) - Minimum percent remain in or move to permanent housing	90 %	25 points
<input type="checkbox"/> PSH (DV) - Minimum percent remain in or move to permanent housing		
<input type="checkbox"/> TH (General) - Minimum percent move to permanent housing		
<input type="checkbox"/> TH (DV) - Minimum percent move to permanent housing		
<input checked="" type="checkbox"/> TH+RRH (General) - RRH Component - Minimum percent move to permanent housing	90 %	25 points
<input type="checkbox"/> TH+RRH (DV) - RRH Component - Minimum percent move to permanent housing		

Returns to Homelessness (if data is available for project)

<input checked="" type="checkbox"/> RRH (General) - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing	10 %	15 points
<input type="checkbox"/> RRH (DV) - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing		

CUSTOMIZE RATING CRITERIA

<input checked="" type="checkbox"/>	PSH (General) - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing	10 %	15 points
<input type="checkbox"/>	PSH (DV) - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing		
<input type="checkbox"/>	TH (General) - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing		
<input type="checkbox"/>	TH (DV) - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing		
<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing	10 %	15 points
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - Maximum percent of participants return to homelessness within 12 months of exit to permanent housing		

New or Increased Income and Earned Income

<input checked="" type="checkbox"/>	RRH (General) - Minimum percent of participants with new or increased earned income for project stayers	8 %	2.5 points
<input type="checkbox"/>	RRH (DV) - Minimum percent of participants with new or increased earned income for project stayers		
<input checked="" type="checkbox"/>	PSH (General) - Minimum percent of participants with new or increased earned income for project stayers	8 %	2.5 points
<input type="checkbox"/>	PSH (DV) - Minimum percent of participants with new or increased earned income for project stayers		
<input type="checkbox"/>	TH (General) - Minimum percent of participants with new or increased earned income for project stayers		
<input type="checkbox"/>	TH (DV) - Minimum percent of participants with new or increased earned income for project stayers		
<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Minimum percent of participants with new or increased earned income for project stayers	8 %	2.5 points
<input checked="" type="checkbox"/>	TH+RRH (DV) - RRH Component - Minimum percent of participants with new or increased earned income for project stayers	8 %	2.5 points
<input checked="" type="checkbox"/>	RRH (General) - Minimum percent of participants with new or increased non-employment income for project stayers	10 %	2.5 points
<input type="checkbox"/>	RRH (DV) - Minimum percent of participants with new or increased non-employment income for project stayers		
<input checked="" type="checkbox"/>	PSH (General) - Minimum percent of participants with new or increased non-employment income for project stayers	10 %	2.5 points
<input type="checkbox"/>	PSH (DV) - Minimum percent of participants with new or increased non-employment income for project stayers		
<input type="checkbox"/>	TH (General) - Minimum percent of participants with new or increased non-employment income for project stayers		
<input type="checkbox"/>	TH (DV) - Minimum percent of participants with new or increased non-employment income for project stayers		
<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Minimum percent of participants with new or increased non-employment income for project stayers	10 %	2.5 points
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - Minimum percent of participants with new or increased non-employment income for project stayers		
<input checked="" type="checkbox"/>	RRH (General) - Minimum percent of participants with new or increased earned income for project leavers	15 %	2.5 points
<input type="checkbox"/>	RRH (DV) - Minimum percent of participants with new or increased earned income for project leavers		
<input checked="" type="checkbox"/>	PSH (General) - Minimum percent of participants with new or increased earned income for project leavers	15 %	2.5 points
<input type="checkbox"/>	PSH (DV) - Minimum percent of participants with new or increased earned income for project leavers		
<input type="checkbox"/>	TH (General) - Minimum percent of participants with new or increased earned income for project leavers		
<input type="checkbox"/>	TH (DV) - Minimum percent of participants with new or increased earned income for project leavers		
<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Minimum percent of participants with new or increased earned income for project leavers	15 %	2.5 points
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - Minimum percent of participants with new or increased earned income for project leavers		
<input checked="" type="checkbox"/>	RRH (General) - Minimum percent of participants with new or increased non-employment income for project leavers	25 %	2.5 points
<input type="checkbox"/>	RRH (DV) - Minimum percent of participants with new or increased non-employment income for project leavers		
<input checked="" type="checkbox"/>	PSH (General) - Minimum percent of participants with new or increased non-employment income for project leavers	25 %	2.5 points
<input type="checkbox"/>	PSH (DV) - Minimum percent of participants with new or increased non-employment income for project leavers		
<input checked="" type="checkbox"/>	TH (General) - Minimum percent of participants with new or increased non-employment income for project leavers	25 %	2.5 points
<input type="checkbox"/>	TH (DV) - Minimum percent of participants with new or increased non-employment income for project leavers		
<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Minimum percent of participants with new or increased non-employment income for project leavers	25 %	2.5 points
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - Minimum percent of participants with new or increased non-employment income for project leavers		

Serve High Need Populations *(select from drop-down menu)*

<input type="checkbox"/>	<input type="text" value="Project focuses on chronically homeless people"/>		
<input checked="" type="checkbox"/>	RRH (General) - XX% of participants are chronically homeless	95 %	20 points
<input type="checkbox"/>	RRH (DV) - XX% of participants are chronically homeless		
<input checked="" type="checkbox"/>	PSH (General) - XX% of participants are chronically homeless	95 %	20 points
<input type="checkbox"/>	PSH (DV) - XX% of participants are chronically homeless		
<input type="checkbox"/>	TH (General) - XX% of participants are chronically homeless		
<input type="checkbox"/>	TH (DV) - XX% of participants are chronically homeless		
<input type="checkbox"/>	TH+RRH (General) - RRH Component - XX% of participants are chronically homeless		
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - XX% of participants are chronically homeless		

Project Effectiveness

<input checked="" type="checkbox"/>	RRH (General) - Costs are within local average cost per positive housing exit for project type	Yes	20 points
<input type="checkbox"/>	RRH (DV) - Costs are within local average cost per positive housing exit for project type		
<input checked="" type="checkbox"/>	PSH (General) - Costs are within local average cost per positive housing exit for project type	Yes	20 points
<input type="checkbox"/>	PSH (DV) - Costs are within local average cost per positive housing exit for project type		
<input type="checkbox"/>	TH (General) - Costs are within local average cost per positive housing exit for project type		
<input type="checkbox"/>	TH (DV) - Costs are within local average cost per positive housing exit for project type		

CUSTOMIZE RATING CRITERIA

<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Costs are within local average cost per positive housing exit for project type	Yes	20	points
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - Costs are within local average cost per positive housing exit for project type			
<input checked="" type="checkbox"/>	RRH (General) - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)	95 %	10	points
<input type="checkbox"/>	RRH (DV) - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)			
<input checked="" type="checkbox"/>	PSH (General) - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)	95 %	10	points
<input type="checkbox"/>	PSH (DV) - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)			
<input type="checkbox"/>	TH (General) - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)			
<input type="checkbox"/>	TH (DV) - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)			
<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)	95 %	10	points
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - Coordinated Entry Participation- Minimum percent of entries to project from CE referral (or alternative system for DV projects)			
<input checked="" type="checkbox"/>	RRH (General) - Housing First and/or Low Barrier Implementation (General) - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures	Yes	10	points
<input type="checkbox"/>	RRH (DV) - Housing First and/or Low Barrier Implementation - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures			
<input checked="" type="checkbox"/>	PSH (General) - Housing First and/or Low Barrier Implementation (General) - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures	Yes	10	points
<input type="checkbox"/>	PSH (DV) - Housing First and/or Low Barrier Implementation - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures			
<input type="checkbox"/>	TH (General) - Housing First and/or Low Barrier Implementation (General) - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures			
<input type="checkbox"/>	TH (DV) - Housing First and/or Low Barrier Implementation - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures			
<input checked="" type="checkbox"/>	TH+RRH (General) - RRH Component - Housing First and/or Low Barrier Implementation (General) - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures	Yes	10	points
<input type="checkbox"/>	TH+RRH (DV) - RRH Component - Housing First and/or Low Barrier Implementation - CoC assessment of fidelity to Housing First from CoC monitoring or review of project policies and procedures			

Equity Factors

Agency Leadership, Governance, and Policies

<input checked="" type="checkbox"/>	Recipient has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions	Yes	10	points
<input checked="" type="checkbox"/>	Recipient's board of directors includes representation from more than one person with lived experience of homelessness	Yes	10	points
<input checked="" type="checkbox"/>	Recipient has relational process for receiving and incorporating feedback from persons with lived experience of homelessness	Yes	10	points
<input checked="" type="checkbox"/>	Recipient has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers	Yes	10	points

Program Participant Outcomes

<input checked="" type="checkbox"/>	Recipient has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, age, and/or other underserved populations	Yes	10	points
<input checked="" type="checkbox"/>	Recipient has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes	Yes	10	points
<input checked="" type="checkbox"/>	Recipient is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, age, and/or other underserved populations	Yes	10	points

Other and Local Criteria

(select from drop-down menu)

<input checked="" type="checkbox"/>	CoC Monitoring Score	Project is operating in conformance with CoC Standards	Yes	10	points
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Total Maximum Score	RRH-General projects:	210	points
	RRH-DV projects:	80	points
	PSH-General projects:	210	points
	PSH-DV projects:	80	points
	TH-General projects:	82.5	points
	TH-DV projects:	80	points
	TH+RRH-General projects:	190	points
	TH+RRH-DV projects:	82.5	points

CUSTOMIZE NEW PROJECT RATING TOOL

Experience

Factor/Goal

Max Point Value

<input checked="" type="checkbox"/>	General-A. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.	15	points
<input checked="" type="checkbox"/>	DV-A. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.	15	points
	General-B. Describe experience with utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria		

CUSTOMIZE RATING CRITERIA

for exiting clients. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases. 10 points

DV-B. Describe experience with utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases. 10 points

General-C. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants. 5 points

DV-C. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants. 5 points

Design of Housing & Supportive Services

General-A. Extent to which the applicant 1) Demonstrates understanding of the needs of the clients to be served. 2) Demonstrates that type, scale, and location of the housing fit the needs of the clients to be served. 3) Demonstrates that type and scale of the all supportive services, regardless of funding source, meets the needs of clients to be served. 4) Demonstrates how clients will be assisted in obtaining mainstream benefits. 5) Establishes performances measures for housing and income that are objective, measurable, trackable and meet or exceed any established HUD or CoC benchmarks. 15 points

DV-A. Extent to which the applicant 1) Demonstrates understanding of the needs of the clients to be served. 2) Demonstrates that type, scale, and location of the housing fit the needs of the clients to be served. 3) Demonstrates that type and scale of the all supportive services, regardless of funding source, meets the needs of clients to be served. 4) Demonstrates how clients will be assisted in obtaining mainstream benefits. 5) Establishes performances measures for housing and income that are objective, measurable, trackable and meet or exceed any established HUD or CoC benchmarks. 15 points

General-B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs. 5 points

DV-B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs. 5 points

General-C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently. 5 points

DV-C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently. 5 points

General-D. Project leverages housing resources with housing subsidies or units not funded through the CoC or ESG programs. 10 points

DV-D. Project leverages housing resources with housing subsidies or units not funded through the CoC or ESG programs. 10 points

General-E. Project leverages health resources, including a partnership commitment with a healthcare organization. 10 points

DV-E. Project leverages health resources, including a partnership commitment with a healthcare organization. 10 points

Timeliness

General-A. Describe plan for rapid implementation of the program, documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award. 10 points

DV-A. Describe plan for rapid implementation of the program, documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award. 10 points

Financial

General-A. Project is cost-effective when projected cost per person served is compared to CoC average within project type. 5 points

DV-A. Project is cost-effective when projected cost per person served is compared to CoC average within project type. 5 points

B. Organization's most recent audit:

General-1. Found no exceptions to standard practicciss 5 points

DV-1. Found no exceptions to standard practicciss 5 points

General-2. Identified agency as 'low risk' 5 points

DV-2. Identified agency as 'low risk' 5 points

General-3. Indicates no findings 5 points

DV-3. Indicates no findings 5 points

General-C. Documented match amount meets HUD requirements. 5 points

DV-C. Documented match amount meets HUD requirements. 5 points

General-D. Budgeted costs are reasonable, allocable, and allowable. 20 points

DV-D. Budgeted costs are reasonable, allocable, and allowable. 20 points

Project Effectiveness

<input checked="" type="checkbox"/>	General-Coordinated Entry Participation- Minimum percent of entries projected to come from CE referrals	95 %	5 points
<input checked="" type="checkbox"/>	DV-Coordinated Entry Participation- Minimum percent of entries projected to come from CE referrals	95 %	5 points

Equity Factors

Agency Leadership, Governance, and Policies

<input checked="" type="checkbox"/>	New project has under-representated individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions	Yes	10 points
<input checked="" type="checkbox"/>	New project's organizational board of directors includes representation from more than one person with lived experience (per 578.75(g))	Yes	10 points
<input checked="" type="checkbox"/>	New project has relational process for receiving and incorporating feedback from persons with lived experience or a plan to create one	Yes	10 points
<input checked="" type="checkbox"/>	New project has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers that exacerbate disparities and outcomes	Yes	10 points

Program Participant Outcomes

<input checked="" type="checkbox"/>	New project describes their plan for reviewing program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age. If already implementing a plan, describe findings from outcomes review	10 points
<input checked="" type="checkbox"/>	New project describes plan to review whether programmatic changes are needed to make program participant outcomes more equitable and developed a plan to make those changes. If already implementing plan, describe findings from review	10 points
<input checked="" type="checkbox"/>	New project describes plan to work with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age. If already implementing plan, describe findings from review	10 points

Other and Local Criteria

Total Maximum Score

General projects: **120** points

RENEWAL/EXPANSION PROJECT RATING TOOL

Project Name: v Br. Keily Permanent Supportive Housing (8)
 Organization Name: Camillus House
 Project Type: PSH (General)
 Project Identifier: 8

RATING FACTOR	PERFORMANCE GOAL	PERFORMANCE	POINTS AWARDED	MAX POINT VALUE
PERFORMANCE MEASURES				
Length of Stay				
Permanent Supportive-Housing	On average, participants are placed in housing 30 days after referral to PSH	<input type="text" value="0"/> days	<input type="text" value="20"/> out of	20
Exits to Permanent Housing				
Permanent Supportive-Housing	90% remain in or move to PH	<input type="text" value="95"/> %	<input type="text" value="25"/> out of	25
Returns to Homelessness				
Within 12 months of exit to permanent housing	≤ 10% of participants return to homelessness within 12 months of exit to PH	<input type="text" value="33"/> %	<input type="text" value="0"/> out of	15
New or Increased Income and Earned Income				
Earned income for project stayers	8%+ of participants with new or increased income	<input type="text" value="0"/> %	<input type="text" value="0.0"/> out of	2.5
Non-employment income for project stayers	10%+ of participants with new or increased income	<input type="text" value="54"/> %	<input type="text" value="2.5"/> out of	2.5
Earned income for project leavers	15%+ of participants with new or increased income	<input type="text" value="0"/> %	<input type="text" value="0.0"/> out of	2.5
Non-employment income for project leavers	25%+ of participants with new or increased income	<input type="text" value="67"/> %	<input type="text" value="2.5"/> out of	2.5
Performance Measures Subtotal			50	out of 70
SERVE HIGH NEED POPULATIONS				
Permanent Supportive-Housing	≥ 95% of participants are chronically homeless	<input type="text" value="91"/> %	<input type="text" value="0.0"/> out of	20
Serve High Need Populations Subtotal			0	out of 20
PROJECT EFFECTIVENESS				
Project has reasonable costs	Costs are within local average cost per positive housing exit for project type	<input type="text" value="no"/>	<input type="text" value="0"/> out of	20
Coordinated Entry Participation	≥ 95% of entries to project from CE referrals	<input type="text" value="100"/> %	<input type="text" value="10"/> out of	10
Housing First and/or Low Barrier Implementation	Commits to applying Housing First model	<input type="text" value="Yes"/>	<input type="text" value="10"/> out of	10
Project Effectiveness Subtotal			20	out of 40
EQUITY FACTORS				
Agency Leadership, Governance, and Policies				
Recipient Management & Leadership Positions	BIPOC, LGBTQIA+, etc representation	<input type="text"/>	<input type="text" value="10"/> out of	10
Recipient Board of Directors	BIPOC, LGBTQIA+, etc representation	<input type="text"/>	<input type="text" value="10"/> out of	10
Process for receiving & incorporating feedback	Process includes persons with lived experience	<input type="text"/>	<input type="text" value="10"/> out of	10
Internal Policies and Procedures	Policies with equitable lens, no undue barriers	<input type="text"/>	<input type="text" value="10"/> out of	10
Program Participant Outcomes				
Outcomes with an equity lens	Data disaggregated by underserved populations	<input type="text"/>	<input type="text" value="10"/> out of	10
Program changes for equitable outcomes	Plan to create more equitable program outcomes	<input type="text"/>	<input type="text" value="10"/> out of	10
HMIS data review with equity lens	Plan to review disaggregated data	<input type="text"/>	<input type="text" value="10"/> out of	10
Equity Factors Subtotal			70	out of 70
OTHER AND LOCAL CRITERIA				
CoC Monitoring Score	Project is operating in conformance to CoC standards	<input type="text" value="100"/>	<input type="text" value="10"/> out of	10
Other and Local Criteria Subtotal			10	out of 10
TOTAL SCORE			150	out of 210
Weighted Rating Score			71	out of 100

PROJECT FINANCIAL INFORMATION

CoC funding requested	<i>NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab</i>	\$ 1,183,338
Amount of other public funding (federal, state, county, city)		<input type="text"/>
Amount of private funding		<input type="text"/>
TOTAL PROJECT COST		\$ 1,183,338
CoC Amount Awarded Last Operating Year	<i>NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab</i>	\$ 1,117,890
CoC Amount Expended Last Operating Year	<i>NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab</i>	\$ 609,353
Percent of CoC funding expended last operating year		55%

2023 US HUD CoC Program Competition: Reduced Project Application - Message (HT...)

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2023 US HUD CoC Program Competition: Reduced Project Application



Mallette, Victoria (HT)

To Mario E. Jardon - Citrus Health Network, Inc. (marioj@citrushealth.com)
Cc Thomas Jardon (Thomasj@citrushealth.com); Sarria, Manuel (HT); Maria Alonso

Reply Reply All Forward

Thu 8/10/2023 7:30 PM



Mario... Please see attached. Sincerely, Vicki

Victoria L. Mallette
Executive Director
Miami-Dade County Homeless Trust
Stephen P. Clark Center
[111 NW 1st Street, 27th Floor](#)
[Miami, FL 33128](#)
305-375-1491 Office
786-251-8324 Cell
vmallette@miamidade.gov

If you or someone you know is Homeless or about to become homeless, please call the Homeless Helpline at **1-877-994-HELP (4357)**.

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2023 US HUD CoC Program Competition: Rejected Project Application - Message (HT...)

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2023 US HUD CoC Program Competition: Rejected Project Application

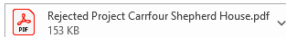


Mallette, Victoria (HT)

To Stephanie Berman (sberman@carfour.org)
Cc Sandra Newson; Sarria, Manuel (HT)

Reply Reply All Forward

Thu 8/10/2023 7:28 PM



Stephanie... Please see attached. Sincerely, Vicki

Victoria L. Mallette
Executive Director
Miami-Dade County Homeless Trust
Stephen P. Clark Center
[111 NW 1st Street, 27th Floor](#)
[Miami, FL 33128](#)
305-375-1491 Office
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2023 US HUD CoC Program Competition: Rejected Project Application



Mallette, Victoria (HT)
To LCSW Eleanor Lanser - Douglas Gardens CMHC (Elanser@dgcmmc.org)
Cc Sarria, Manuel (HT)

Reply Reply All Forward

Thu 8/10/2023 7:27 PM

You replied to this message on 8/10/2023 7:36 PM.



Eleanor... Please see attached. Sincerely, Vicki

Victoria L. Mallette
Executive Director
Miami-Dade County Homeless Trust
Stephen P. Clark Center
[111 NW 1st Street, 27th Floor](#)
[Miami, FL 33128](#)
305-375-1491 Office
786-251-8324 Cell
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Windows taskbar showing various open applications and system tray icons. System clock: 7:38 PM 8/10/2023



miamidade.gov

Homeless Trust
111 N.W. 1st Street • 27th Floor, Suite 310
Miami, FL 33128-1930
T 305.375.1490 / F 305.375.2722

August 10, 2023

Mario Jardon
CEO
Citrus Health Network, Inc.
4175 W 20 Avenue
Hialeah, Florida 33012

RE: 2023 US HUD CoC Program Competition: Reduced Project Application

Dear Mr. Jardon:

Pursuant to Miami-Dade County Homeless Trust's Scoring, Ranking and Reallocation process approved by the CoC Board, we are reducing the budget for the Ethyl Elan renewal project application in our collaborative application to US HUD for the 2023 Continuum of Care Notice of Funding Opportunity. We recommended the reduction because the project was lapsing a portion of the awarded funds. We received your team's acknowledgement and voluntary reallocation of part of the project as part of our local solicitation.

If you have any questions, please let us know.

Sincerely,

A handwritten signature in black ink that reads "Victoria L. Mallette". The signature is written in a cursive, flowing style.

Victoria L. Mallette
Executive Director

c: Manny Sarria, Assistant Executive Director



miamidade.gov

Homeless Trust
111 N.W. 1st Street • 27th Floor, Suite 310
Miami, FL 33128-1930
T 305.375.1490 / F 305.375.2722

August 10, 2023

Stephanie Berman
President and CEO
Carrfour Supportive Housing, Inc.
1398 SW 1st Street
Miami, Florida 33135

RE: 2023 US HUD CoC Program Competition: Rejected Project Application

Dear Ms. Berman:

Pursuant to Miami-Dade County Homeless Trust's Scoring, Ranking and Reallocation process approved by the CoC Board, we are not including the Shepherd House renewal project application in our collaborative application to US HUD for their 2023 Continuum of Care Notice of Funding Opportunity. We received your request to reallocate the entire project as part of our local solicitation.

If you have any questions, please let us know.

Sincerely,

A handwritten signature in black ink that reads "Victoria L. Mallette".

Victoria L. Mallette
Executive Director

c: Manny Sarria, Assistant Executive Director



miamidade.gov

Homeless Trust
111 N.W. 1st Street • 27th Floor, Suite 310
Miami, FL 33128-1930
T 305.375.1490 / F 305.375.2722

August 10, 2023

Eleanor Lanser
CEO
1680 Meridian Avenue, Suite 501
Miami Beach, FL 33139

RE: 2023 US HUD CoC Program Competition: Rejected Project Application

Dear Ms. Lanser:

Pursuant to Miami-Dade County Homeless Trust's Scoring, Ranking and Reallocation process approved by the CoC Board, we are not including part of the Moving Forward renewal project application in our collaborative application to US HUD for their 2023 Continuum of Care Notice of Funding Opportunity. We received your intent not to renew the project for FY 2023 and we reallocated the project to allow for new programs as part of our local solicitation.

If you have any questions, please let us know.

Sincerely,

A handwritten signature in black ink that reads "Victoria L. Mallette".

Victoria L. Mallette
Executive Director

c: Manny Sarria, Assistant Executive Director

File Message Help Acrobat

Delete Archive Delete Respond Teams Apps Quick Steps Move Tags Editing Immersive Translate Language Zoom Find Time OneNote Add-in Protection Protection

HSD committee
To Manager
Team Email

RE: 2023 NOFO Application Extension



Sarría, Manuel (HT)

To Clerk of the Board (COC)

Cc Mallette, Victoria (HT); Althea Birch; Ana Rubirosa; Angel Evans; Anjuli Castano; Anna Kopper; Antonio Villasuso; Arti Pallin; Beatrice Gonzalez; Brittany Rosen; Cary YeeQueen; Chania Somarriba; Cici Cici; Cindy Torres; Constance Collins; **+93 others**

😊 Reply Reply All Forward

Wed 9/13/2023 6:20 AM

project-rating-and-ranking-tool 9.13.23.xlsx
588 KB

Hi all...

Attached please find the final NOFO rating and ranking tool. Not much has changed from the ranking recommendations we submitted on August 24, 2023 for those projects that submitted renewal and new project applications. The Bonus project applications received after two rounds of requests for proposals did not exhaust the total available for Bonus to Miami-Dade under the 2023 NOFO. In this ranking we are including two additional bonus applications ranked 49 and 50 after the bonus projects that competed for funding who were subject to scoring and ranking. The two project applications are requesting Capital for two hotel to permanent housing conversions.

Please email me with any questions.

Thank you,

Manny Sarría, LCSW
Asst. Executive Director
Miami-Dade County
Homeless Trust
Manuel.Sarría@miamidade.gov
(305)546-4427

Tier	Rank	Applicant	Project Name	New Name	Grant Number	Project Compone	Points	Requested Funding	Reallocated Funds	
Renewal Projects										
Tier 1	1C	Carrfour	Consolidated Project	Villa, Royalton, and Amistad Consolidation	FL0442	PH	NR	\$2,850,209		
	1	Carrfour	Villa Aurora Consolidation		FL0442L4D002211	PH	NR			
	2	Carrfour	Royalton Expansion		FL0362L4D002213	PH	NR			
	3	Carrfour	Amistad		FL0484L4D002209	PH	NR			
	4C	Citrus	Consolidated Project	Housing ACT Consolidation		FL0195	PH	NR	\$5,651,648	
	4	Citrus	Kolapi			FL0431L4D002211	PH	NR		
	5	Citrus	Housing ACT Consolidation			FL0195L4D002215	PH	NR		
	6C	Carrfour	Consolidated Project	Harding and Liberty Consolidation		FL0389	PH	NR	\$1,184,926	
	6	Carrfour	Liberty Village			FL0656L4D002206	PH	NR		
	7	Carrfour	Harding Village			FL0185L4D002215	PH	NR		
	8C	Carrfour	Consolidated Project	Del Prado and Karis Consolidation			PH	NR	\$787,105	
	8	Carrfour	Del Prado Gardens			FL0181L4D002215	PH	NR		
	9	Carrfour	Karis Village			FL0657L4D002206	PH	NR		
	10	Carrfour	Bonita Cove			FL0389L4D002210	PH	NR	\$146,748	
	11	City of Miami	Miami Homeless Assistance Program CE Consolidation			FL0211L4D002215	SSO	NR	\$695,520	
	12	Miami Beach	City of Miami Beach Outreach			FL0177L4D002215	SSO	NR	\$65,212	
	13	Citrus	Montega Revamped			FL0981L4D002200	PH	NR	\$1,467,279	
	14	Camillus	Granada PSH			FL0982L4D002200	PH	NR	\$616,955	
	15	DGCMHC	Hope Gardens Consolidation			FL0169L4D002215	PH	NR	\$552,731	
	16	Carrfour	Northside Commons			FL0918L4D002201	PH	NR		
	17	CAHSD	MDC Domestic Violence Rapid Re-Housing Project			FL0919D4D002201	PH	NR	\$1,666,348	
	18	VOA	Hogar 2			FL0191L4D002215	PH	90	\$1,275,463	
	19	Fellowship	Coconut Grove 1 Consolidation			FL0178L4D002215	PH	89	\$218,784	
	20	Carrfour	Casa Matias			FL0390L4D002210	PH	89	\$243,889	
	21	Carrfour	Community Connections Program			FL0839L4D002203	PH	89	\$651,942	
	22	Citrus	Ethyl Elan Apartments Consolidation			FL0182L4D002215	PH	88	\$3,027,190	-\$457,285
	23	DGCMHC	Right Directions			FL0222L4D002215	PH	88	\$174,885	
	24	Camillus	Archbishop Carroll Homes			FL0311L4D002214	PH	88	\$1,230,324	
	25	Camillus	Mother Seton PH			FL0590L4D002207	PH	88	\$609,224	
	26	BWOM	Better Way Apartments			FL0170L4D002215	PH	87	\$698,333	
	27	Fellowship	Homestead Scattered Site			FL0194L4D002215	PH	87	\$215,037	
	28	BWOM	Better Way West Wing			FL0313L4D002214	PH	87	\$265,232	
	29	Camillus	Project Dade Cares PSH			FL0655L4D002206	PH	86	\$670,995	
	30	Citrus	Citrus Health Youth Housing Program			FL0746L4D002204	Joint TH & PH-RRH	86	\$1,020,418	
	31	Carrfour	Rivermont House			FL0223L4D002215	PH	82	\$549,779	
	32	Carrfour	THOP Expansion			FL0492L4D002209	PH	82	\$2,411,687	
	33	Citrus	Shaman			FL0227L4D002215	PH	81	\$542,580	
	34	Camillus	Shepherd's Court Samaritan			FL0343L4D002211	PH	81	\$632,031	
	35	Carrfour	Little Haiti Consolidation	Little Haiti, Little River and Coalition Consolidation		FL0202L4D002215	PH	80	\$1,721,943	
	36	Camillus	Brother Mathias			FL0174L4D002215	PH	79	\$292,338	
	37	NHCMHC	J. Moss Consolidation			FL0312L4D002214	PH	79	\$2,048,280	
	38	VOA	Hogar I			FL0192L4D002215	PH	77	\$1,014,468	
	39	NHCMHC	Marie Toussaint			FL0206L4D002215	PH	77	\$518,912	
40	DGCMHC	Mayfair			FL0209L4D002215	PH	77	\$198,217		
41	Camillus	Verde Gardens			FL0344L4D002211	PH	77	\$638,497		
42	BWOM	Partners for Homes			FL0218L4D002215	PH	77	\$324,092		
42	BWOM	Partners for Homes			FL0218L4D002215	PH	77	\$631,726		
43	Camillus	Brother Kelly Consolidation			FL0703L4D002205	PH	71	\$1,183,338		
Accepted Reallocation										
Tier 2	44	Citrus		Citrus Health Youth Housing Program Exp (2 TH + 12 RRH)		Joint TH & PH-RRH	78	\$457,285	\$457,285	
	45	Carrfour		Casa Matias Expansion (14)		PH	79	\$552,267	\$552,267	
Accepted Bonus										

\$39,351,111 Renewal
\$1,009,552 Reallocation
\$40,360,663 Renewal + Reallocation

	45	Carrfour	Casa Matias Expansion		PH	79	\$376,534			
	46	BWOM	Better Way West Wing Expansion (6)		PH	76	\$320,071			\$40,360,663 ARD
	47	Camillus	Old Cutler (10)		PH	66	\$133,205			
	48	Carrfour	Bonita Cove Expansion (9)		PH	59	\$653,202			
	49	Miami-Dade	Hideaways by the Bay Capital Request		PH		\$660,000		\$	2,825,246 requested bonus
	50	Miami-Dade	The Walkways		PH		\$682,234		\$	2,825,246 available Bonus
DV Bonus										
	51	CAHSD	MDC Domestic Violence Rapid Re-Housing Expansion		PH	72	\$819,192		\$	- difference
Tier 2	52	Chapman Partnership	Chapman Partnership Cares (20 TH + 40 RRH)		Joint TH & PH-RRH	73	\$1,408,156		\$	\$2,227,348 requested DV bonus
Rejected Renewal Projects										
		Carrfour	Shepherd House	FL0228L4D002215	PH			-\$104,414	\$	2,227,348 available DV Bonus
		DGCMHC	Moving Forward 2018 RRH	FL0748L4D002204	PH			-\$447,853	\$	- difference
Planning Grant										
		Miami-Dade	2023 CoC Planning Grant		PH		\$1,500,000		\$	1,500,000 available Planning Grant
							\$46,913,257		\$0	

NR = Not Rated pursuant to the rating, ranking and reallocation policy

RE: 2023 NOFO Application Extension - Message (F.T...)

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RE: 2023 NOFO Application Extension



Sarria, Manuel (HT)

To: Clerk of the Board (COC)

Cc: Mallette, Victoria (HT); Althea Bircy; Ana Rubirosa; Angel Evans; Anjuli Castano; Anna Koppe; Antonio Villasuso; Arti Pallin; Beatrice Gonzalez; Britany Rosen; Cary YeeQuee; Chania Somarriva; Cici Cici; Cindy Torres; Constance Collins; +93 others

Reply Reply All Forward

Thu 8/24/2023 8:07 PM

project-rating-and-ranking-tool-24.23.xlsx 595 KB

DOC082323-08232023024623.pdf 327 KB

Hi all...

Attached please find the NOFO ranking and rating tool, and the Selection Committee memo.

Please email me with any questions.

Thank you,

Manny Sarria, LCSW
Asst. Executive Director
Miami-Dade County
Homeless Trust
Manuel.Sarria@miamidade.gov
(305)546-4427

Taskbar with icons for Windows, Search, File Explorer, Outlook, Mail, Chrome, Edge, and various application windows. System tray shows 4:56 PM 8/30/2023.

Tier	Rank	Applicant	Project Name	New Name	Grant Number	Project Compose	Points	Requested Funding	Reallocated Funds
Renewal Projects									
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	7	Carrfour	Harding Village		FL0185L4D002215	PH	NR		
	8C	Carrfour	Consolidated Project	Del Prado and Karis Consolidation		PH	NR	\$787,105	
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	16	Carrfour	Northside Commons		FL0918L4D002201	PH	NR	\$655,816	
	17	CAHSD	MDC Domestic Violence Rapid Re-Housing Project		FL0919D4D002201	PH	NR	\$1,666,348	
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	45	Carrfour		Casa Matias Expansion (14)			PH	79	\$552,267	\$552,267
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	46	BWOM		Better Way West Wing Expansion (6)			PH	76	\$308,301	
	47	Camillus		Old Cutler (10)			PH	66	\$133,205	
	48	Carrfour		Bonita Cove Expansion (9)			PH	59	\$799,400	
	DV Bonus									
	49	CAHSD		MDC Domestic Violence Rapid Re-Housing Expansion			PH	72	\$819,192	
	50	Chapman Partnership		Chapman Partnership Cares (20 TH + 40 RRH)			Joint TH & PH-RRH	73	\$1,408,156	
	Planning Project									
		Miami-Dade		Planning Grant					\$1,500,000	
Rejected Renewal Projects										
	Carrfour		Shepherd House		FL0228L4D002215	PH			-\$104,414	
	DGCMHC		Moving Forward 2018 RRH		FL0748L4D002204	PH			-\$447,853	
								\$44,385,765	\$0	
NR = Not Rated pursuant to the rating, ranking and reallocation policy										

Memorandum



Date: August 23, 2023.
To: Daniella Levine-Cava
Mayor
From: Manny Sarria, Asst. Executive Director
Miami-Dade County Homeless Trust *ms*
Subject: HUD Continuum of Care Notice of Funding Opportunity Collaborative Application

On May 31, 2023, the Homeless Trust had a pre-application workshop to make available a Request for Applications (RFA) for the HUD Continuum of Care Notice of Funding Opportunity Collaborative Application. Trust staff advertised the solicitation in English, Spanish and Creole newspapers and via email with stakeholders already serving the homeless. Through this solicitation HUD made funding available to renew existing HUD CoC projects, to apply for new bonus projects, and to separately apply for Domestic Violence (DV) bonus projects. Respondents could also reallocate renewal project funding to create new projects or use the bonus funding to expand existing projects.

As part of this solicitation, we received renewal and new project applications by June 30, 2023. Staff utilized the HUD scoring tool to rate and rank renewal project applications. As part of this process we rejected two project applications and reduced a third project. A selection committee was appointed to rate and rank new project applications.

On June 30, 2023, four (4) new project applications were received seeking the expansion of existing projects. One applicant partially reallocated a project to create a new expansion project. Another applicant used reallocation and sought bonus funding to create a new expansion project. Two (2) applications sought new bonus funding alone, to expand existing projects. No responses were received for the DV bonus category and there was additional bonus funding available. A selection committee appointed by the Mayor convened on July 17, 2023 and recommended funding to the 4 projects, as well as gave HT staff direction to allow for a second round of applications.

On August 10, 2023 the Homeless Trust re-opened the competitive solicitation for new bonus projects (including DV bonus). On August 21, 2023 we received three (3) new project applications, one was seeking funding under the bonus category and two (2) sought DV bonus funding. The selection committee reconvened on August 23, 2023 and recommended funding to the three (3) projects, as well as gave HT staff direction to negotiate the budget with each applicant.

Attached please find a list of applications, scoring and funding recommendations for round one and two of the solicitation.

These recommendations will be considered by the Miami-Dade County Homeless Trust's Board members on Friday, September 8, 2023, at 4:00 p.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
2023 AUG 23 PM 2:44
OFFICE OF THE MAYOR

REQUEST FOR APPLICATIONS (RFA)

Rank	Provider	Project	Type	AVERAGE SCORE						TOTAL POINTS	TOTAL REQUESTED	Total Available	TOTAL RECOMMENDED	
				Elizabeth Regalado Chairperson (Non-Voting)	Angela Miller	Terrell Thomas Ellis	Sabrina Velarde	Nelson Cervantes	Richard Hoo					
1	Citrus Health Network	Citrus Youth Expansion	TH:RRH	66.0	85.0	74.0	83.0	84.0	84.0	392	\$ 475,285	\$ 475,285	\$ 475,285	
2	Carrfour Supportive Housing	Casa Matias Exp	PSH	76.0	81.0	74.0	81.0	82.0	82.0	394	\$ 1,244,165	\$ 1,244,165	\$ 534,268	
3	Carrfour Supportive Housing	Casa Matias Exp	PSH	76.0	81.0	74.0	81.0	82.0	82.0	394	\$ 1,244,165	\$ 1,244,165	\$ 709,897	
4	Betterway of Miami	Westwing Expansion	PSH	64.0	78.0	78.0	88.0	74.0	74.0	382	\$ 308,301	\$ 308,301	\$ 308,301	
5	Carrfour Supportive Housing	Bonita Cove Exp	PSH	56.0	57.0	56.0	68.0	60.0	60.0	297	\$ 885,121	\$ 885,121	\$ 885,121	
											\$ 2,227,348	\$ 4,157,037	\$ 6,062,147	\$ 1,903,319


Manny Sarría

7/17/2023

REQUEST FOR APPLICATIONS (RFA)

Rank	Provider	Project	Type	TOTAL POINTS							TOTAL REQUESTED	Total Available	TOTAL RECOMMENDED		
				Elizabeth Regalado Chairperson (Non-Voting)	Angela Miller	Terrell Thomas Ellis	Lakendra Green	Paul Imbrone	Richard Hoo	AVERAGE SCORE					
1	Camillus House	Villages at Old Cutler	PSH	56.0	67.0	69.0	69.0	69.0	71.0	71.0	332	66.4	\$ 133,205	\$ 921,927	\$ 133,205
1	CAHSD	MDC Domestic Violence Rapid Re-Housing Expansion	RRH	62.0	71.0	71.0	75.0	82.0	82.0	361	72.2	\$ 695,812.00	\$ 2,227,348	\$ 695,812.00	
2	Chapman Partnership	Chapman Partnership DV TH/RRH Project	TH:RRH	61.0	72.0	76.0	81.0	76.0	76.0	366	73.2	\$ 1,531,536.00	\$ 3,149,275	\$ 1,531,536.00	
				\$ 2,360,553							\$ 3,149,275	\$ 133,205			

Manny Sarría

Manny Sarría

8/23/2023

RE: 2023 NOFO Application Extension - Message (HT... Search

File Message Help Acrobat

Delete Archive Reply Reply All Forward

Share to Teams FHC To Manager Team Email Move

Tags Editing Immersive Translate Zoom

Language Zoom Reply with Scheduling Poll Find Time

Send to OneNote Viva Insights Report Message Report Phishing

Protection Protection

RE: 2023 NOFO Application Extension



Sarria, Manuel (HT)

To Clerk of the Board (COC)

Cc Mallette, Victoria (HT); Althea Birch; Ana Rubirosa; Angel Evans; Anjuli Castano; Anna Kopper; Antonio Villasuso; Arti Pallin; Beatrice Gonzalez; Brittany Rosen; Cary YeeQuee; Chania Somamba; Cici Cici; Cindy Torres; Constance Collins; +93 others

Reply Reply All Forward

Thu 8/24/2023 8:07 PM

project-rating-and-ranking-tool 8.24.23.xlsx 595 KB

DOC082323-08232023024623.pdf 327 KB

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Thank you,

Manny Sarria, LCSW
Asst. Executive Director
Miami-Dade County
Homeless Trust
Manuel.Sarria@miamidade.gov
(305)546-4427


Windows taskbar with icons for Gr..., 14..., N..., RE..., Co..., eS..., Sn..., EX..., eS..., pr..., ad..., N..., 90°F, 4:56 PM 8/30/2023

Tier	Rank	Applicant	Project Name	New Name	Grant Number	Project Compose	Points	Requested Funding	Reallocated Funds
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	11	City of Miami	Miami Homeless Assistance Program CE Consolidation		FL0211L4D002215	SSO	NR	\$695,520	
	12	Miami Beach	City of Miami Beach Outreach		FL0177L4D002215	SSO	NR	\$65,212	
	13	Citrus	Montega Revamped		FL0981L4D002200	PH	NR	\$1,467,279	
	14	Camillus	Granada PSH		FL0982L4D002200	PH	NR	\$616,955	
	15	DGCMHC	Hope Gardens Consolidation		FL0169L4D002215	PH	NR	\$552,731	
	16	Carrfour	Northside Commons		FL0918L4D002201	PH	NR	\$655,816	
	17	CAHSD	MDC Domestic Violence Rapid Re-Housing Project		FL0919D4D002201	PH	NR	\$1,666,348	
	18	VOA	Hogar 2		FL0191L4D002215	PH	90	\$1,275,463	
	19	Fellowship	Coconut Grove 1 Consolidation		FL0178L4D002215	PH	89	\$219,794	
	20	Carrfour	Casa Matias		FL0390L4D002210	PH	89	\$243,889	
	21	Carrfour	Community Connections Program		FL0839L4D002203	PH	89	\$651,942	
	22	Citrus	Ethyl Elan Apartments Consolidation		FL0182L4D002215	PH	88	\$3,027,190	-\$457,285
	23	DGCMHC	Right Directions		FL0222L4D002215	PH	88	\$174,885	
	24	Camillus	Archbishop Carroll Homes		FL0311L4D002214	PH	88	\$1,230,324	
	25	Camillus	Mother Seton PH		FL0590L4D002207	PH	88	\$609,224	
	26	BWOM	Better Way Apartments		FL0170L4D002215	PH	87	\$698,333	
	27	Fellowship	Homestead Scattered Site		FL0194L4D002215	PH	87	\$215,037	
	28	BWOM	Better Way West Wing		FL0313L4D002214	PH	87	\$265,232	
	29	Camillus	Project Dade Cares PSH		FL0655L4D002206	PH	86	\$670,995	
	30	Citrus	Citrus Health Youth Housing Program		FL0746L4D002204	Joint TH & PH-RRH	86	\$1,020,418	
	31	Carrfour	Rivermont House		FL0223L4D002215	PH	82	\$549,779	
	32	Carrfour	THOP Expansion		FL0492L4D002209	PH	82	\$2,411,687	
	33	Citrus	Shaman		FL0227L4D002215	PH	81	\$542,580	
	34	Camillus	Shepherd's Court Samaritan		FL0343L4D002211	PH	81	\$632,031	
	35	Carrfour	Little Haiti Consolidation	Little Haiti, Little River and Coalition Consolidation	FL0202L4D002215	PH	80	\$1,721,943	
	36	Camillus	Brother Mathias		FL0174L4D002215	PH	79	\$292,338	
	37	NHCMHC	J. Moss Consolidation		FL0312L4D002214	PH	79	\$2,048,280	
	38	VOA	Hogar I		FL0192L4D002215	PH	77	\$1,014,468	
39	NHCMHC	Marie Toussaint		FL0206L4D002215	PH	77	\$518,912		
40	DGCMHC	Mayfair		FL0209L4D002215	PH	77	\$198,217		
41	Camillus	Verde Gardens		FL0344L4D002211	PH	77	\$638,497		
42	BWOM	Partners for Homes		FL0218L4D002215	PH	77	\$324,092		
42	BWOM	Partners for Homes		FL0218L4D002215	PH	77	\$631,726		

Tier 2	43	Camillus	Brother Keily Consolidation		FL0703L4D002205	PH	71	\$1,183,338		
	Accepted Reallocation									
	44	Citrus		Citrus Health Youth Housing Program Exp (2 TH + 12 RRH)		Joint TH & PH-RRH	78	\$457,285	\$457,285	
	45	Carrfour		Casa Matias Expansion (14)		PH	79	\$552,267	\$552,267	
	Accepted Bonus									
	45	Carrfour		Casa Matias Expansion		PH	79	\$556,848		
	46	BWOM		Better Way West Wing Expansion (6)		PH	76	\$308,301		
	47	Camillus		Old Cutler (10)		PH	66	\$133,205		
	48	Carrfour		Bonita Cove Expansion (9)		PH	59	\$799,400		
	DV Bonus									
	49	CAHSD		MDC Domestic Violence Rapid Re-Housing Expansion		PH	72	\$819,192		
	50	Chapman Partnership		Chapman Partnership Cares (20 TH + 40 RRH)		Joint TH & PH-RRH	73	\$1,408,156		
	Planning Project									
		Miami-Dade		Planning Grant				\$1,500,000		
Rejected Renewal Projects										
	Carrfour		Shepherd House		FL0228L4D002215	PH			-\$104,414	
	DGCMHC		Moving Forward 2018 RRH		FL0748L4D002204	PH			-\$447,853	
								\$44,385,765	\$0	
NR = Not Rated pursuant to the rating, ranking and reallocation policy										

Memorandum



Date: August 23, 2023.
To: Daniella Levine-Cava
Mayor
From: Manny Sarria, Asst. Executive Director
Miami-Dade County Homeless Trust 
Subject: HUD Continuum of Care Notice of Funding Opportunity Collaborative Application

On May 31, 2023, the Homeless Trust had a pre-application workshop to make available a Request for Applications (RFA) for the HUD Continuum of Care Notice of Funding Opportunity Collaborative Application. Trust staff advertised the solicitation in English, Spanish and Creole newspapers and via email with stakeholders already serving the homeless. Through this solicitation HUD made funding available to renew existing HUD CoC projects, to apply for new bonus projects, and to separately apply for Domestic Violence (DV) bonus projects. Respondents could also reallocate renewal project funding to create new projects or use the bonus funding to expand existing projects.

As part of this solicitation, we received renewal and new project applications by June 30, 2023. Staff utilized the HUD scoring tool to rate and rank renewal project applications. As part of this process we rejected two project applications and reduced a third project. A selection committee was appointed to rate and rank new project applications.

On June 30, 2023, four (4) new project applications were received seeking the expansion of existing projects. One applicant partially reallocated a project to create a new expansion project. Another applicant used reallocation and sought bonus funding to create a new expansion project. Two (2) applications sought new bonus funding alone, to expand existing projects. No responses were received for the DV bonus category and there was additional bonus funding available. A selection committee appointed by the Mayor convened on July 17, 2023 and recommended funding to the 4 projects, as well as gave HT staff direction to allow for a second round of applications.

On August 10, 2023 the Homeless Trust re-opened the competitive solicitation for new bonus projects (including DV bonus). On August 21, 2023 we received three (3) new project applications, one was seeking funding under the bonus category and two (2) sought DV bonus funding. The selection committee reconvened on August 23, 2023 and recommended funding to the three (3) projects, as well as gave HT staff direction to negotiate the budget with each applicant.

Attached please find a list of applications, scoring and funding recommendations for round one and two of the solicitation.

These recommendations will be considered by the Miami-Dade County Homeless Trust's Board members on Friday, September 8, 2023, at 4:00 p.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	Type	AVERAGE SCORE						TOTAL POINTS	TOTAL REQUESTED	Total Available	TOTAL RECOMMENDED	
				Elizabeth Regalado Chairperson (Non-Voting)	Angela Miller	Terrell Thomas Ellis	Sabrina Velarde	Nelson Cervantes	Richard Hoo					
1	Citrus Health Network	Citrus Youth Expansion	TH:RRH	66.0	85.0	74.0	83.0	84.0	84.0	392	\$ 475,285	\$ 475,285	\$ 475,285	
2	Carrfour Supportive Housing	Casa Matias Exp	PSH	76.0	81.0	74.0	81.0	82.0	82.0	394	\$ 1,244,165	\$ 1,244,165	\$ 534,268	
3	Carrfour Supportive Housing	Casa Matias Exp	PSH	76.0	81.0	74.0	81.0	82.0	82.0	394	\$ 1,244,165	\$ 1,244,165	\$ 709,897	
4	Betterway of Miami	Westwing Expansion	PSH	64.0	78.0	78.0	88.0	74.0	74.0	382	\$ 308,301	\$ 308,301	\$ 308,301	
5	Carrfour Supportive Housing	Bonita Cove Exp	PSH	56.0	57.0	56.0	68.0	60.0	60.0	297	\$ 885,121	\$ 885,121	\$ 885,121	
TOTAL											\$ 2,227,348	\$ 4,157,037	\$ 6,062,147	\$ 1,903,319


Manny Sarría

7/17/2023

REQUEST FOR APPLICATIONS (RFA)

Rank	Provider	Project	Type	Elizabeth Regalado Chairperson (Non-Voting)	Angela Miller	Terrell Thomas Ellis	Lakendra Green	Paul Imbrone	Richard Hoo	TOTAL POINTS	AVERAGE SCORE	TOTAL REQUESTED	Total Available	TOTAL RECOMMENDED
1	Camillus House	Villages at Old Cutler	PSH	56.0	67.0	69.0	69.0	69.0	71.0	332	66.4	\$ 133,205	\$ 921,927	\$ 133,205
1	CAHSD	MDC Domestic Violence Rapid Re-Housing Expansion	RRH	62.0	71.0	71.0	75.0	82.0	76.0	361	72.2	\$ 695,812.00	\$ 2,227,348	\$ 695,812.00
2	Chapman Partnership	Chapman Partnership DV TH/RRH Project	TH:RRH	61.0	72.0	76.0	81.0	76.0	76.0	366	73.2	\$ 1,531,536.00	\$ 3,149,275	\$ 1,531,536.00
												\$ 2,360,553	\$ 3,149,275	\$ 133,205

Manny Sarría

Manny Sarría 8/23/2023

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Training Resources +

U.S. HUD Program Competition -

(Published 5/25/2023)

Miami-Dade County, through the Miami-Dade County Homeless Trust (Homeless Trust), is requesting applications to renew existing United States Department of Housing and Urban Development (USHUD) Continuum of Care funds OR apply for new federal funding to provide housing, support services, and other eligible activities benefiting persons experiencing homelessness, including persons fleeing Domestic Violence. A Collaborative Application will be submitted to USHUD in response to its Notice of Funding Opportunity (NOFO) for Fiscal Year 2023 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 apply to renew existing projects or 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 and questions emailed to the RFA contact person. Respondents must avoid private communications with prospective applicants 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 June 30, 2023 at 2:00 p.m. eastern standard time.

A PRE-APPLICATION WORKSHOP FOR INTERESTED RESPONDENTS WILL BE HELD at 10:00 a.m. on Wednesday, May 31, 2023 via zoom. Please read the solicitation carefully and in its entirety. Attendance to the Pre-Application Workshop is strongly recommended. To join the Zoom Meeting enter:
<https://miamidade.zoom.us/j/88598058086?pwd=T1Vhb0xjUDBFVEVncnhYmIVSERiQT09>
OR
Dial by your location
+1 786 635 1003 US (Miami)

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Meeting ID: 885 9805 8086
Passcode: 295791

Please refer to the RFA and application materials posted below for instructions on how to compile and submit responses to this solicitation.

- 2023 HUD NOFO RFA
- Attachment 1 Scoring, Ranking and Reallocation Process
- Attachment 2 RFA Checklist
- Attachment 3 Consolidated Project Application
- Attachment 4 New Project Application
- Attachment 5 Detailed Budget (New Project)
- Attachment 6 Renewal Project Application
- 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 18 Renewal Project Scoring Tool
- Attachment 19 Code of Conduct
- Attachment 20 New Project Score Sheet
- Grant Inventory Worksheet (GIW)

Addenda I

- 2023 HUD NOFO RFA
- Attachment 2 RFA Checklist

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- Addenda II
 - 2023 HUD NOFO RFA
- Addenda III
 - Response to written questions
- Addenda IV
 - 2023 HUD NOFO RFA
 - Attachment 16 Renaming a Renewal Project Application
- Addenda V
 - 2023 HUD NOFO RFA
- Addenda VI
 - 2023 HUD NOFO RFA
 - CoC Priority Listing
 - CoC Application

Youth Homelessness Demonstration Program +

Supplemental Notice of Funding Opportunity to Address Unsheltered Homelessness +

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RE: 2023 NOFO Application - Message (HTML) Search

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RE: 2023 NOFO Application



Sarria, Manuel (HT)

To Clerk of the Board (COC)

Cc Mallette, Victoria (HT); Althea Birch; Ana Rubirosa; Angel Evans; Anjuli Castano; Anna Kopper; Antonio Villasuso; Arti Pallin; Beatrice Gonzalez; Brittany Rosen; Cary YeeQuee; Chania Somarriva; Cici Cic; Cindy Torres; Constance Collins; **+93 others**

Reply Reply All Forward

Fri 9/22/2023 3:29 PM

CoC Application FY 2023.pdf 12 MB

Project Priority List FY 2023.pdf 2 MB

Hi all...

Attached please find the final NOFO CoC Project Priority List and CoC Application for FY 2023.

Please email me with any questions by close of business Tuesday, September 26, 2023.

Thank you,

Manny Sarria, LCSW
Asst. Executive Director
Miami-Dade County
Homeless Trust
Manuel.Sarria@miamidade.gov
(305)546-4427

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2023 HDX Competition Report

PIT Count Data for FL-600 - Miami-Dade County CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	3560	3224	3276	3657
Emergency Shelter Total	1,998	1,927	1,908	2283
Safe Haven Total	27	12	16	13
Transitional Housing Total	515	393	382	303
Total Sheltered Count	2540	2332	2306	2599
Total Unsheltered Count	1020	892	970	1058

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	524	553	762	939
Sheltered Count of Chronically Homeless Persons	351	392	452	530
Unsheltered Count of Chronically Homeless Persons	173	161	310	409

2023 HDX Competition Report

PIT Count Data for FL-600 - Miami-Dade County CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	408	317	328	381
Sheltered Count of Homeless Households with Children	408	317	328	381
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	308	163	145	131	111
Sheltered Count of Homeless Veterans	218	138	123	105	93
Unsheltered Count of Homeless Veterans	90	25	22	26	18

*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report

HIC Data for FL-600 - Miami-Dade County CoC

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	2,379	2,206	2,206	100.00%	173	173	100.00%	2,379	100.00%
SH Beds	20	20	20	100.00%	0	0	NA	20	100.00%
TH Beds	466	322	322	100.00%	144	144	100.00%	466	100.00%
RRH Beds	520	480	480	100.00%	40	40	100.00%	520	100.00%
PSH Beds	4,897	3,691	4,897	75.37%	0	0	NA	3,691	75.37%
OPH Beds	296	296	296	100.00%	0	0	NA	296	100.00%
Total Beds	8,578	7,015	8,221	85.33%	357	357	100.00%	7,372	85.94%

2023 HDX Competition Report
HIC Data for FL-600 - Miami-Dade County CoC

2023 HDX Competition Report

HIC Data for FL-600 - Miami-Dade County CoC

Notes

*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

**For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	3357	3390	3447	3451

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	130	160	283	106

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	673	1032	1438	520

2023 HDX Competition Report
HIC Data for FL-600 - Miami-Dade County CoC

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for FL-600 - Miami-Dade County CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	6752	6546	128	129	1	73	78	5
1.2 Persons in ES, SH, and TH	7132	6970	141	145	4	78	82	4

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

2023 HDX Competition Report
FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	6939	7512	273	301	28	151	158	7
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	7344	10515	309	331	22	176	186	10

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	79	4	5%	4	5%	5	6%	13	16%
Exit was from ES	2531	280	11%	119	5%	226	9%	625	25%
Exit was from TH	190	20	11%	8	4%	11	6%	39	21%
Exit was from SH	26	1	4%	1	4%	2	8%	4	15%
Exit was from PH	1875	88	5%	59	3%	68	4%	215	11%
TOTAL Returns to Homelessness	4701	393	8%	191	4%	312	7%	896	19%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	3224	3276	52
Emergency Shelter Total	1927	1908	-19
Safe Haven Total	12	16	4
Transitional Housing Total	393	382	-11
Total Sheltered Count	2332	2306	-26
Unsheltered Count	892	970	78

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	7497	7218	-279
Emergency Shelter Total	7035	6710	-325
Safe Haven Total	38	41	3
Transitional Housing Total	585	597	12

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1631	1691	60
Number of adults with increased earned income	120	95	-25
Percentage of adults who increased earned income	7%	6%	-1%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1631	1691	60
Number of adults with increased non-employment cash income	699	703	4
Percentage of adults who increased non-employment cash income	43%	42%	-1%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1631	1691	60
Number of adults with increased total income	754	776	22
Percentage of adults who increased total income	46%	46%	0%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	553	677	124
Number of adults who exited with increased earned income	49	65	16
Percentage of adults who increased earned income	9%	10%	1%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	553	677	124
Number of adults who exited with increased non-employment cash income	166	227	61
Percentage of adults who increased non-employment cash income	30%	34%	4%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	553	677	124
Number of adults who exited with increased total income	194	268	74
Percentage of adults who increased total income	35%	40%	5%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	6371	5588	-783
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1863	1085	-778
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	4508	4503	-5

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	8050	6887	-1163
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	3194	1786	-1408
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	4856	5101	245

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	3789	5403	1614
Of persons above, those who exited to temporary & some institutional destinations	2521	2417	-104
Of the persons above, those who exited to permanent housing destinations	152	560	408
% Successful exits	71%	55%	-16%

Metric 7b.1 – Change in exits to permanent housing destinations

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	5169	4816	-353
Of the persons above, those who exited to permanent housing destinations	2328	2958	630
% Successful exits	45%	61%	16%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	4425	4139	-286
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	4365	4054	-311
% Successful exits/retention	99%	98%	-1%

2023 HDX Competition Report
FY2022 - SysPM Data Quality
FL-600 - Miami-Dade County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	1831	2288	2082	396	392	378	5155	4631	4754	673	900	977			
2. Number of HMIS Beds	1831	2288	2082	396	392	378	4226	3876	3999	673	900	977			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	81.98	83.70	84.12	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	6266	7073	6652	723	585	609	4647	5333	4573	2648	3677	2248	3544	5989	4290
5. Total Leavers (HMIS)	4775	5304	4432	476	385	423	1001	1821	570	1661	2812	1727	2877	5890	4089
6. Destination of Don't Know, Refused, or Missing (HMIS)	9	89	114	14	5	7	4	27	6	3	8	5	9	360	15
7. Destination Error Rate (%)	0.19	1.68	2.57	2.94	1.30	1.65	0.40	1.48	1.05	0.18	0.28	0.29	0.31	6.11	0.37

2023 HDX Competition Report
FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for FL-600 - Miami-Dade County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/26/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/27/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/17/2023	Yes



Daniella Levine Cava
Mayor

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 22, 2023

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

Dear Ms. Mallette:

Old Cutler is a Permanent Supportive Housing project utilizing ten (10) units provided to the Homeless Trust, Miami-Dade's Continuum of Care (CoC) through a conveyance by a real estate company that develops, builds, and manages multi-family rental communities across the country. Through its CoC application, the Homeless Trust will be seeking Support Services and Operations.

Miami-Dade Public Housing and Community Development (PHCD) will be providing the Homeless Trust with 100% housing leveraging through the State Housing Initiatives Partnership (SHIP). SHIP provides funds to local governments, including PHCD, as an incentive to create partnerships that produce and preserve affordable homeownership and multifamily housing for very low-income households.

Through SHIP, PHCD will offer rental assistance to ten (10) households identified by the CoC through its coordinated entry process. SHIP rental assistance will be made available on October 1, 2024, to align with the project start date. The assistance is contingent on the success of attaining supportive services and approved by our Board of County Commissioners.

PHCD has already worked with the Miami-Dade CoC to establish a preference for general admission 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. Please contact Crystal Coleman at 786-469-4206, with any questions or concerns.

Sincerely,

A handwritten signature in blue ink, appearing to read "Clarence Brown".

Clarence Brown
Deputy Director

c: Alex R. Ballina, Director, PHCD
Crystal Coleman, Director, Section 8 HCV Division, PHCD



June 28, 2023

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

RE: Leverage and match for Citrus Youth Expansion

Dear Ms. Mallette,

Citrus Health Network, Inc. is applying in partnership with the Miami Dade County Homeless Trust for HUD grant funds to provide housing and supportive services to persons who are homeless. As such it commits to providing case management and mental health services. The cash match value is \$102,784. CHN will also provide access to treatment or recovery services for all program participants who quality and choose those services; or an amount that is equivalent to 25 percent of the funding being requested for the project. This is projected to be \$114,321 in leveraging, for a total of \$217,105 including the cash match. This includes access to primary care, psychiatry and obstetrics/gynecology as needed and requested. This commitment will last through the one-year duration of the project. The cash match and leveraged services will be available immediately. Project eligibility for program participants in the new project will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider. If you have any questions, please let us know.

Sincerely,

Mario Jardon, L.C.S.W.
President & C.E.O.

Accredited by the Joint Commission on Accreditation of Healthcare Organizations



MEMORANDUM OF UNDERSTANDING
Third Party Commitment for FY2024-25

Date: August 30, 2023

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 Old Cutler 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 **\$33,302** for the period **October 1, 2024 to September 30, 2025**.

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.

DocuSigned by:
Francis Afram-Gyening
295E435234DE466...
Signature

8/30/2023

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