Before Starting the CoC Application

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

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

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

 1. The FY 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
 2. The FY 2024 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
 3. All information provided to ensure it is correct and current.
 4. Responses provided by project applicants in their Project Applications.
 5. The application to ensure all documentation, including attachment are provided.

 Your CoC Must Approve the Consolidated Application before You Submit It
 - 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2024 CoC Program Competition on behalf of your CoC.
 - 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

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

 Attachments
 Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.
 - Attachments must match the questions they are associated with–if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
 - We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

1A-2. Collaborative Applicant Name: Allegheny County Department of Human Services

1A-3. CoC Designation: UFA

1A-4. HMIS Lead: Allegheny County Department of Human Services

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

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

	In the chart below for the period from May 1, 2023 to April 30, 2024:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	No	Yes
4.	Disability Service Organizations	Yes	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)	Nonexistent	No	No
9.	Law Enforcement	Yes	No	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	No	Yes
11.	LGBTQ+ Service Organizations	Yes	Yes	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	Yes	No	Yes
14.	Mental Health Service Organizations	Yes	No	Yes
15.	Mental Illness Advocates	Yes	No	No
16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	No	Yes

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

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

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

(limit 2,500 characters)

The CoC's administrative lead, DHS, is the County's Department responsible for providing and administering publicly funded human services to County residents. All DHS services, policies and processes are informed by a commitment to diversity, equity and inclusion, requiring the active and intentional inclusion of people of varying social identities. DHS prioritizes making the human services system accessible, especially for underserved and marginalized communities. To support this goal, multiple approaches have been implemented to meaningfully collaborate with BIPOC communities and to operationalize programs that equitably benefit them. DHS partnered with MEE Productions, Inc, a nationally recognized communications, market research and social-marketing firm that specializes in developing culturally relevant messages for hard-to-reach, low-income and underserved audience, to evaluated how well providers are reaching BIPOC groups through their communication materials and outreach efforts. The audit reviewed providers' marketing tools, communication channels, and outreach strategies to identify strengths and areas for improvement. One entity reviewed was Allegheny Link, the CoC's Coordinated Entry System. MEE called them as a "mystery shopper" and found that staff was able to refer them to resources within 30 seconds. They also reviewed the Link's website, social media, and brochures, and noted that the information was clear and professional, demonstrating that Allegheny Link is effectively accessible to the County's communities in need. DHS and the CoC have also taken action to increase the engagement of Black and Brown led organizations within the continuum of services. In the past two years this has included new and expanded contracts with Black and Brown led organizations for the delivery of homeless prevention services, support services in shelter, and housing services. Further, DHS's competitive procurement process includes convening diverse evaluation committees to review, score and recommend proposals for funding. Over the past year, DHS has released five requests for proposals for CoC related activities and services, with each involving a diverse evaluation committee inclusive of Black and Brown individuals. DHS is also promoting racial equity through staff training. The County partnered with MMG EARTH, a Black and non-binary led change management firm, to offer racial equity courses.

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

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

(limit 2,500 characters)

(1) The CoC is open to anyone interested in contributing to and productively shaping the delivery of homelessness services. Membership is always open, and information is continuously accessible on the CoC webpage, in addition to being shared through CoC meetings and partners' distribution lists and contacts. New members receive introductory information regarding the CoC and a point of contact for questions. The CoC's governing board (HAB) accepts new members annually through a nomination process that is publicly posted, distributed via email, and announced at the bi-monthly public CoC meetings. (2) Interpretation and translation services, including ASL, are available as for meetings, and meetings are held in ADA compliant locations, including the ability for people with hearing devices to link directly into the audio system. Since the onset of the pandemic, Microsoft Teams has also been used for meetings, with closed captioning and transcriptions available in real time and within meeting recordings. (3) During the annual nomination process, the HAB considers CoC stakeholder involvement and conducts targeted outreach to bolster participation of any group that may be underrepresented. These efforts have been particularly reinforced by the competitive procurement processes utilized by the CoC, through its lead agency, DHS. In 2024 alone, the CoC has had 5 active solicitations which has attracted proposals from new organizations, many of which target responsive services to culturally specific communities, including but not limited to Black, Latino, LGBTQ+ and persons with disabilities. These requests for funding have opened linkages to the organizations and the communities served and provided an avenue for encouraging the engagement of new entities, as well as identifying opportunities to expand the accessibility of the CoC to these organizations and communities. Further, through its position and commitment, DHS collaborates closely with a broad array of organizations servings culturally specific communities and leverages these partnerships to support the cultural responsiveness of the system. Additionally, the DHS office that administers CoC services has a Racial Equity Fellow who is leveraging racial equity and disability justice tools to drive structural changes that improve access to programs and services, including initiatives related to improving language access and including people with disabilities in decision-making.

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) The CoC is structured to continuously build on stakeholder input. CoC membership is broadly representative, including individuals who are currently or have previously experienced homelessness, service agencies (homeless and non-homeless specific), planning and advocacy bodies, local government, and funders. This representation is also reflected in the governing board (HAB) and its Committees. The HAB engages stakeholders by holding regular meetings, sharing materials in advance of meetings, and collecting feedback both in advance of and during meetings. Both the bi-monthly full HAB meetings and monthly Committee meetings are open to the full CoC and the public. Additional engagement opportunities are scheduled as appropriate and include focus groups or community forums, conducting stakeholder interviews, or open input requests via media outreach. In addition, presentations and trainings are held throughout the year, further engaging other systems, including but not limited to behavioral health professionals, crisis intervention teams, food assistance providers, health insurance advocates, and aging providers. Finally, the review, scoring, and recommendation of project proposals for funding through the CoC's lead agency, DHS, involve evaluation committees, that are intentionally racially and experientially diverse, providing opportunity to directly impact CoC services and decision-making. (2) Communications about meetings, forums and input opportunities occur through multiple channels, including email via the CoC and affiliated groups distribution lists, posting on the CoC webpage, an e-share information bulletin for CoC providers, announcement at CoC meetings and through DHS's social communication channels. (3) Interpretation and translation services, including ASL, are available for meetings, and meetings are held in ADA compliant locations, including the ability for people with hearing devices to link directly into the audio system. Microsoft Teams is also been used for meetings, with closed captioning and transcriptions available in real time and within meeting recordings. (4) Input is documented and reviewed by the HAB and a public comment period is open prior to HAB voting. Input is used to guide the priorities and direction of the CoC at both the service and the system level. Stakeholder input has guided the design, implementation and ongoing refinement of Coordinated Entry, the CoC's commitment and fidelity to Housing First, and strategic plans

| | 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)

The CoC utilizes an open and competitive procurement process whenever there is an opportunity to add programming to the CoC, regardless of funding source. Proposals are accepted from any eligible entity and are open to organizations who have not previously received CoC Program funding. A public RFP, open to any eligible organization (e.g., for-profit agencies are excluded for CoC Program funds) is released by DHS, the CoC's administrative lead agency and Collaborative Applicant. The RFP includes detailed instructions regarding who can apply and how to submit. All RFPs are broadly distributed, including publicly posting online at both DHS's website (which is used across the county for all funding through DHS, and is regularly reviewed by service providers) and www.PAbidsystem.com, emailed to service providers across the region and posted in multiple newspapers. Proposals are reviewed by a diverse review committee, including CoC board members and people with lived experience, and are scored based on the criteria outlined in the RFP. Criteria include but are not limited to: organizational experience and capacity, implementation strategy, ability to implement Housing First and plans to meet program standards including working with coordinated entry and HMIS. Based on the score results and analysis of local needs, the review committee puts forth a recommendation to County leadership, who then review the recommendation and justification and make a final decision on projects to fund. When the CoC's board has authority over the funds available, for example CoC Program Funds, the above process is maintained, plus the full board votes on the allocation following a CoC public comment period. To ensure effective communication with individuals with disabilities, all materials are available in PDF format; in addition, interpretation and translation services, including ASL, are available.

1C. Coordination and Engagement

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

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

1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
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)	Nonexistent
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.	MacArthur Foundation and Urban Institute Just Home project community	Yes

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

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

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

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

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

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

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)

Within the CoC's geographic region, the LEAs are the school districts, and the SEA has a contract with the Allegheny Intermediate Unit (AIU) to support schools around homelessness and education. With that noted, the CoC has robust and multifaceted partnerships with youth education providers, school districts/LEAs and the SEA through the AIU. The CoC's voting body has representatives from a youth education provider and the CoC's lead agency, DHS, contracts directly with the AIU; as such these entities are directly engaged in CoC planning. The CoC's written policies require   all homeless programs that serve families with children to have an Education Liaison on staff to ensure the educational and developmental needs of preschoolers and school-aged children are met. The CoC also mandates that all homeless families with infants and toddlers are offered referrals to assess the child's development in accordance with state law. The CoC's Coordinated Entry is also the centralized access point for home visiting programs that serve pregnant families and children ages 0-6, creating the opportunity to offer any family reaching out for homeless assistance to also access Early Intervention programs including Early Head Start. Similarly, every LEA has a Homeless Liaison on staff, who consults with the AIU/SEA to ensure children are enrolled in school and to assist with transportation, paperwork, immunizations, and other school requirements. In addition to these formal partnerships, regular and ongoing collaboration occurs across the entities. With support from the National Center for Homeless Education, the CoC and AIU brought together LEAs/school districts, higher education entities, workforce development, providers and community agencies to inform the Coordinated Community Plan for the CoC's YHDP and participate in subsequent community calls on addressing needs of older unaccompanied youth. Additionally, the CoC participates in the long-standing Homeless Education Network (HEN), a community of nonprofits, higher education institutions, medical providers, foundations, school districts, Homeless and Education Liaisons, government and community leaders who are committed to addressing youth homelessness by meeting the housing, educational and wellness needs of youth. They host quarterly HEN meetings focused on policies and procedures to ensure that homeless children have access to school, pre-school, and after school activities.

| 1C-4b. | Informing Individuals and Families Who Have Recently Begun 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 have recently begun experiencing homelessness of their eligibility for educational services. | |

(limit 2,500 characters)

Families are informed of education services at several points during CoC involvement: at diversion, assessment, initial referral to and enrollment in CoC program, as well as at post-involvement transition to community. All Coordinated Entry (CE) staff are trained to connect all homeless families with the homeless liaison for the school district in which they are residing and educate them on how to best connect children to education. CE makes referrals for Home Visiting and linkages to community-based family support centers. Additionally, the CoC requires every program that provides housing or services to families to designate a staff person to be a Homeless Liaison. CoC staff (homeless liaisons, CE staff, Homeless Supports and Services Coordinators) provide advocacy for: school re-enrollment or registration; referral to additional supportive educational services; and support in continuation of schooling and transportation to school upon exit from program. Families with youth under age 5 are offered developmental assessments and support from the early intervention programs. Some programs also have on-site early learning classrooms to offer additional educational services. CE staff assist families to reconnect to their school of origin or enroll in a new feeder school and help parents access additional assistance for transportation and relevant concrete goods (e.g., uniforms). Supporting these processes, the CoC's Family Shelter Standards of Care details the expectations of shelters to: provide linkages to development screening for children experiencing homelessness; ensure staff have basic knowledge about Head Start, Early Head Start, early intervention, preschool, child care subsidy programs, preschool, and other early care and learning programs; publicly post enrollment materials and encourage participation in educational programs; and be knowledgeable regarding the rights of children and youth experiencing homelessness under McKinney-Vento.

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

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

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	Yes	Yes
2.	Child Care and Development Fund	Yes	Yes
3.	Early Childhood Providers	Yes	Yes
4.	Early Head Start	Yes	Yes
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	Yes	Yes
6.	Head Start	Yes	Yes
7.	Healthy Start	Yes	Yes
8.	Public Pre-K	Yes	Yes
9.	Tribal Home Visiting Program	No	Yes
	Other (limit 150 characters)		
10.			

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

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

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

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

	Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:
1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

The CoC maintains a robust partnership with the county's four VAWA-funded service agencies, and these agencies collaborate with the PA Coalition Against Domestic Violence, the PA Coalition Against Rape, and Pittsburgh Action Against Rape. Regular and on-going collaboration informs CoC-wide policies and training pertinent to providing housing and services to survivors of domestic violence, dating violence, sexual assault and stalking (collectively referred to as DV). Foundationally, each of the DV agencies are actively engaged in the CoC, participating in CoC meetings. Further, the CoC's board includes a representative from one of the agencies, who is a voting member directly responsible for CoC planning and administration. Regarding processes and policies, the CoC's Coordinated Entry (CE) teams coordinate directly with the DV organizations to review and update processes, language and engagement strategies. All households who self-disclose experiencing DV, a direct connection to one of the DV providers is offered to assist with accessing supports/services for safety planning and longer term supports, while concurrently offering the CoC's full array of options. Similarly, for those needing survivor specific RRH, direct coordination with the DV lead agency ensures safe and efficient coordination. Case managers across the CoC provider agencies are required to complete Core Competency trainings within a year of the start of their employment, including Trauma Informed Care.   In addition, the CoC partnered with one of the DV providers, Women's Center and Shelter (WC&S) on a year-long pilot initiative. The pilot aimed to change the culture within 12 adult and youth homeless provider organizations, so they are better able to recognize and serve individuals or families who are at the intersection of IPV and homelessness. Within this initiative, specialists offered training, consultation, and coaching for homeless provider staff. DHS, the CoC's lead agency, evaluated the pilot, and training pre-posttests reflected an increase in trainees' knowledge around IPV warning signs, types and severity, as well as WC&S resources. Additionally, many organizations were inspired to make or plan concrete changes in practices around IPV, such as additional intake questions, consistent screening, and a disclosure protocol.

	1C-5b.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
		NOFO Section V.B.1.e.	

	Describe in the field below how your CoC's coordinated entry addresses the needs of DV survivors by including:
1.	safety planning protocols; and
2.	confidentiality protocols.

(limit 2,500 characters)

The CoC prioritizes safety and trauma-informed, victim-centered services across the system, with client choice incorporated into the assessment, program matching, and housing preferences processes. Coordinated Entry staff conduct a brief initial screening of risk or potential harm perpetrated on participants as a result of domestic violence, sexual assault, stalking, or dating violence. While survivors can choose to be referred to victim service programs, CoC wide programs, or both, if risk is deemed to be present, the participant is offered connection to one of the victim service providers, via a warm transfer, to assist with accessing supports and services for safety planning and longer term supports. The victim service providers use a trauma-informed approach designed to address the specific service needs of survivors of abuse, neglect, and violence. Further supporting service delivery best practice for survivors, CE staff are trained to protect client confidentiality and privacy, the location of survivor housing and services facilities, and any information collected about the individuals or family, including ensuring ongoing communication is agreed upon when planning for safety. CE staff ensure the client can share information safely and are transparent about information collection and storage. All CE data is stored in secure, access limited databases, regardless of DV status, with further data lockdown options when safety risks do exist.

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

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

		Project Staff	Coordinated Entry Staff
1.	Training Occurs at least annually?	Yes	Yes
2.	Incorporates Trauma Informed best practices?	Yes	Yes
3.	Incorporates Survivor-Centered best practices?	Yes	Yes
4.	Identifies and assesses survivors' individual safety needs?	Yes	Yes
5.	Enhances and supports collaboration with DV organizations?	Yes	Yes
6.	Ensures survivors' rights, voices, and perspectives are incorporated?	Yes	Yes
	Other? (limit 500 characters)		
7.			

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

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

4.	what your CoC does in response to households requesting emergency transfers.

(limit 2,500 characters)

The CoC has implemented standardized processes and communication channels to effectively administer emergency transfer plans. Through Coordinated Entry (CE), households are informed of the services and supports available and the processes to expect moving forward. Once connected to a housing program and through enrollment, households are again informed of processes. All CE staff receive training and have supervisory oversight to ensure they are consistently conducting their duties and communicating accurately and effectively with households during CE. CoC policies, procedures and practices are captured and shared with providers via contract documents, specification manuals, and policy documents. The CoC provides support and oversight to provider agencies via monthly meetings, bi-weekly office hours and annual programmatic monitoring. All of the above include both the communication of emergency transfer plans, and the plan policies and procedures themselves. In terms of the policies and processes for emergency transfer plans: When an emergency transfer plan is needed, the provider or client notifies CE and parties work together to respond to the immediate safety needs to develop a plan, with placement taking priority over other households until resolution. If the family plan includes separation and relocation, CE will make accommodations for new units for each eligible member. Once a transfer unit is identified, the lease for the tenant's current unit will be terminated without penalty. These processes are congruent with VAWA, and DV provider crisis lines are available 24/7 to provide immediate support to survivors, significant others, and allied professionals.

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

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

(limit 2,500 characters)

The CoC prioritizes safety and trauma-informed , victim-centered services across the system, with client choice incorporated into the assessment, program matching, and housing preferences processes. Through Coordinated Entry (CE), individuals and families who experienced/are experiencing domestic violence, dating violence, sexual assault, or stalking (collectively referred to as DV hereafter) can choose to be referred to only DV service agencies (via a warm transfer), non-DV service agencies (via HMIS), or both. Regardless of which service agencies the client in interested in being referred to, if risk is deemed to be present, the participant is offered connection to one of the victim service providers, via a warm transfer, to assist with accessing supports and services for safety planning and longer term supports. The victim service providers use a trauma-informed approach designed to address the specific service needs of survivors of abuse, neglect, and violence. CE staff discuss safety relating to participation in the assessment process and the program matching process. The CoC has 3 DV emergency shelters and a fourth VAWA-funded provider that all collaborate to provide shelter, RRH and support services. Inclusion of both DV-specific and non-DV-specific RRH programs within the CoC maximizes the client's choice of housing while still ensuring safety and maintaining confidentiality. Additionally, shelters work directly with law enforcement and use a lethality assessment to ensure safety of those most at risk of violence/harm when presenting for service.

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

	Describe in the field below how your CoC ensures survivors receive safe housing and services by:
1.	identifying barriers specific to survivors; and
2.	working to remove those barriers.

(limit 2,500 characters)

The Intimate Partner Violence Reform Initiative was created in May 2022 to coordinate policy and system-level work across agencies in Allegheny County. With leadership from key CoC stakeholders, including Allegheny County, City of Pittsburgh, and CoC victim service providers, the purpose of the Initiative is to improve a complex and fragmented system for both survivors of intimate partner violence (IPV) and those who use violence. During the past year, stakeholders from local and federal criminal justice systems, victim service organizations, community groups, healthcare and human services have worked to improve the ways in which people can access help, how our systems work together and share information, and how we can prevent the most serious harm. Intimate partner violence often goes un-reported and much of the information around victim-survivors is protected for safety purposes. However, over the past 18 months, DHS, the CoC's lead agency, has been working to consolidate and better understand the various data sources available to us that can serve as indicators for IPV prevalence. Through those analysis and engagement of the Intimate Partner Violence Reform Leadership Team and key system partners, the Initiative has made important advancements that help identify barriers for survivors and work to remove those barriers, including: (1) expanded use of kiosks to make filing a PFA easier and to allow for easier tracking of the information; (2) trained hospital social workers at major hospital centers in the CoC on the dynamics of IPV and specifically, on the why, when, and how to connect individuals to the courts' Protection from Abuse process; (3) continued operations of the lethality assessment protocol program, helping to train officers as well as implementing better tracking and monitoring of police department use of the lethality assessment protocols; and (4) trained more than 25 custody mediators and guardians ad liem (GALs) and judges hearing divorce petitions on the dynamics of intimate partner violence, the prevalence and trends in the county and techniques to use when engaging with people who have experienced IPV. Additionally, in late 2023, with support from the National Network for Safe Communities, the county began an IPV high risk team with the goal of collectively identifying new incidents of intimate partner violence that meet the criteria for high risk for future violence and responding in real-time with actions that aim to deter violence.

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

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

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

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

(limit 2,500 characters)

The CoC's administrative lead, DHS, is the County's Department responsible for providing and administering publicly funded human services to residents. All DHS services, policies and processes are informed by a commitment to diversity, equity and inclusion, requiring the active and intentional inclusion of people of varying social identities. DHS collaborates closely with a broad array of organizations serving culturally specific communities and leverages these partnerships to support the cultural responsiveness of the system. (2) DHS sub-recipients are contracted providers and must abide by DHS's requirements. Included in all contracts is anti-discrimination policy and adherence to DHS's Standards of Practice (SOP), including SOP addressing sexual orientation, gender identity and expression (SOGIE). These Standards were developed and are regularly reviewed and maintained through DHS's Office of Equity and Engagement (OEE). Quarterly SOGIE trainings were held for homeless service providers and TA was offered to programs as needed when implementing the SOP. A collaboration with the Hugh Lane Wellness Foundation , a leading organization founded to improve the health of the LGBTQ+ and HIV communities, provides continual access to an array of ongoing SOGIE trainings for homeless service staff. (3) DHS programmatic and fiscal specialists monitor all aspects of each program, including compliance with anti-discrimination policies. DHS also monitors program admissions to ensure the provision of housing and supportive services to persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status or disability. Denying or terminating services based on the client's gender or sexual identity is prohibited. In addition, individuals may register concerns and complaints through the DHS Director's Action Line, and a specialist will research and respond.(4) When out of compliance, providers are required to submit a corrective action plan detailing how the issue will be addressed and brought to compliance. If the plan is unsatisfactory, not followed through on, or noncompliance continues, the project is deemed high-risk and 90-day probationary period beings, within which additional & enhanced TA is provided. If noncompliance continues DHS and the HAB determine action, which may include partial or complete reallocation.

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

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.
Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with–if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Allegheny County Housing Authority (ACHA)	4%	Yes-Both	Yes
Housing Authority of the City of Pittsburgh (HACP)	28%	Yes-Both	Yes

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

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

(limit 2,500 characters)

The CoC has well-established and long-standing collaborations with the two largest housing authorities in the geographic area—Allegheny County Housing Authority (ACHA) and Housing Authority of the City of Pittsburgh (HACP). Both PHAs sit on the CoC governance board (HAB), allowing for a close working relationship, and both have continued to engage in community wide efforts to make homelessness rare, brief and non-recurring. For over 8 years, both PHA's have committed homeless admission preferences through their Housing Choice Voucher programs. These preferences have provided access to affordable housing options to households experiencing homelessness and have been an important part of the CoC's Move On strategy—enabling participants of PSH, RRH and transitional programs that will require a housing subsidy to maintain stability to move to the top of the HCV waiting list. The CoC also collaborates with both PHAs on other voucher types including Mainstream Vouchers, Family Unification Program, and Fostering Youth to Independence vouchers. Further, in the past 6 months these commitments have grown as part of a County-wide initiative, 500 in 500, to help people move out of current homelessness by making 500 deeply affordable housing units available to Allegheny County shelter residents in 500 days. ACHA has added a homeless preference for their LIPH and privately managed units, and HACP has expanded their HCV preferences to support more households in emergency shelter successfully transition to stable permanent housing. This expansion has helped the CoC to move low risk homeless individuals and families (who are typically not able to access CoC funded housing programs due to their low prioritization) into permanent, affordable apartments much more quickly. These preferences allow participating homeless households to immediately access LIPH units and vouchers without having to go through a sometimes years long waiting list and has contributed to a greater flow of households out of shelter to deeply affordable permanent housing units.

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	Yes
7.	Public Housing	No
8.	Other Units from PHAs:	
	FYI	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.	FYI, Housing Mobility Demonstration, Choice Neighborhoods

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

1D. Coordination and Engagement Cont'd

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

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

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

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

1.	Prisons/Jails?	Yes
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	Yes
4.	Foster Care?	Yes

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition.	36
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition that have adopted the Housing First approach.	36
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2024 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	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;
	3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach; and
	4.	what your CoC has done to improve fidelity to Housing First.

(limit 2,500 characters)

(1) The CoC formally committed to Housing First in 2017, reallocating all CoC Program funded transitional housing to permanent housing and requiring service providers to eliminate criteria that prevent or terminate an otherwise eligible individual or family from receiving services, and to connect participants quickly to housing without any additional preconditions and barriers. DHS, the CoC's administrative agency, reviews program documentation for compliance with Housing First, manages all referrals to services in the CoC through Coordinated Entry (CE), conducts annual monitoring that includes case file reviews, and reviews and makes final determination on any denial of service.
(2,3) DHS Program Monitors, who are specialized staff trained in HUD, Pennsylvania Homeless Assistant Program and CoC requirements, conduct monitoring visits at each sub-recipient's site at least annually, and more often when issues are identified or when quality assurance plans have been implemented and are being monitored. Monitors conduct their review in accordance with the Program Monitoring Tool, which includes consistency with Housing First. DHS reviews program agreements, program rules, and intake and termination procedures to ensure that: program access is not contingent on sobriety, treatment, income, criminal record, credit rating, financial or rental history; participating in offered programming or services, or drug testing are not conditions of continued service delivery; and that service plans and case notes are client focused and driven. DHS tracks and reviews service denials and involuntary terminations to ensure they were not incongruent with Housing First.
(4) To further support demonstrating fidelity to Housing First, in 2024 program monitoring had incorporated a Housing First Assessment tool into the annual process. This tool assesses the level to which Housing First is implemented across service access, leasing processes, and the provision of housing and supportive services. The CoC is also facilitating a community of practice for shelter operators to convene and support peer learning around effectively delivering quality shelter services with fidelity to Housing First. Finally, the CoC has contracted with Focus Strategies on a community planning process to culminate in a strategic plan, including actionable guidance on activities to support our fidelity to Housing First, including, enhancing fidelity of trauma-informed care and Harm Reduction.

1D-3.	Street Outreach–Data–Reaching People Least Likely to Request Assistance.	
	NOFO Section V.B.1.j.	

	Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.	

(limit 2,500 characters)

The CoC's street outreach effort   is led by a strong network of over 10 publicly and privately funded teams. The network includes specialty teams to ensure needs presented can be met, including: medical street outreach (e.g., Dr. Jim Withers of Operation Safety Net is internationally recognized for his work in street medicine), outreach that incorporates harm reduction strategies; and outreach responsive to health related social needs. In addition to regular visits of camps, abandoned buildings, cars and hidden locations across the county, outreach teams receive information on where people are located from BigBurgh (a web-app for homeless services), Coordinated Entry (CE), 311, emergency response and law enforcement entities, and community groups. Street Outreach also engages people at drop-in centers, shelters, food lines and other locations where people who might otherwise not be connecting to homelessness services may be. The CoC facilitates a weekly provider meeting to review a by-name list of unsheltered individuals and to strategize effective engagement approaches, and the Homeless Outreach Coordinating Committee (HOCC), a subcommittee of the CoC's advisory board, convenes to strategize how teams can better identify, engage, and support those who are unsheltered. The HOCC has also sought to identify areas of the region where enhanced collaboration with community organizations and businesses may help facilitate further engagement with individuals experiencing homelessness in those areas. Teams are out every day of the week. Certain areas where homeless populations are known to congregate and live are visited multiple times each week. In total, the Street Outreach approach and scope of services has been tailored to engage unsheltered populations who are unlikely to ask for help by using evidence-based practices such as Motivational Interviewing, Trauma Informed Care, and Peer Support. All outreach workers strive to engage individuals by meeting their basic human needs, developing trust, and fostering personal connections. Additionally, our CoC's CE includes a specialized Field Unit which provides the full array of street outreach support while also providing mobile access to CE so individuals can be assessed for services wherever they are.

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

Select yes or no in the chart below to indicate your CoC's strategies to prevent the criminalization of homelessness in your CoC's geographic area:

	Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness
1.	Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	Yes	Yes
2.	Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	Yes	No
3.	Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?	Yes	No
4.	Other:(limit 500 characters)		

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

		HIC Longitudinal HMIS Data	2023	2024
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	879	618

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)	
	Subsidized Housing Navigation; Eviction Prevention	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:	
1.	works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and	
2.	promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.	

(limit 2,500 characters)

behavioral health providers, and make services available and accessible to households experiencing homelessness. Of significance, the CoC's lead agency, DHS, is the County administrator of the public BH system. With this structure, DHS supports cross-system integration across planning, service provision and evaluation activities. Examples of important integration of healthcare services within the homeless response system include: access to MH residential services when appropriate; development of specialized targeted case management to provide BH service navigation and support to individuals experiencing homelessness with BH needs; medical respite programs to support individuals transitioning out of inpatient care; nationally recognized street medicine; co-located health clinics in emergency shelters; and data sharing agreements with health plans to support coordinated care and targeted services to members in shelter. The CoC has also applied for funding to expand the availability of occupational therapists for people experiencing homelessness, building on the success of the current program, which over its first year demonstrated a 100% housing retention rate for clients that obtained housing. Further bolstering these collaborations, the HAB has established a Street Medicine Committee which convenes Street Medicine and shelter based medical providers. The Committee is actively coordinating around hospital discharge protocols to ensure continuity of care, implementing medical partnerships for access as winter shelter, and data sharing best practices to achieve Street Medicine goals and objectives. (2) Regarding SOAR, DHS is contracted with an experienced service agency to provide certified SOAR services across the CoC. At minimum this ensures availability of SOAR within the CoC. To support the efficient and effective utilization of SOAR, DHS is developing a model to predict individuals likely eligible but not yet enrolled in SSI. The model integrates data from a variety of sources (criminal justice, homeless system, human services, Medicaid, wage data) to identify those likely to be eligible for SSI, and enables us to then compare those participants against SSI enrollment. Individuals who the model identifies but are not yet enrolled, are good targets for outreach and connection to SOAR, and can help minimize the burden on shelter staff to make referrals to SOAR.

ID-7.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
	NOFO Section V.B.1.n.	

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

(limit 2,500 characters)

The CoC partnered with the Allegheny County Health Department (ACHD), area healthcare networks, FQHCs, homeless service providers and others to implement an array of service and system level changes to respond to future public health emergencies, including infectious disease outbreaks. Foundationally, the CoC has put in place communication mechanisms that are responsive to rapidly changing information. This is detailed further in the next question. Additionally, several CoC-wide and service specific policies and procedures have been developed and administered. Continuity plans are established, and pathways are in place for: overflow and quarantining space; continued support service engagement through virtual modalities; and supply distribution, including PPE. Through partnerships with local health providers, particularly area FQHCs, telehealth appointments can be delivered at the shelters. The CoC has also coordinated with ACHD to work directly with emergency shelters on utilizing the telehealth technology effectively and identifying best practices to share across the CoC. These pathways position the CoC to respond to future outbreaks in a manner that continues the delivery of care while seeking to minimize spread. ACHD collaboration also included planning, implementing, and disseminating safety protocols and practices across settings, including the emergency shelters and will be leveraged for any future outbreaks' preparedness and response. Further supporting these pathways and seeking to prevent outbreaks is collaboration with ACHD on vaccinations for households staying in shelter, as well as COVID testing kits. The CoC's close coordination with ACHD and healthcare providers, including FQHCs, has positioned the CoC to effectively respond to future emergencies, including quickly setting up health clinics or vaccination pods, while also strengthening the CoC's present responsiveness to the physical health needs pf people experiencing homelessness, including access to physical and behavioral health care on site at emergency shelters.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.n.	

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

(limit 2,500 characters)

Effective communication mechanisms that were responsive to rapidly changing information were foundational to the CoC's COVID-19 response, and position the CoC in its preparation for further public health events. The communication strategy leverages the resources and networks of the Allegheny County Department of Human Services (DHS), which is the CoC's administrative lead, but more broadly is the agency responsible for providing and administering human services to County residents. In response to COVID-19, DHS quickly implemented daily provider briefings, enabling consistent sharing of emerging information and plans, and identifying needs to support the ongoing delivery of quality human services. An online platform was also created to house all briefing materials, as well as guidance on service operations, COVID safety, resources, and FAQs. In addition to the DHS-wide outreach, homeless service briefings occurred weekly, ensuring a standing point of contact with CoC providers and local officials. This included Health Department representatives and epidemiologists to review and discuss safety protocols (inclusive of suspected and positive COVID reporting protocols), the effective implementation of such protocols, and conduct any necessary troubling shooting to ensure protocols were being appropriately implemented. Now held monthly, but with the ability to return to weekly in response to need, this mechanism provides regular and consistent communication with all subrecipients. These standing briefings supplement the already established and ongoing CoC programmatic and fiscal monitoring activities, which provide regular oversight of all CoC programs, including regular annual visits and additional service reviews when issues are identified or quality assurance plans are being monitored. In addition to these well-established information avenues, the collaboration with the Health Department and healthcare entities, including FQHCs, has strengthened the direct partnership between those health-related agencies and homeless service providers. These partnerships can be effectively leveraged for future needs, including, but not limited to: the direct delivery of health care; setting up health clinics and/or vaccination pods; understanding disease information; and identifying and implementing mitigation strategies.

1D-8.	Coordinated Entry Standard Processes.	
	NOFO Section V.B.1.o.	

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

(limit 2,500 characters)

(1) The CoC employs a centralized approach to Coordinated Entry (CE) that covers the entire CoC geographic area. CE can be accessed in multiple ways: by phone (25,000+ calls/year), walking into the office in downtown Pittsburgh (2,500+/year), by email (4,500+/year), or through a mobile Field Unit that meets individuals experiencing homelessness wherever they are (6,000+ contacts/year). Other call centers and community service providers (e.g. 211, Aging SeniorLine, food pantries) also assist connecting households to CE through warm transfers, emails, and connection to the Field Unit. (2,3) The CoC administers a standardized assessment process that prioritizes based upon chronic homeless status, vulnerability, and length of time homeless. Vulnerability is assessed using a decision support tool that uses administrative data from Allegheny County's data warehouse (a national model for bringing together and integrating person and service data from sources both internal and external to human services) to predict the likelihood of key indicators of harm occurring (MH inpatient stays, jail bookings, 4+ ER visits) if a person remains un-housed. This predictive risk assessment results in the people most in need of assistance being prioritized, while being far more accurate and equitable than the previous actuarial tool used. Since it doesn't rely upon self-reported data, it doesn't require the time or trauma associated with asking sensitive questions at the time of housing crisis. (4) The CoC's Coordinated Entry Policies and Procedures are reviewed annually by the CoC and its board, the HAB. In addition to integrating lessons learned throughout the service year, the annual review includes a document review by the CoC's administrative lead and CE operator, DHS, and collection of public comment regarding the policies and procedures. The annual review period is announced starting in the fall, and public comment is captured through January. At the January CoC meeting all comments are reviewed, and the updates are voted on by the HAB.

| | 1D-8a. | Coordinated Entry–Program Participant-Centered Approach. | |
| | | NOFO Section V.B.1.o. | |

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

(limit 2,500 characters)

The CoC seeks to make Coordinated Entry (CE) accessible via its centralized, but multi-modal entry points (including phone, in person, email, or through a mobile Field Unit), and through warm transfers, emails and connections by other call centers and community service providers. The Field Unit is particularly effective at reaching people who are otherwise unlikely to call for assistance. It consists of skilled field service coordinators who provide direct support to adults experiencing homelessness. They provide flexible access to CE at various locations throughout the community, including drop-in centers, shelters, encampments, and anywhere else that people experiencing homelessness might be, at both recurring scheduled times, and as needed. They partner closely with other professionals working in outreach, shelters, and housing programs, as well as other support providers. In addition to CE access, they provide flexible case management and service coordination, prioritizing the indicated goals, needs, and preferences of the person served. The percentage of people enrolled in RRH or PSH that reported "place not meant for human habitation" as their prior living arrangement increased from 10% in 2015, when the Field Unit was established, to 25% in 2022. The CE assessment process prioritizes based upon chronic homeless status, vulnerability, and length of time homeless. Vulnerability is assessed using a decision support tool that uses administrative data from Allegheny County's data warehouse to predict the likelihood of key indicators of harm occurring if a person remains un-housed. This results in the people most in need of assistance being prioritized, while being far more accurate and equitable than the previous actuarial tool used and doesn't require the time or trauma associated with asking sensitive questions at the time of housing crisis. Timely receipt of service for those most in need is additionally supported through a vacancy matching process, facilitated by a Housing Resource Coordinator who locates the highest priority individuals when services are available and reviews program details, documentation needs, and program contacts with them. Additionally, referrals are monitored in HMIS for timeliness in contacting participants and enrollment. A commitment to continuous quality improvement has been vital to the development and ongoing refinement of CE and has informed the implementation of the processes discussed above.

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

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

(limit 2,500 characters)

(1) The CoC's Coordinated Entry (CE) is the integrated, multi-modal access point for housing and services provided within the CoC. The Allegheny Link is the one-stop access point for CE and serves the entire geographic region and can be accessed in-person, by phone or email. The Allegheny Link is marketed throughout the CoC's geographic region via public space advertisements, web postings, providers and partners sharing, and during resource fairs. Additionally, the region's other call centers and community service entities make referrals and warm transfers to Allegheny Link, with the Link being the number one referral for the area's 211 system. Of particular significance to reaching all persons experiencing homelessness is that the CoC's CE includes the Field Unit. Fully described in the previous question, the Field Unit consists of skilled field service coordinators who provide flexible access to CE anywhere that people experiencing homelessness might be. The Field Unit is particularly effective at reaching people who are otherwise unlikely to call for assistance. (2) All households who access CoC housing programs are connected via CE. Program agreements have been reviewed within the CoC's monitoring processes, and include participants' rights and remedies available under federal, state, and local fair housing and civil rights laws. Program agreements are reviewed with each participant and must be signed affirming the review of the agreement. These signed agreements are again reviewed during annual monitoring. (3) Multiple processes are in place to provide oversight/reporting of actions inconsistent with fair housing choice. All program denials and terminations are reviewed for allowability and cannot be done without the reviewed action in HMIS. DHS, the CoC's administrative lead, operates a Director's Action Line, which any individual may use to register concerns, complaints, or requests with any DHS related service, which includes CoC Program funded services. Received concerns are reviewed and responded to within three days. The CoC provided a Fair Housing Partnership training for all CoC providers. Finally, Consolidated Plan jurisdictions are represented on the CoC's board, and the CoC has an active Local Housing Options Team comprised of a diverse group of housing and service professionals who meet monthly for cross-sector collaborative housing projects and planning activities for all in need of safe, affordable/accessible housing in Allegheny County.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	03/28/2024

1D-9a.	Using Data to Determine if Racial Disparities Exist in Your CoC's Provision or Outcomes of CoC Program-Funded Homeless Assistance.	
	NOFO Section V.B.1.p.	

Describe in the field below:

1.	the data your CoC used to analyze whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance; and	
2.	how your CoC analyzed the data to determine whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance.	

(limit 2,500 characters)

(1) The CoC conducts racial disparities analyses to assess if racial disparities exist with respect to: persons seeking services, at key decision points, and client outcomes. For these analyses, the CoC leverages the data collection and analysis specialties of its administrative and HMIS lead agency, DHS. The DHS Data Warehouse integrates person and service data from a wide variety of sources both internal and external to the county. It was created by consolidating publicly-funded human services data, including HMIS data, and, over time, expanded to include data from other sources. It now includes 21 categories of data from local and state sources. Through this data, the CoC analyzes: racial composition of Allegheny County and persons served in the homeless system; the services received by race, placements into different levels of housing support by race, exits to permanent housing destination by race, length of stay in programs by race, and returns to homelessness by race. Of note is that Allegheny County's racial distribution, as of the 2021 ACS Survey, which was used as a comparison base, was 76% white, 12% Black. (2) The CoC's Racial Disparities Assessment found significant racial disproportionality with respect to those who experience homelessness and seek public resources for assistance. Black people are overrepresented, at a rate at least 4 times the rate of their representation in the general populations across homeless program types. The assessment also found that the homelessness system is placing people into homelessness service programs and achieving positive outcomes at rates almost identical to that of the population seeking services, meaning there does not appear to be racial disproportionality once connected to the system. For example, from 2018-2022, we see the percentage of black participants exiting to permanent housing destinations being slightly higher than the percentage of white participants exiting to permanent housing destinations (from homeless prevention it's equally 96%, from short-term homeless programs its 42% compared to 30%; and from permanent housing programs its 68% compared to 63%). Finally, returns to homelessness after a successful exit were near identical within both 6 months and 2 years. As such, while Black people in the CoC are disproportionally experiencing homelessness (consistent with national trends), they have similar and slightly better outcomes than white participants once connected to services.

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

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

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	No
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	Yes
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes

4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes
5.	Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness?	Yes
6.	Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector?	Yes
7.	Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness?	Yes
8.	Is your CoC educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity?	No
9.	Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness?	Yes
10.	Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system?	Yes
11.	Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness?	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

The CoC will continue its commitment to regularly assessing racial equity, utilizing the data details described in the next response, and responding to assessment results with actionable process, policy and procedural evaluation. Where racial disparities are identified, the CoC has, and will continue to, assess the impact of existing structural factors contributing to those results. For example, Coordinated Entry (CE) uses a decision support tool (called AHA) that uses data to predict the likelihood of key indicators of harm occurring if a person remains un-housed. This results in the people most in need of assistance being prioritized, while being far more accurate and equitable than the previous actuarial tool used and doesn't require the time or trauma associated with asking sensitive questions at the time of housing crisis. In developing, testing and assessing the ethical effectiveness of the tool it was found that the group that would gain the most allocation of additional referrals in using the AHA over the previous tool was Black singles, a group that our racial disparities analysis identified as seeking homeless services at a significantly disproportionate rate. An analysis of our CE data revealed that use of the AHA tool for service prioritization has in fact led to improved outcomes for Black clients since the tool was introduced in 2020. Higher risk Black clients are more likely to be served in permanent housing programs since the AHA tool was introduced. As we continue the ongoing quality assurance activities with the AHA, we maintain inclusion of racial equity as a metric for assessing its reliability and validity. Similarly, the CoC is currently developing predictive risk modeling (PRM) for targeting our homelessness prevention resources. This is critical in recognition of the significant racial disproportionality identified as to who is entering the homelessness system. A PRM has the potential to maximum the efficiency of prevention resources for those most likely to become homelessness, which data show are disproportionally Black households. With implementation, we will be able to track data to assess if the practice changes corresponding with reductions in the level of disproportionality. These examples demonstrate how the CoC has connected our racial equity assessments to practical evaluation of system policies, practices and procedures, and have/will result in actionable changes.

1D-9d.	Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities.	
	NOFO Section V.B.1.p.	

	Describe in the field below:	
1.	the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and	
2.	the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.	

(limit 2,500 characters)

Through the collection and analysis of HMIS data, as well as data from DHS's Data Warehouse, which brings together and integrates person and service data from a wide variety of sources both internal and external to the county, the CoC regularly tracks data around disparities in the provision and outcomes of homeless assistance. Particular measures that are analyzed include: composition of persons served in the homeless system, disproportionality metric for persons served in the homeless system compared to the county population, disproportionality metric for persons served across each type of homeless service program, racial breakdown of persons seeking and enrolling in each type of homeless service program, median length of stay for people enrolled in homeless service programs, exits to permanent housing destinations across all homeless services and broken down by homeless program type, and returns to homelessness by race. With these measures, the CoC is able to track outcomes at a point in time, and more meaningfully, trends over years. Additionally, the CoC is able to look at these measures for single projects, across projects types, and for the system as a whole. The CoC Board has a dedicated Analysis and Planning committee that meets monthly to review CoC data.

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

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

(limit 2,500 characters)

The CoC regularly seeks public input, including people with lived experience, to inform planning and decision making. Broad outreach avenues include community outreach through media and social media postings, community meetings, and leveraging CoC and partner organizations contact lists, inclusive of homeless service organizations sharing with current and past service participants. These avenues are utilized at multiple times throughout the year, including for CoC's bi-monthly public meetings, within specific planning initiatives, and in preparation for applying for funding. When conducting such outreach, the CoC leverages expert guidance from DHS's Office of Equity and Engagement to use language that is accessible and would encourage feedback from the broadest base of community members. The CoC is additionally working on more systematically integrating people with lived experience into the planning, administration, and evaluation of the CoC. One area where the CoC has been particularly successful with this has been within the competitive procurement process. When services are being procured an RFP is publicly posted and proposals are then reviewed by an evaluation committee that make a recommendation for the selection of successful proposals. In 2024 alone, 5 RFPs for CoC related services have been released, and people with lived experience with homelessness have been engaged in the evaluation and decision making across all of them. The services being procured include housing services, support services, and the selection of a consultant team to support the CoC in the development of its next strategic plan. Enhancing active representation within the CoC and on its board and Committees is another avenue the CoC is using to engage those with lived experience of homelessness. The HAB, the CoC's board, led an effort beginning in March 2022 to initiate the Consortium of Recognizing Experience (CORE) as a forum for people with lived experienced with homelessness or housing instability to voice their experience and directly inform the system of services and supports intended to help those in need. The experience with CORE demonstrated a need to establish more structural supports around the forum to facilitate continuous and meaningful involvement, and the CoC has identified this as a key activity within its next strategic plan, for which the CoC contracted in September (2024) with Focus Strategies to support.

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Routinely included in the decisionmaking processes related to addressing homelessness.	3	1
2.	Participate on CoC committees, subcommittees, or workgroups.	7	0
3.	Included in the development or revision of your CoC's local competition rating factors.	2	1
4.	Included in the development or revision of your CoC's coordinated entry process.	3	1

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

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

(limit 2,500 characters)

The CoC has coordinated homeless services providers and workforce services providers around workforce resources including training and apprenticeship programs, how to access mainstream employment services and resources for individuals with barriers to employment such as justice system involvement. Providers then connect their service participants to professional development and employment opportunities. Additionally, the CoC provides professional development and employment opportunities within the CoC to people with lived experience within the CoC. The CoC's lead agency, DHS, has a nationally recognized Youth Support Partners (YSP) unit. YSPs are young adult professionals who have personal experience in some area of the human services, whom through their employment with DHS, are positioned to share their insights with youth currently in the system, advocate for them and mentor them. YSPs take part in ongoing professional trainings to expand their expertise, with a heavy emphasis on skill-building, coaching, training, supervising, and team-building. Similarly, many of the provider agencies across the CoC currently employ people with lived experience of homelessness, with pathways for advancement and promotion. This includes agencies that are almost entirely staffed with Peer Supports, agencies who have Peer Supports within a broad staffing framework, and the employment of people with lived experience with homelessness in non-Peer Support specific roles. Organizations also maintain employment policies that recognize lived experience as an expertise and publish equivalencies for different levels of education and experience so that applicants with lived experience can see how their unique background fits into positions posted. CoC agencies also provide professional development, including seminars, trainings, certification programs, and attending and presenting at conferences. To further facilitate these opportunities, the CoC is integrating the Agency Leadership, Governance, and Polices factors for the HUD Project Rating and Ranking tool into our annual monitoring processes. This will enable the CoC to actionably demonstrate commitment to these values, while also enhancing our full view of the extent to which the CoC is benefiting from the expertise of individuals with lived experience with homelessness.

1D-10c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

	Describe in the field below:
1.	how your CoC gathers feedback from people experiencing homelessness;
2.	how often your CoC gathers feedback from people experiencing homelessness;

3.	how your CoC gathers feedback from people who received assistance through the CoC Program or ESG Program;	
4.	how often your CoC gathers feedback from people who have received assistance through the CoC Program or ESG Program; and	
5.	steps your CoC has taken to address challenges raised by people with lived experience of homelessness.	

(limit 2,500 characters)

(1,2) The CoC is structured to continuously build on stakeholder input, and people with lived experience are recognized as a key stakeholder group. The HAB, the CoC's board, engages stakeholders by holding regular meetings, sharing materials in advance of meetings, and collecting feedback both in advance of and during meetings. Both the bi-monthly full HAB meetings and monthly Committee meetings are open to the full CoC and the public. Additional engagement opportunities are scheduled as needed and include focus groups, community forums, interviews, and open input requests via media outreach. (3,4) Service participant surveying has been tested in several different formats, including via text messaging, focus groups, and as point-in-time initiatives. Enhancing active representation within the CoC is another avenue the CoC is seeking to meaningfully gather and respond to feedback from people with lived experience. The CoC has an active Youth Action Board, inclusive of youth who have experienced or are currently experiencing homeless, the meets weekly. In 2022, the CoC piloted the Consortium of Recognizing Experience (CORE). CORE met as a forum for people with lived experienced to voice their experience and directly inform the system intended to help. After an initial year, the CoC is assessing how to continue forward most effectively. The CoC participated in HUD's TA Community Workshop on partnering with people with lived experience to further inform potential directions and has identified this as a key focus area for its next strategic plan, for which the CoC has contracted with Focus Strategies to facilitate development. (5) Examples of steps the CoC has taken to address challenges raised by people with lived experience include: adjusting emergency shelter access protocols to ease entry; operating a year-round, low-barrier shelter, responsive to the needs and wants of participants, including the ability to keep partners together and bring pets, individuals determining which sleeping room is best for them, and access to amnesty lockers; seeking opportunities to enhance access to reliable and affordable transportation and public bathroom facilities; and continuing to develop practices and procedures that humanize and respectfully engage individuals experiencing a housing crisis. The CoC worked with CORE members and did research to identify a compensation rate that fairly recognizes the contribution without feeling coercive to people in need.

1D-11.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.s.	

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

(limit 2,500 characters)

The CoC has engaged with city, county and state government around several policies and regulations to support housing development and access that would support the households served. (1) Most recently, the CoC was involved in a working group with Councilmembers, Planning Commission members, County representatives, and housing and service providers to inform the Department of City Planning's Zoning Text Amendment (posted August 2024), which seeks to ensure the City's Zoning Code complies with the federal Fair Housing Act to better align with the Commonwealth of Pennsylvania regulatory standards, to provide additional flexibility and opportunity for development of housing, and to make it easier for applicants and communities to understand the Zoning Regulations around group living uses. These fair housing amendments are intended to give group housing and service providers greater clarity and flexibility to provide these much-needed services without altering the look and feel of neighborhoods. (2) The CoC is also part of the 500 in 500, launched by Allegheny County in June 2024. This initiative invests in moving people out of homelessness and into stable housing by making 500 affordable housing units available in 500 days. The three core strategies for doing this are prioritizing existing rental units for people exiting shelter as current tenants leave; accelerating efforts to repair empty rental units so they can become available to new tenants and converting facilities that do not require extensive modifications to residential use for those existing shelter. This includes leveraging nearly $4M in State Reinvestment Funds to support the strategies to increase development, such as capital investments in 9% LITHC developments, capitalized rent/operating reserves to leverage private debt in 4% LITHC/Preservation developments, and capital investment and rent guarantees for affordable housing-friendly landlords to acquire new/renovate existing buildings.

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

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

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

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

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC's local competition.	04/09/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC's local competition.	07/19/2024

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

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.
Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

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

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	No

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)?	110
2.	How many renewal projects did your CoC submit?	32
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section 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.	the severe barriers your CoC considered.

(limit 2,500 characters)

(1,2) Data for all CoC projects are collected in HMIS or a comparable database for DV projects. The CoC's HMIS is also integrated with the Coordinated Entry System, and therefore the CoC can access and analyze data from a household's initial touch through system exit, including date of program enrollment, date of successful housing, date of exit, and exit destination. These measures combined provide information on households successfully getting into permanent housing, and how long it takes for households to navigate through the system. The CoC's System Performance Management Plan (PMP) provides a quarterly, cumulative report on the system overall and for each project individually, including rates of successful housing placement, and length of time to enrollment, move-in, and time in program. These results are presented alongside the CoC's set benchmarks for each. The annual review and ranking of all CoC housing projects include parallel metrics and allocates points within each metric based on how the project's performance stands against the other projects within the CoC. Together, the assessment approaches of the PMP and annual review and ranking, enables the CoC to analyze outcomes in multiple ways. (3,4) The CoC's annual review projects considered the following severe barriers: chronic homelessness; multiple disabilities; zero income; and living in places not meant for human habitation. These barriers were incorporated into the performance-based, data-driven process used to review, rate, and rank projects. Each year, a performance evaluation outcome tool is used to review, rate and rank all renewal projects. The tool is developed through the Analysis and Planning Committee of the CoC and revised annually to remain relevant to CoC needs and benchmarks. The 2024 Ranking Tool reviewed and rated projects on objective metrics around: utilization; housing performance; income, health and non-cash benefits; program time; recidivism; data quality and timeliness; fiscal administration and effectiveness; programmatic monitoring results. In addition, the final section of the tool attributes points to projects based on the percentage of consumers served with the identified sever barriers. This incorporation of participants with severe barriers into the ranking tool allows the CoC to place an objective rating on each program that considers both performance and the vulnerability of participants.

	1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
		NOFO Section V.B.2.e.	

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

(limit 2,500 characters)

(1) The CoC's Analysis and Planning Committee employs an annual, multi-month process to review and recommend the rating factors used in the CoC's data-driven, performance-based review and ranking process. The Committee is open, has active participation from a large array of stakeholder groups, and meets monthly. While the racial composition of the CoC's board and the Analysis and Planning Committee are consistent with that of the county (79% White, 14% Black), Black people are over-represented in the homelessness population. The CoC continues to pursue increasing the diversity of its members through targeted outreach and engagement activities, with racial diversity included in the consideration of new board members each year. The establishment of the CoC's rating factors is an iterative process, as each year the data-driven, performance-based ranking tool is reassessed and adjusted, building on lessons learned and current system contexts. Each factor included in the tool is reviewed and discussed. Any questions or comments about the factor, including its inclusion, weight and how it is measured is open for adjustment. By striving to increase representation so that the Committee itself better reflects the population being served, and by continuing a democratic decision-making process, the Committee explicitly builds these perspectives into the ranking tool. (2) Evaluation Committees are convened to review, select and rank projects. The CoC aims to capture diverse perspectives, including sector representation, lived experience and gender and racial diversity in the Committees. To this end, DHS, the CoC's administrative lead, has implemented an Evaluation Committee Worksheet to intentionally assess the diversity of each Evaluation Committee reviewing project proposals across the characteristics cited above. (3) CoC funded programs receive participants via the CoC's Coordinated Entry process, with all denials for services reviewed for appropriateness. With these system processes in place, individual programs are not controlling the racial distribution of their participants, and there are no indictors of racial variations across specific programs. As such, the CoC did not incorporate the degree to which program participants mirror the homeless population demographics into the rate and ranking process, while continuing to be committed to identifying and implementing new/effective approaches to operating a socially just homelessness response system.

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) With UFA status, the CoC has implemented an ongoing Funding Adjustment Process that uses monthly financial monitoring to identify underspending trends in the 1st quarter. DHS, the CoC's lead agency, works with identified projects to assess spending levels and utilization rates, while concurrently tracking projects that are on track to expend funds, have no outstanding programmatic/fiscal issues, and have capacity to effectively utilize more funds. Funding is reassessed at 5 months and underspent funds are reallocated. Funding adjustments can also be made in response to service issues as documented through fiscal and programmatic monitoring. The CoC also uses a performance-based and data-driven review and ranking process as part of the local competition. The Performance Outcome Tool is organized around key performance measures (e.g., unit utilization; housing performance; returns to homelessness; data quality; etc.) and is populated with data from HMIS, fiscal reporting, and monitoring results. Point values are set through the CoC's Analysis and Planning Committee, through analyses of score statistics from previous ranking tools, system performance across measures, and input from CoC stakeholders. The Tool is objective and consistent, enabling the CoC to systematically identify lower performing projects. The CoC identifies the lowest performing projects, assesses the degree of performance, and contextualizes performance to inform reallocation decisions. (2,3) In addition to UFA reallocations within the grant year, the CoC identified three housing projects for reduced reallocation and one HMIS project for elimination. (4) The HMIS project was selected based on DHS's efforts to increase HMIS efficiencies and reduce costs. The three housing projects were identified through results of the performance outcome tool and a review of utilization. Partial reductions, rather than full elimination, best support the CoC's needs. The lowest performing project has been coordinating closely with the CoC to enhance its fidelity to Housing First, which we believe will improve its outcomes. The CoC would be hurt by further reducing this project, as it provides site-based housing, and is a Black-led organization that has been supporting the CoC's equity efforts. The other housing projects have been impacted by under resourcing for supportive services, and the reduced reallocation is a step towards aligning their supportive services capacity with their units.

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

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	Yes

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 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/15/2024

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/15/2024

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

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes

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.	10/24/2024

1E-5d.	Notification to Community Members and Key Stakeholders by Email 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.	10/28/2024

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

	Enter the name of the HMIS Vendor your CoC is currently using.	Green River

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

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

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

	Enter the date your CoC submitted its 2024 HIC data into HDX.	04/15/2024

2A-4.	Comparable Databases for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

(limit 2,500 characters)

(1, 2) The CoC has four domestic violence service providers which provide emergency shelter, rapid rehousing and support services for singles and families affected by domestic violence. These providers enter client level data into an HMIS-comparable database and provide de-identified aggregate data to the CoC and HMIS lead agency (DHS) for additional analysis. Maintenance of an HMIS-comparable database is a contracted requirement with the entities, and the availability of necessary data elements is further facilitated by both DHS's dedicated analytic unit focused on homelessness and housing, and the CoC Analysis and Planning Committee—a committee of the CoC's board (HAB) that meets monthly and provides ongoing analysis to support the planning of the CoC, at both the provider and system level. In addition to the dedicated analytic unit and the CoC's Analysis and Planning Committee, DHS employs a Homeless Data and Performance Outcomes Manager, who coordinates closely with all homelessness system providers, including the domestic violence service providers to ensure data standards are in place and being met. This Manager works directly with program staff to receive de-identified aggregated system performance measures for each project. (3) The Allegheny County CoC is compliant with the 2022 HMIS Data Standards.

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

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

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	981	82	978	99.70%
2. Safe Haven (SH) beds	12	0	12	100.00%
3. Transitional Housing (TH) beds	170	0	170	100.00%
4. Rapid Re-Housing (RRH) beds	618	172	618	100.00%
5. Permanent Supportive Housing (PSH) beds	2,131	0	1,692	79.40%
6. Other Permanent Housing (OPH) beds	0	0	0	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)

The CoC has complete bed coverage in HMIS across Emergency Shelter, Safe Haven, and Transitional Housing and Rapid Rehousing project types. The CoC's HMIS bed coverage for PSH is at nearly 80%, because the VA HUD VASH program does not currently participate in HMIS. The CoC and VA have been discussing this data challenge for over den years and in 2021 agreed to a data sharing process utilizing the most recently released HUD tool. While this means that the VA is not using HMIS is the same manner as most of the other CoC providers, the CoC will benefit from having the data available for analysis, and is be able to integrated VA data with HMIS data. With the data sharing plan already in place, the CoC and VA's next steps are to: continue building the data sharing tool, testing the tool for accuracy, and finally fully integrated the VA data with the CoC's HMIS data set. (2) The CoC will implement the steps to increase bed coverage by completing the VASH program-HMIS data set integration process.

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

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST?	Yes

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

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

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

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

	Enter the date your CoC conducted its 2024 PIT count.	01/30/2024

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2024 PIT count data in HDX.	04/04/2024

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)

The CoC has a strong and active group of youth-serving organizations, including the CoC's one-stop drop-in center for homeless youth and the unit of Homeless Services & Supports Coordinators for Youth (HSSCY).   In addition, the CoC's administrative lead, DHS, is the county department responsible for administrating a wide range of human services and resources for children, youth and families, and is well connected to organizations, stakeholders and advocates seeking to meet the needs of youth. These stakeholders were engaged though CoC meetings, including Analysis and Planning Committee meetings dedicated to the PIT plans and processes, to inform the design and implementation of the PIT. (2) The CoC got direct input from youth experiencing/formerly experiencing homelessness when planning and implementing the PIT through the CoC's Youth Action Board. Comprised of youth who have experience with varying service systems, including the homeless system, this board meets monthly, led the development of the CoC's YHDP Coordinated Community Plan, and provides ongoing guidance on the homelessness system. (3) The CoC relied on the expertise of our participating organizations to identify locations where youth experiencing homelessness were most likely to be counted. This expertise includes youth-dedicated Homeless Services and Supports Coordination unit, a support and coordination team specializing in engagement for adults under 25 experiencing homelessness.   HSSCY navigators deliver low-barrier, youth-centered case management to help sheltered and unsheltered youth secure and maintain safe, stable housing. Young adults who are couch-surfing or facing imminent homelessness can access housing stabilization services through the HOPE Project, a youth-specific prevention and diversion program, and Host Homes, which facilitates shared living arrangements with chosen natural supports.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

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

(limit 2,500 characters)

(1)The CoC's PIT sheltered count is generated from HMIS, with DV projects providing data from their comparable reporting systems. Over the years the CoC has implemented measures to support data quality, including establishing a dedicated staff member who reviews data quality monthly and works with providers to meet data quality standards. This includes the accurate documentation of CH, household composition, and veteran status. These processes were consistent between the 2023 and 2024 PIT. (2) The unsheltered count methodology has continued to be strengthened since 2019 . The CoC has implemented a number of on-going practices to strengthen the identification and documentation of those who are experiencing homelessness and are CH, families with children and/or veterans: The CoC's street outreach teams meet weekly to discuss case conferencing for the most vulnerable individuals, including those that are CH, and develop engagement and housing plans, providing TA and training around effectively documenting CH. Starting with the 2023 unsheltered PIT, the CoC fully utilized the Street Outreach teams, leveraging their year-round engagement and documentation of people experiencing unsheltered homelessness. The Street Outreach teams led the unsheltered PIT, prioritizing the areas known to be locations where people stay, and then further locating individuals through their existing engagement. For 2024, this processes with further strengthened by expanding the geographic coverage area of the unsheltered PIT. Additionally, a review step was added in which the DHS Field Unit lead conducted data follow-up one week post the PIT for additional confirmation of individuals identified, increase the data quality. (3) We believe the CoC's 2024 PIT to be the most fully encompassing of unsheltered PITs conducted in the CoC, while also recognizing that the PIT count results have been impacted by the pandemic. Our community has experienced an increase in unsheltered homelessness due to a number of factors, including a significant tightening of the housing market. Pittsburgh's median asking rent in June 2024 is 37.4% higher than pre-pandemic level rent. The CoC's improved unsheltered count methodology and weekly street outreach case conferencing has helped to better identify and enumerate our unsheltered population, which has resulted in our unsheltered count being 155 in 2023 and increasing to 169 in 2024.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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   - PHA Crosswalk; and
    - Frequently Asked Questions

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

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

(limit 2,500 characters)

(1) The CoC is committed to continuing to strengthen its homeless prevention capacity. The CoC works closely with other systems to identify those at risk of homelessness and develop discharge planning protocols to help them avoid homelessness. This includes coordination with child welfare, the courts, jails, hospitals, and behavioral health services. To enhance our ability to effectively identify those most at risk for experiencing homelessness, the CoC is partnering on an array of data analysis activities to develop validated predictive risk models and research embedding models. These models use DHS's nationally recognized Data Warehouse to combined person-level data from multiple systems and identify a likelihood of that household becoming homeless. Early application of these models is being used to identify those most likely to become homeless among those with eviction filings. Initial results have also identified increased likelihood among those with jail bookings, and those utilizing behavioral health crisis services. (2) The CoC strategy to address risk factors is multi-faceted. The CoC has implemented a homeless prevention service specific to families active in child welfare to address housing stability early, and a team of mobile Housing Specialists to work with families to address housing issues before they become crises. The CoC also funds a robust array of prevention services including rental assistance, landlord mediation, legal assistance, eviction hearing supports, budget counseling, public benefit navigation, subsidized childcare, and early intervention programs. These also include partnering closely with the local housing authorities to prevent evictions. Prior to the pandemic, the CoC's two largest PHAs accounted for 13% of eviction filings. Since the success of the CoC's mediation program, both PHAs have fully committed to the mediation process, meaningfully reducing the rate of evictions in the county. Specific to jail involvement, DHS, was selected to participate in the Just Home project, a national program designed to advance community-driven efforts to break the link between housing instability and incarceration. Similarly, with increased risk of homelessness among those with BH needs, the CoC has maintained a homeless prevention service via State Opioid Response funding to maintain housing stability for individuals in recovery from OUD. (3) DHS, the CoC's lead administrative agency and home of CE, oversees these strategies.

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

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

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

2C-2.	Reducing Length of Time Homeless–CoC's Strategy.	
	NOFO Section V.B.5.c.	

	In the field below:	
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	

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

(limit 2,500 characters)

(1) To reduce LOT homeless, the CoC is committed to a robust diversion effort and a strong permanent housing strategy, including coordinated landlord outreach to expand access to affordable housing. With these strategies the CoC saw a reduction from 105 to 89 days. While we previously experienced an increase of the system's LOT homeless due the temporary shut down and slowdown of many services, increased barriers to employment, delays in application processes and a sharp increase in rental prices, we believe the strategies that led to the decreased in LOT prior to the pandemic are still strong and have helped the CoC reduce LOT this past year. Specific efforts include: monitoring performance to the CoC's goal of a median of 30 days in shelter; providing intensive case management to help connect to housing and related services; leveraging non-HUD funding to expand permanent housing capacity; improving the capacity of all programs to complete faster housing searches by conducting a CoC-wide landlord engagement campaign including a Risk Mitigation fund, and utilizing voucher programs to move people onto stable housing. These strategies are being further bolstered by the County's 500 in 500 initiative—a campaign launched in June 2024 to move more people, more quickly from homelessness to stable housing by making 500 units of affordable housing available in 500 days. This initiative is critical, as the increasing rental prices in the CoC's geographic area are significant—a June 2024 rental report from the National Association of Realtors shows that the median asking rent in Pittsburgh has increased by 37.4% since 2019, and the city has outpaced NY as the top Northeast market for rent growth over the past 5 years. (2) Using shelter performance data, Coordinated Entry identifies long stayers in shelters and conducts regular case conferences to work through barriers to rehousing. Similarly, the CE field unit and street outreach workers conduct case-conferencing multiple times a month, in which they review a by-name list of individuals on the street for potential case conferencing and reassessment. The CE process includes LOT in prioritization, so the long-time homeless individuals/families are referred to a housing program before a household with similar vulnerabilities but less time on the street or in shelter. Chronic homeless are prioritized above everyone for housing. (3) DHS, the CoC's lead administrative agency and home of CE, oversees these strategies.

| 2C-3. | Successful Permanent Housing Placement or Retention –CoC's Strategy. | |
| | NOFO Section V.B.5.d. | |

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

(limit 2,500 characters)

(1) The Covid-19 pandemic and rising housing costs have significantly impacted exits to PH destinations in the CoC. However, the CoC continues to prioritize this area, with strategies that build on our case conferencing for long-term stayers in family shelter to provide specialized plans for successful exits to PH and our Housing Solutions Specialists who provide direct assistance to single shelter participants to become document ready, locate housing, and exit to PH. Most significantly, the County launched "500 in 500" in June 2024. This initiative is set to help people out of homelessness by making 500 affordable housing units available in 500 days. The three core strategies within this campaign are to prioritize existing rental units for people exiting shelter as current tenants leave, accelerating efforts to repair empty rental units so they can become available to new tenants, and converting facilities that do not require extensive modification to residential use for those exiting shelter. (2) The CoC has been extremely successful at making sure individuals and families in PSH retain their housing or exit to PH destinations. Of PSH households, 97% retained or exited to permanent housing. This is due mostly to staffing and training strategies that provide for effective case management in these programs. Staff are trained in Motivational Interviewing and Trauma Informed Care, helping participants to increase income and non-cash benefits and to link to community supports for mental health, substance abuse, physical health, employment, and childcare. The CoC has implemented Moving On initiatives to identify households that no longer need their current level of homelessness system housing support and connecting them to housing choice vouchers through the homeless preference or other subsidized housing options in the community. We continue to strengthen our Move On strategy by providing pre-screening and eligibility reviews, application and housing search assistance, aftercare, and more effective communication to increase success in obtaining and leasing up with vouchers. (3) DHS, the CoC's lead administrative agency oversees these strategies.

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

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

(limit 2,500 characters)

(1) Prior to the pandemic, the CoC had very low rates of return for those who exited to a permanent destination, with our CoC's highest rate of returns within 12 months being 7.7% in 2020. Since the pandemic, our CoC experienced an increase in the rates of returns, with 10% within 6 months and 15% within 12 months in 2023. Using HMIS and administrative data from DHS, the CoC's HMIS lead, we have identified common factors of those who return: 46% had exited from shelter; 52% returned within the first 6 months; and 63% have experienced behavioral health challenges. (2) The CoC works to ensure that people exiting shelter and PH do not return to homelessness by supporting people in their transition to permanent housing. Prior to exit, case management is provided and linkages to community services and supports such as subsidized housing, employment resources, health services, childcare subsidies and other public benefits are provided. Families with young children are offered home visiting programs that support child development as well as connections to local Family Support and Early Learning Resource Centers. Strategies in shelters also include additional housing-specific case management, engaging households in shelter and continuing to work with them in the community. The CoC also offers financial assistance to help with security deposits and first month rent through RA programs. Collaboration with the local housing authorities, and their commitment to homeless preference vouchers, mainstream vouchers, FUP and FYI vouchers, and EHV has enabled us to sustain access to affordable housing. Building on these strategies, the CoC is also currently utilizing our competitive RFP processes to identify a provider of Tenancy Sustaining Services. This program will provide up to a year of supportive services to tenants after transitioning into rental housing from emergency shelter. Finally, in recognizing the common occurrence of behavioral health challenges, in particular the increasing prevalence and acuity of substance use disorders, the CoC has been leading an expansion of Acute Service Coordination (ASC). ASC is a form of case management that includes more assertive and intensive engagement with individuals who have not been successful with traditional case management models. Our adaptation is designed for individuals experiencing homelessness to better support them as they transition into housing. (3) DHS, the CoC's lead administrative agency, oversees this strategy

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

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

(limit 2,500 characters)

(1) The CoC uses a multi-faceted strategy to increase employment income for homeless service participants. At the system level, the CoC has collaborated with providers and workforce development professionals to improve integration between the homeless and employment systems, directly identify job opportunities and benefits access, and create networking opportunities to establish further linkages across the systems. This work aids CoC providers in having the knowledge, resources and connections to support service participants in increasing employment income and access. At the housing program level, the CoC's service providers work closely with clients on their employment goals, assist with building a résumé, connecting to job placement/training programs, and conducting mock interviews, and provide employment life skills such as time management, effective communication, etc. Once employment is obtained, programs support clients with building additional skills to help them turn their desired job into a career. The CoC's provider agencies are also the administrators of employment services. For example, in addition to providing homeless housing programs, Auberle runs the Employment Institute, offering 13 nationally recognized certification programs, employment opportunities, life skills and work readiness training, education services and employment exposure/search services. With 130 employing partners and 100 referral agencies throughout the region, The Employment Institute is a highly respected and award-winning workforce development program that helps individuals find a good paying and sustainable career. (2) Mainstream employment organizations are directly involved in the CoC's work to increase cash income and employment. Partner4Work, the local workforce development board, is a member of the CoC's working board, offers tours, info sessions, and customized tools for CoC providers at the local one-stop American Job Center, PA CareerLink. This led to more effective utilization of PA CareerLink by individuals experiencing homelessness. (3) DHS, the CoC's administrative organization, is responsible for overseeing the strategy to increase jobs and income from employment.

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 strategy to increase non-employment cash income and sources targets systemic and individual interventions. At the individual level, DHS, the administrative lead for the CoC, coordinates with the County Assistance Office, operated by the Commonwealth of Pennsylvania, to ensure that CoC clients connect with necessary TANF benefits. Additionally, DHS has a direct referral relationship with SNAP via a local community-based advocacy organization, Just Harvest, that allows us to connect clients directly with services. At the system level, homeless service provider staff are trained to assist clients with determining eligibility and applying for public benefits that can increase both non-employment cash income and sources. The CoC also promotes awareness of non-employment cash income providers and offers trainings on best practices, including SOAR. In addition, the CoC works with AHEDD which provides employment services throughout Pennsylvania to people with disabilities. Many people receiving Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI) are interested in exploring work opportunities and increasing their earnings but are concerned about losing their benefits and health care. While these benefits support millions of persons with disabilities, they have evolved as a new obstacle in the search for gainful employment and participation in community living. AHEDD helps clients so that they can utilize work incentives available through the Social Security Administration, in order to achieve their employment goals and attain greater financial independence. It is of significance to note that in 2019, Pennsylvania unfortunately ended its General Assistance program, which was an important source of non-employment cash income for homeless individuals. (2) DHS, the CoC's lead administrative agency and collaborative applicant, oversees the strategy.

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes

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

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
LIGHT	PH-RRH	34	Housing
Housing Health Pa...	PH-PSH	36	Healthcare

3A-3. List of Projects.

1. What is the name of the new project?   LIGHT

2. Enter the Unique Entity Identifier (UEI):   KMXNXV2SBAQ3

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your CoC's Priority Listing: 34

5. Select the type of leverage: Housing

3A-3. List of Projects.

1. What is the name of the new project?   Housing Health Partnership

2. Enter the Unique Entity Identifier (UEI):   HGL7N2M4KN65

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 36

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

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

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

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

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

(limit 2,500 characters)

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

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

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

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

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

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

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

(limit 2,500 characters)

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

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

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

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

	Did your CoC submit one or more new project applications for DV Bonus Funding?	No
Applicant Name		
This list contains no items		

4B. Attachments Screen For All Application Questions

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

	1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
	2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.
	3.	We prefer that you use PDF files, though other file types are supported–please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
	4.	Attachments must match the questions they are associated with.
	5.	Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.
	6.	If you cannot read the attachment, it is likely we cannot read it either.
		. 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	PA 600's 2 larges...	10/24/2024
1C-7. PHA Moving On Preference	No	PA 600's 2 larges...	10/24/2024
1D-10a. Lived Experience Support Letter	Yes	PA 600 Commitment...	10/24/2024
1D-2a. Housing First Evaluation	Yes	PA 600's annual m...	10/24/2024
1E-2. Local Competition Scoring Tool	Yes	PA 600 utilizes a...	10/24/2024
1E-2a. Scored Forms for One Project	Yes	PA 600's most com...	10/24/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	PA 600 rejected 5...	10/24/2024
1E-5a. Notification of Projects Accepted	Yes	PA 600 notificati...	10/24/2024
1E-5b. Local Competition Selection Results	Yes	PA 600 project se...	10/24/2024
1E-5c. Web Posting–CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		

2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes		
3A-1a. Housing Leveraging Commitments	No	PA 600 Housing Le...	10/24/2024
3A-2a. Healthcare Formal Agreements	No	PA 600 Healthcare...	10/24/2024
3C-2. Project List for Other Federal Statutes	No		
Other	No		

SECTION 8 ADMINISTRATIVE PLAN TABLE OF CONTENTS

Allegheny County Housing Authority

5.0   SELECTING FAMILIES FROM THE WAITING LIST

5.1   *WAITING LIST ADMISSIONS AND SPECIAL ADMISSIONS*

The Housing Authority may admit an applicant for participation in the program either as a special admission or as a waiting list admission.

If HUD awards funding that is targeted for families with specific characteristics or families living in specific units, the Allegheny County Housing Authority will use the assistance for those families. If this occurs, the Allegheny County Housing Authority will maintain records demonstrating that these targeted housing choice vouchers were used appropriately. When one of these targeted vouchers turns over, the voucher shall be issued to applicants with the same specific characteristic as the targeted program describes.

5.2   *PREFERENCES*

The Allegheny County Housing Authority, according to our local needs and preferences, will select families based on the following preferences:

Category 1 Preferences: (1) Applicants for whom a law enforcement agency is seeking housing as an accommodation for its witness protection or confidential informant programs; and (2) victims of domestic violence. Preferences in this Category have equal priority.

Category 2 Preference: Residents of the Allegheny County Housing Authority public housing program asked to move due to the modernization of his or her unit or community regardless of whether the waiting list is open or closed.

Category 3 Preference: Successful graduates of the Allegheny County Housing Authority public housing Family Self-Sufficiency Program regardless of whether the waiting list is open or closed.

Category 4 Preference: Veterans with an honorable discharge.

Category 5 Preference: Homeless preference to permit no more than 50 vouchers to be given to families experiencing homelessness with or without disabilities. All applicants must be referred through the Allegheny County Department of Human Services.

Preferences listed in Category 1 have priority over preferences listed in Category 2 and will therefore be offered housing before those listed in Category 2, and the same is true for the other Categories. The date and time of application will be noted on each application and will be utilized to determine the sequence that each individual with a preference is offered housing within the categories.

Introduction
ABOUT THE REFERENCES CITED IN THE MODEL ADMINISTRATIVE PLAN

Chapter 1
OVERVIEW OF THE PROGRAM AND PLAN

Adminplan 11/21/16

Chapter 2
FAIR HOUSING AND EQUAL OPPORTUNITY

Adminplan 11/21/16

Chapter 3
ELIGIBILITY

Chapter 4
APPLICATIONS, WAITING LIST AND TENANT SELECTION

2. PREFERENCE FOR RECIPIENTS AND FORMER RECIPIENTS OF HOMELESS ASSISTANCE SERVICE REFERRED BY THE ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES

Individuals and families that have successfully completed Homeless Assistance programs through the Allegheny County Department of Human Services, Bureau of Homeless Services will be eligible for this preference. Such programs include Permanent Supportive Housing, Transitional Housing, Bridge Housing, Rapid Re-housing and Emergency Shelters.

Individuals and families' eligibility for this preference must be verified by the Administrator of the Bureau of Homeless Services at the Allegheny County Department of Human Services. That eligibility determination will be based upon the following criteria:

A) Successful completion of a Permanent Supportive Housing program that is determined by the lack of need for the supportive services, but an on-going need for rental assistance.

B) Successful completion of a Transitional, Rapid Re-housing, or Bridge Housing program, including compliance with all required program guidelines and agreements. Consumers, who have been involuntarily terminated will not be eligible for the set-aside vouchers.

C) Families with minor children, who have not completed Transitional Bridge, or Emergency Housing Programs may also be eligible if the Administrator determines that a lack of permanent affordable housing is contributing to the family's on-going housing instability. This instability will be determined by at least three homeless episodes within the last three years and a referral to the Allegheny County Office of Children, Youth and Families within the last year.

Individuals and families referred by the Allegheny County Department of Human Services and verified as being eligible for this preference will receive the preference whether the waiting list is open or closed.

3. EMPLOYMENT/ELDERLY & DISABLED PREFERNECE

A) Employment Head of Household

An application in which the head of household, spouse or co-head of household is considered working in a long-term full-time or part-time capacity:

i. *Any head of household, spouse or co-head of household legally employed by an employer in a full-time capacity*

The head of household, spouse or co-head of household must work for wages, commissions or other consideration of value and have been so gainfully employed after the date of application. The head of household, spouse or co-jead of household must demonstrate full-time employment for, at least, six (6) consecutive months of the preceding twelve (12) months prior to the date of t he pre-application or the date of placement except for mitigating circumstances, such as, lay-off, business closure, or regular seasonal employment, such as construction or teaching. Full-time

Allegheny County Housing Authority

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October 24, 2024

U.S. Department of Housing and Urban Development
Community Planning and Development

Re: NOFO for FY 2023 Continuum of Care Competition

To whom it may concern:

Please accept this letter signifying the Allegheny County Continuum of Care's (CoC), PA-600, commitment to actively and meaningfully including people with lived experience. The CoC is responsible for operating a homelessness system that is effective in meeting the needs of our neighbors experiencing homelessness, and the input of those who have lived expertise is instrumental in establishing the CoC's plans and priorities.

The Allegheny County Continuum of Care (CoC) is the community-based, homeless-assistance program-planning network supporting Allegheny County, the City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills. The CoC is comprised of representative stakeholders engaged in ending and preventing homelessness and oversees a wide array of housing options and services. The Homeless Advisory Board (HAB) is the governance board of the CoC and is responsible for planning, coordinating and operating a system within Allegheny County that addresses the needs of individuals and families experiencing homelessness. Of the HAB's current 21 members, 3 are individuals with lived experience with homelessness, including unsheltered situations within the past 7 years.

In 2022, the HAB initiated the Consortium of Recognizing Experience (CORE). CORE was set up as a recurring forum for people with lived experience with homelessness or housing instability to voice their experience and directly inform the system of services and supports intended to help those in need. Open to anyone with any form or level of experience with housing instability or homelessness, CORE input directly guided priorities in the CoC's submitted "Plan for Serving Individuals and Families Experiencing Homelessness with Sever Service Needs", including: enhancing access to reliable and affordable transportation and public bathroom facilities; expanding the continuum of housing options to meet the varying needs and desires of individuals and households; and simplifying access to services and basic need resources.

After an initial year of hosting CORE, the HAB recognized a need to strengthen the infrastructure, practices and procedures for respectfully engaging individuals with lived expertise, and effectively integrating that engagement into the planning, coordination and operation of our CoC. CoC stakeholders, including members of the HAB, participated in the HUD TA Community Workshop on Partnering with People with Lived Experience of Homelessness from April to August 2023. Further, the HAB is committed to centering the voice of those who have traveled the homelessness system as it sets to undertakes the development of its next strategic plan. In September 2024 the CoC contracted with Focus Strategies and began the design phase of the strategic planning process. Central to the planning process and the resulting CoC plan is identify, implementing, and sustaining CoC structures and practices that meaningful involve people with lived experience in the CoC's planning, decision making, and operations.

Sincerely,

Gale Schwartz
Chair, Homeless Advisory Board
Allegheny County Continuum of Care

ANNUAL 'HOUSING FIRST' STANDARDS ASSESSMENT TOOL

AGENCY:	
PROGRAM TYPE(S):	
COMPLETED BY:	
DATE COMPLETED (MM/YYYY):	

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system's fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also consider their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and to make recommendations for improvement to projects that identify themselves as meeting the Housing First requirements, and homeless service providers can use this tool as a self-assessment.

Scoring: For each standard, there are three scoring criteria: "Say It", "Document It", and "Do It" (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark "Always" for each scoring criterion. Insert an 'X' in one of the three columns to the right to select "Always" or "Somewhat" or "Not at all".

- *"Say It"* means that project and agency documentation describes what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard of what is done.
- *"Document It"* means that there is written documentation that supports the project's compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- *"Do It"* means that the assessor was able to find evidence that supports the project's compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

ACCESS AND INPUT				
Access 1: Low-Barrier	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Are requirements for program entry limited or minimal with a focus on harm-reduction?				**Always**
				Sometimes
				Not At All
Access 2: Unnecessary Denials	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Do Projects Deny Assistance for unnecessary reasons?				**Always**
				Sometimes
				Not At All
Access 3: LGBTQIA+	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Does the program allow access regardless of sexual orientation, gender identity, or marital status?				**Always**
				Sometimes
				Not At All
Access 4: Admission Process	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is the admission process expedited with speed and efficiency?				**Always**
				Sometimes
				Not At All
Access 5: Intake Process	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is the intake process person-centered and flexible?				**Always**
				Sometimes
				Not At All
Access 6: Coordinated Entry	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Does the provider/project accept and make referrals directly through Coordinated Entry?				**Always**
				Sometimes
				Not At All
Access 7: Exits	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Are exits to homelessness avoided?				**Always**
				Sometimes
				Not At All
Input 1: Participant Education	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is participant education ongoing?				**Always**
				Sometimes
				Not At All
Input 2: Participant Input	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Do projects create regular, formal opportunities for participants to offer input?				**Always**
				Sometimes
				Not At All

Notes Related to Access and Input:

<table>
<tr><th colspan="5">LEASES</th></tr>
<tr><td>**Leases 1: Permanency**
(Not Applicable for Transitional Housing)</td><td>**Say It**</td><td>**Document It**</td><td>**Do It**</td><td>*RANKING CRITERIA:*</td></tr>
<tr><td rowspan="3">*Is client housing considered permanent?*</td><td></td><td></td><td></td><td>**Always**</td></tr>
<tr><td></td><td></td><td></td><td>**Sometimes**</td></tr>
<tr><td></td><td></td><td></td><td>**Not At All**</td></tr>
<tr><td>**Leases 2: Choice**</td><td>**Say It**</td><td>**Document It**</td><td>**Do It**</td><td>*RANKING CRITERIA:*</td></tr>
<tr><td rowspan="3">*Is participant choice fundamental?*</td><td></td><td></td><td></td><td>**Always**</td></tr>
<tr><td></td><td></td><td></td><td>**Sometimes**</td></tr>
<tr><td></td><td></td><td></td><td>**Not At All**</td></tr>
<tr><td>**Leases 3: Comparability**</td><td>**Say It**</td><td>**Document It**</td><td>**Do It**</td><td>*RANKING CRITERIA:*</td></tr>
<tr><td rowspan="3">*Are leases the same for participants as other tenants?*</td><td></td><td></td><td></td><td>**Always**</td></tr>
<tr><td></td><td></td><td></td><td>**Sometimes**</td></tr>
<tr><td></td><td></td><td></td><td>**Not At All**</td></tr>
<tr><td>**Leases 4: Education**</td><td>**Say It**</td><td>**Document It**</td><td>**Do It**</td><td>*RANKING CRITERIA:*</td></tr>
<tr><td rowspan="3">*Do participants receive education about their lease or occupancy agreement terms?*</td><td></td><td></td><td></td><td>**Always**</td></tr>
<tr><td></td><td></td><td></td><td>**Sometimes**</td></tr>
<tr><td></td><td></td><td></td><td>**Not At All**</td></tr>
<tr><td>**Leases 5: Eviction**</td><td>**Say It**</td><td>**Document It**</td><td>**Do It**</td><td>*RANKING CRITERIA:*</td></tr>
<tr><td rowspan="3">*Are measures used to prevent eviction?*</td><td></td><td></td><td></td><td>**Always**</td></tr>
<tr><td></td><td></td><td></td><td>**Sometimes**</td></tr>
<tr><td></td><td></td><td></td><td>**Not At All**</td></tr>
<tr><td>**Leases 6: Stability**</td><td>**Say It**</td><td>**Document It**</td><td>**Do It**</td><td>*RANKING CRITERIA:*</td></tr>
<tr><td rowspan="3">*Is providing stable housing a priority?*</td><td></td><td></td><td></td><td>**Always**</td></tr>
<tr><td></td><td></td><td></td><td>**Sometimes**</td></tr>
<tr><td></td><td></td><td></td><td>**Not At All**</td></tr>
<tr><td>**Leases 7: Payment**</td><td>**Say It**</td><td>**Document It**</td><td>**Do It**</td><td>*RANKING CRITERIA:*</td></tr>
<tr><td rowspan="3">*Do rent payment policies respond to tenants' needs?*</td><td></td><td></td><td></td><td>**Always**</td></tr>
<tr><td></td><td></td><td></td><td>**Sometimes**</td></tr>
<tr><td></td><td></td><td></td><td>**Not At All**</td></tr>
<tr><td colspan="5">*Notes Related to Leases:*</td></tr>
</table>

SERVICES AND HOUSING				
Services 1: Choice	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Do projects promote participant choice in services?				**Always**
				Sometimes
				Not At All
Services 2: Planning	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is Person Centered Planning a guiding principle of the service planning process?				**Always**
				Sometimes
				Not At All
Services 3: Support	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is service support as permanent as the housing?				**Always**
				Sometimes
				Not At All
Services 4: Education	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Are services continued despite change in housing status or placement?				**Always**
				Sometimes
				Not At All
Services 5: Engagement	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is participant engagement a core component of service delivery?				**Always**
				Sometimes
				Not At All
Services 6: Stability	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Are services culturally appropriate with translation services available, as needed?				**Always**
				Sometimes
				Not At All
Services 7: Training	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Are staff trained in clinical and non-clinical strategies? (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)				**Always**
				Sometimes
				Not At All
Housing 1: Participation	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is housing dependent on participation in additional services? (ex: Mental Health, D&A, DV, Financial Wellness, etc.)				**Always**
				Sometimes
				Not At All
Housing 2: Substances	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Is substance use not a reason for termination?				**Always**
				Sometimes
				Not At All

Housing 3: Substances	Say It	Document It	Do It	*RANKING CRITERIA:*
Are the rules and regulations of the project centered on participants' rights?				**Always**
				Sometimes
				Not At All
Housing 4: Transfer	**Say It**	**Document It**	**Do It**	*RANKING CRITERIA:*
Do participants have the option to transfer to another project?				**Always**
				Sometimes
				Not At All
Notes Related to Services and Housing:				

Allegheny County Continuum of Care Evaluation
2024 Renewal Application Project
Performance Outcomes

Agency:			
Project Name:			
Evaluation Data Review Period:	1/1/2023	to	12/31/2023
Total HUD 2023 Grant Award:	$	-	**Successful Exits to PH**
Type of Program:	Permanent Supportive Housing		**Total Project Start Records**

Housing Programs: No. of Units		No. of Beds	
Subpopulation Target A Served:		Subpopulation Target B Served:	

Summary of Persons Served during Evaluation Period:

	Households without Children			Households with Children	
Total Households Served :	**Number of Households without Children**			**Number of Households with Children**	
	Adults			**Adults**	
Total Persons Served:				**Children**	

	Leavers		Stayers	
Total Persons:	Leavers		Stayers	
Households:	**Exiting Households**		**Households Staying**	
Total Adults:	Exiting		Staying	

All Performance Measures are generated from HMIS for the purpose of reviewing and ranking 2023 renewal projects. The tool was developed by the Continuum of Care Analysis and Planning Committee and approved by the Homeless Advisory Board to be utilized for the HUD CoC on (date).

a. Unit Utilization

	Average number of households in units throughout the year	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
Average Utilization of Units		#DIV/0!	5	3	15	15%	5 = 95.4% and above 4 = 88.0 - 95.3% 3 = 75.40 - 87.9% 2 = 66.8 - 75.3% 1 = 0 - 66.7%

b. Housing Performance

	Specific Measure by Program Type	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
PSH: Consumers remaining in PSH		100%	5	1	5	5%	5 = 100% 4 = N/A 3 = N/A 2 = N/A 1 = N/A
PSH: Consumers exiting to any HUD-defined PH option		#DIV/0!	5	2	10	10%	5 = 100% 4 = 89.70 - 99.99% 3 = 62.09 - 89.69% 2 = 17.14 - 62.08% 1 = 0 - 17.13%

c. PSH Total Income, Health Insurance & Non Cash Benefits (Leavers and Stayers)

Specific Outcome Measure	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
1. ADULT consumers who maintain or increase Total income from all sources __/__Stayers + __/__ Leavers		5	1			5 = 66.67% and Above 4 = 57.84 - 66.66% 3 = 48.00 - 57.83% 2 = 30.91 - 47.99% 1 = 0 - 30.90%
2. ADULT & CHILD consumers who have health insurance __/__Stayers + __/__ Leavers		5	1	15	15%	5 = 98.61% and Above 4 = 95.06 - 98.60% 3 = 89.87 - 95.05% 2 = 84.87 - 89.86% 1 = 0 - 84.86%
3. ADULT consumers who maintain or increase non-cash benefits __/__Stayers + __/__ Leavers		5	1			5 = 96.00% and Above 4 = 86.57 - 95.99% 3 = 78.24 - 86.56% 2 = 67.20 - 78.23% 1 = 0 - 67.19%

d.PSH Length of Time (Move in)

Specific Measure by Program Type	% of Total Served	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Average Length of time from program enrollment to move in date for Stayers and Leavers. (This measure is for only persons moving into program during 2023)	N/A	5	1	5	5%	5 = 24 Days and Under 4 = 25 - 30 Days 3 = 31 - 153 Days 2 = 154 - 348 Days 1 = 349 Days and Above

e. Clients with multiple barriers

	Participants	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
Participants with 2 or more disabilities at entry		#DIV/0!	5	0.5			5 = 84.07% and Above 4 = 62.19 - 84.06% 3 = 54.54 - 62.18% 2 = 37.80 - 54.53% 1 = 0 - 37.79%
Adults with zero income at entry		#DIV/0!	5	0.5			5 = 64.07% and Above 4 = 55.23 - 64.06% 3 = 47.42 - 55.22% 2 = 41.89 - 47.41% 1 = 0 - 41.88%
All Persons living in places not meant for human habitation prior to entry		#DIV/0!	5	0.5	10	100%	5 = 74.11% and Above 4 = 47.56 - 74.10% 3 = 35.51 - 47.55% 2 = 23.26 - 35.50% 1 = 0 - 23.25%
All Chronic Homeless at entry		#DIV/0!	5	0.5			5 = 78.67% and Above 4 = 65.99 - 78.66% 3 = 34.70 - 65.98% 2 = 19.03 - 34.69% 1 = 0 - 19.02%

f. Returns to homelessness

	Specific Outcome by Program	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Consumers exiting from a program to PH destination but return to homeless system within 6 months		#DIV/0!	5.00	1	**5**	**5%**	5 = 0 4 = n/a 3 = n/a 2 = n/a 1 = above 0

g. Data Quality

g. Data Quality	Number of HMIS Records with Errors as Defined by HUD	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Program had no data quality missing values			5	1	5	5%	5 = 15 /15 fields have less than 5% missing data
Data Quality: Errors							4.5 = 14/15 fields have less than 5% missing data
Name		#DIV/0!					4 = 13 /15 fields have less than 5% missing data
Social Security Number		#DIV/0!					3.5 = 12/15 fields have less than 5% missing data
Date of Birth		#DIV/0!					3 = 11 /15 fields have less than 5% missing data
Race		#DIV/0!					2.5 = 9-10/15 fields have less than 5% missing data
Ethnicity		#DIV/0!					2= 7-8 /15 fields have less than 5% missing data
Gender		#DIV/0!					1.5 = 5-6/15 fields have less than 5% missing data
Veteran Status (at entry) ADULT		#DIV/0!					1= 3-4/15 fields have less than 5% missing data
Relationship to Head of Household		#DIV/0!					0.5 =1- 2/15 fields have less than 5% missing data
Enrollment CoC		#DIV/0!					0 = 0/15fields have less than 5% missing data
Disabling Condition		#DIV/0!					
Destination at Exit		#DIV/0!					
Income and Sources at Entry		#DIV/0!					
Income and Sources at Annual		#DIV/0!					
Income and Sources at Exits		#DIV/0!					
Chronic Homelessness (missing)		#DIV/0!					

h. Data Quality: Timeliness

h. Data Quality: Timeliness	PSH/RRH Number of Records 3 days or less	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Data Quality: PSH Entries		#DIV/0!	5	1	5	5%	5 = 100% / 4 = N/A / 3 = 96.15-99.99% / 2 = 73.91-96.14% / 1 = 0 - 73.90%
Data Quality: PSH Exits		#DIV/0!	5	1	5	5%	5 = 100% / 4 = n/a / 3 = n/a / 2 = 86.07-99.99% / 1 = 0 - 86.06%

i. Monitoring: PSH

i. Monitoring: PSH	Score From Monitoring Tool	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Monitoring Scorecard tab completed (for 2023 monitoring season)	0	0%	5	2	10	10%	See Monitoring Scorecard for score details.

j. Fiscal

	Amount / Number	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Grant expended all funding (Amount Returned in last HUD grant)	#DIV/0!	#DIV/0!	5	1.5	15	15%	5 = 0-3% return of funds 4 = 4-7% return of funds 3 = 8-12% return of funds 2 = 13-18% return of funds 1 = 19-25% return of funds 0 = > 26% return of funds
Billing reports are submitted timely during 2023	0	0%	5	1.5			5 = All billings submitted correctly w/ support documentation & on time or one billing submitted late. 4 = 2-3 billings submitted late and/or required minor documentation changes 3 = 4-6 billings submitted late and/or required documentation changes 2 = 7-9 billings submitted late and/or required major documentation changes 1 = 10-11 billings submitted late and/or required major documentation changes 0 = All billings late and/or incorrect requiring major changes & adjustments

k. Cost Effectiveness of Program

	Amount	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Cost per successful exit and stayers for PSH	n/a	5	1	5	5%	5 = Under $9,169 4= $9,169 - $9,738.99 3 = $9,739 - $12,531.99 2 = $12,532 - $17,328.99 1 = Over $17,329
	$ -					

TOTALS

	Points per Category	Percentage of Total Points per Category
Score Excluding Bonus (PSH programs)	100.00	100%
Bonus Score (PSH programs)	10.00	100%
Total Score (PSH programs)	110.00	100%

Project Response to Performance Outcomes on Ranking Tool

Name of Person Reviewing Outcomes:

Date of Review:

Did the program receive maximun or near maximun points in all the Performance Measures? **Yes** **No**

The project may comment on their performance below by category. Be brief and concise.

1. Comments on Performance

Performance	Explanation/Comments
a. Unit Utilization	
b. Housing Performance	
c1. Income	
c2. Employment	
c3. Health Insurance	
c4. Non-Cash Benefits	
d.Move in Date/ Length of Time	
e. Project Serving Hard to Serve Clients at Entry	**This category cannot be increased by reviewers or explained by project since all projects receive referrals from Coordinated Entry. This is scored purely on the data reflected HMIS on client entry information.**
f. Recidivism	
g. Data Quality: Elements	
h. Data Quality Timliness	
i. Monitoring + Housing First	
j. Fiscal	
k. Cost Effectiveness	

2. Further information about this program that may assist the evaluator to understand the challenges or the high performance of your program.

Allegheny County CoC HUD Monitoring Scorecard

Provider:

Program Name: PSH
                                    Project Type:

Number of files Reviewed:
                                    Date:

Number of UNIT INSPECTIONS:

Category of Review	Number of Files Passing Review	Percentage	Score	Rubric for scoring:
Completed Program Agreement: # of Files where Program Agreement is signed and dated by client		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Homeless Verification: Number of files where Third party or self-certification is included.		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Disability Verification (PSH Only): # of files where there is a HUD approved disability verification letter (SSI).		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Goal/Service Plan: Within first 30 days, reviewed at least quarterly ***Reviewed at least Quarterly for RRH and Annually for PSH***		#DIV/0!		100% = 2 points 75% to 99 % = 1.5 50% to 74 % = 1 25% to 49% = .5 0 to 24% = 0%
Consistent Case Notes: # of files where Provider documents monthly contacts with client(s) in case notes.		#DIV/0!		100% = 2 points 75% to 99 % = 1.5 50% to 74 % = 1 25% to 49% = .5 0 to 24% = 0%
Income Verification & Calculation: # of files containing both income verification and a rent calculation worksheet and calculations include all sources of income.		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Habitability Standards: # of Units passing Habitability Standards/ Findings from Monitors during annual Housing Quality Standards inspections.		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Involuntary Terminations: # of Submitted termination files as a proportion terminations according to HMIS.	Submitted: HMIS:	#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
TOTAL/Percentage of Points		0%	0	

Allegheny County Continuum of Care Evaluation
2024 Renewal Application Project
Fiscal Scorecard

Agency:	xxxxxx	
Project Name:	xxxxxx	
Project Type	xxxxxx	

Contract Executed Amount		
Contract Finalized Amount under HUD 2023		
Amount Invoiced for January - December 2023		
PSH = Adult Stayers plus successful outcomes		0
Actual Expenditures Cost/Successful Outcome	#DIV/0!	
Amount of Funds Returned under HUD 2022		
Percentage of Grant Returned	#DIV/0!	

Timeliness of Billing	On time?	Late?
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total	**0**	**0**

Allegheny County Continuum of Care Evaluation
2024 Renewal Application Project
Performance Outcomes

Agency:	**Chartiers**		
Project Name:	**Atlas**		
Evaluation Data Review Period:	**1/1/2023**	**to**	**12/31/2023**
Total HUD 2023 Grant Award:	**$193,034**	Successful Exits to PH	1
Type of Program:	**Permanent Supportive Housing**	Total Project Start Records	26

Housing Programs: No. of Units	15	No. of Beds	15
Subpopulation Target A Served:		Subpopulation Target B Served:	

Summary of Persons Served during Evaluation Period:

Households without Children		Households with Children	
Number of Households without Children	**41**	Number of Households with Children	**0**
Adults	44	Adults	0
		Children	0

Total Households Served : (Number of Households without Children / Number of Households with Children)
Total Persons Served: (Adults)

Leavers		Stayers	
Leavers	2	Stayers	42
Exiting Households	2	Households Staying	39
Exiting	2	Staying	42

Total Persons: (Leavers / Stayers)
Households: (Exiting Households / Households Staying)
Total Adults: (Exiting / Staying)

All Performance Measures are generated from HMIS for the purpose of reviewing and ranking 2023 renewal projects. The tool was developed by the Continuum of Care Analysis and Planning Committee and approved by the Homeless Advisory Board to be utilized for the HUD CoC on (date).

a. Unit Utilization

	Average number of households in units throughout the year	%	Individual Points	Weighted Points	for Category	Total Points	
Average Utilization of Units	19.5	130.00%	5	3	15	16%	5 = 95.4% and above 4 = 88.0 - 95.3% 3 = 75.40 - 87.9% 2 = 66.8 - 75.3% 1 = 0 - 66.7%

b. Housing Performance

	Specific Measure by Program Type	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
PSH: Consumers remaining in PSH	42	100%	5	1	5	5%	5 = 100% 4 = N/A 3 = N/A 2 = N/A 1 = N/A
PSH: Consumers exiting to any HUD-defined PH option	1	100%	5	2	10	11%	5 = 100% 4 = 89.70 - 99.99% 3 = 62.09 - 89.69% 2 = 17.14 - 62.08% 1 = 0 - 17.13%

c. PSH Total Income, Health Insurance & Non Cash Benefits (Leavers and Stayers)

	Specific Outcome Measure	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
1. <u>ADULT</u> consumers who maintain or increase Total income from all sources	4/17 Stayers + 2/2 Leavers	31.58%	2	1			5 = 66.67% and Above 4 = 57.84 - 66.66% 3 = 48.00 - 57.83% 2 = 30.91 - 47.99% 1 = 0 - 30.90%
2. <u>ADULT & CHILD</u> consumers who have health insurance	17/17 Stayers + 2/2 Leavers	100%	5	1	**12**	**13%**	5 = 98.61% and Above 4 = 95.06 - 98.60% 3 = 89.87 - 95.05% 2 = 84.87 - 89.86% 1 = 0 - 84.86%
3. <u>ADULT</u> consumers who maintain or increase non-cash benefits	17/17 Stayers + 2/2 Leavers	100%	5	1			5 = 96.00% and Above 4 = 86.57 - 95.99% 3 = 78.24 - 86.56% 2 = 67.20 - 78.23% 1 = 0 - 67.19%

d.PSH Length of Time (Move in)

	Specific Measure by Program Type	% of Total Served	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Average Length of time from program enrollment to move in date for Stayers and Leavers. (This measure is for only persons moving into program during 2023)	31 days	N/A	3	1	3	3%	5 = 24 Days and Under 4 = 25 - 30 Days 3 = 31 - 153 Days 2 = 154 - 348 Days 1 = 349 Days and Above

e. Clients with multiple barriers

	Participants	%	Individual Points	Weighted Points	for Category	Total Points	
Participants with 2 or more disabilities at entry	34	77%	4	0.5			5 = 84.07% and Above 4 = 62.19 - 84.06% 3 = 54.54 - 62.18% 2 = 37.80 - 54.53% 1 = 0 - 37.79%
Adults with zero income at entry	26	59%	4	0.5			5 = 64.07% and Above 4 = 55.23 - 64.06% 3 = 47.42 - 55.22% 2 = 41.89 - 47.41% 1 = 0 - 41.88%
All Persons living in places not meant for human habitation prior to entry	30	68%	4	0.5	8.5	100%	5 = 74.11% and Above 4 = 47.56 - 74.10% 3 = 35.51 - 47.55% 2 = 23.26 - 35.50% 1 = 0 - 23.25%
All Chronic Homeless at entry	40	91%	5	0.5			5 = 78.67% and Above 4 = 65.99 - 78.66% 3 = 34.70 - 65.98% 2 = 19.03 - 34.69% 1 = 0 - 19.02%

f. Returns to homelessness

	Specific Outcome by Program	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Consumers exiting from a program to PH destination but return to homeless system within 6 months	0	0%	5.00	1	5	5%	4 = n/a 3 = n/a 2 = n/a 1 = above 0

g. Data Quality

	Number of HMIS Records with Errors as Defined by HUD	%	Individual Points	Weighted Points	for Category	Total Points	Point Spread
Program had no data quality missing values							
Data Quality: Errors							5 = 15 /15 fields have less than 5% missing data
Name	0	0%					4.5 = 14/15 fields have less than 5% missing data
Social Security Number	0	0%					
Date of Birth	0	0%					4 = 13 /15 fields have less than 5% missing data
Race	0	0%					3.5 = 12/15 fields have less than 5% missing data
Ethnicity	0	0%					
Gender	0	0%					3 = 11 /15 fields have less than 5% missing data
Veteran Status (at entry) ADULT	6	14%	4.5	1	4.5	5%	2.5 = 9-10/15 fields have less than 5% missing data
Relationship to Head of Household	0	0%					2= 7-8 /15 fields have less than 5% missing data
Enrollment CoC	0	0%					1.5 = 5-6/15 fields have less than 5% missing data
Disabling Condition	0	0%					
Destination at Exit	0	0%					1= 3-4/15 fields have less than 5% missing data
Income and Sources at Entry	0	0%					0.5 =1- 2/15 fields have less than 5% missing data
Income and Sources at Annual	0	0%					
Income and Sources at Exits	0	0%					0 = 0/15fields have less than 5% missing data
Chronic Homelessness (missing)	0	0%					

h. Data Quality: Timeliness

	PSH/RRH Number of Records 3 days or less	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Data Quality: PSH Entries	25	96.15%	3	1	3	3%	5 = 100% 4 = N/A 3 = 96.15-99.99% 2 = 73.91-96.14% 1 = 0 - 73.90%
Data Quality: PSH Exits	2	100%	5	1	5	5%	5 = 100% 4 = n/a 3 = n/a 2 = 86.07-99.99% 1 = 0 - 86.06%

i. Monitoring: PSH

	Score From Monitoring Tool	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Monitoring Scorecard tab completed (for 2023 monitoring season)	9.5	95%	9.5	1	9.5	10%	See Monitoring Scorecard for score details.

j. Fiscal

	Amount / Number	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Grant expended all funding (Amount Returned in last HUD grant)	$ -	0.00%	5	1.5	15	16%	5 = 0-3% return of funds 4 = 4-7% return of funds 3 = 8-12% return of funds 2 = 13-18% return of funds
Billing reports are submitted timely during 2023	12	100%	5	1.5			5 = All billings submitted correctly w/ support documentation & on time or one billing submitted late. 4 = 2-3 billings submitted late and/or

k. Cost Effectiveness of Program

	Amount		Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Cost per successful exit and stayers for PSH		n/a	5	1	5	5%	5 = Under $9,169 4= $9,169 - $9,738.99 3 = $9,739 - $12,531.99 2 = $12,532 - $17,328.99 1 = Over $17,329
	$7,890.91						

TOTALS

	Points per Category	Percentage of Total Points per Category
Score Excluding Bonus (PSH programs)	92.00	92%
Bonus Score (PSH programs)	8.50	85%
Total Score (PSH programs)	100.50	91.4%

Project Response to Performance Outcomes on Ranking Tool

Name of Person Reviewing Outcomes:

Date of Review:

Did the program receive maximun or near maximun points in all the Performance Measures?   Yes   No

The project may comment on their performance below by category. Be brief and concise.

1. Comments on Performance

Performance	Explanation/Comments
a. Unit Utilization	
b. Housing Performance	
c1. Income	
c2. Employment	
c3. Health Insurance	
c4. Non-Cash Benefits	
d.Move in Date/ Length of Time	
e. Project Serving Hard to Serve Clients at Entry	**This category cannot be increased by reviewers or explained by project since all projects receive referrals from Coordinated Entry. This is scored purely on the data reflected HMIS on client entry information.**
f. Recidivism	
g. Data Quality: Elements	
h. Data Quality Timliness	
i. Monitoring + Housing First	
j. Fiscal	
k. Cost Effectiveness	

2. Further information about this program that may assist the evaluator to understand the challenges or the high performance of your program.

Allegheny County CoC HUD Monitoring Scorecard

Provider: Chartiers Center
Program Name: Atlas   **Project Type:** PSH
Number of files Reviewed: 5
Number of UNIT INSPECTIONS: 1

Category of Review	Number of Files Passing Review	Percentage	Score	Rubric for scoring:
Completed Program Agreement: # of Files where Program Agreement is signed and dated by client	5	100%	1	100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Homeless Verification: Number of files where Third party or self-certification is included.	5	100%	1	100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Disability Verification (PSH Only): # of files where there is a HUD approved disability verification letter (SSI).	5	100%	1	100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Goal/Service Plan: Within first 30 days, reviewed at least quarterly ***Reviewed at least Quarterly for RRH and Annually for PSH***	5	100%	2	100% = 2 points 75% to 99 % = 1.5 50% to 74 % = 1 25% to 49% = .5 0 to 24% = 0%
Consistent Case Notes: # of files where Provider documents monthly contacts with client(s) in case notes.	4	80%	1.5	100% = 2 points 75% to 99 % = 1.5 50% to 74 % = 1 25% to 49% = .5 0 to 24% = 0%
Income Verification & Calculation: # of files containing both income verification and a rent calculation worksheet and calculations include all sources of income.	5	100%	1	100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Habitability Standards: # of **Units passing Habitability Standards/** Findings from Monitors during annual Housing Quality Standards inspections.	1	100%	1	100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Involuntary Terminations: # of Submitted termination files as a proportion terminations according to HMIS.	Submitted: n/a HMIS: n/a	n/a	1	100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
TOTAL/Percentage of Points		95%	9.5	

Allegheny County Continuum of Care Evaluation
2024 Renewal Application Project
Fiscal Scorecard

Agency:	Chartiers
Project Name:	Atlas
Project Type	PSH

Contract Executed Amount	$	173,558	*Original Awarded By HUD*		
Contract Finalized Amount under HUD 2023	$	193,034	*Agency Total + County Admin on HUD 27*	Jan23-Jun 23	Jul23-Dec 23
Amount Invoiced for January - December 2023	$	339,309		101,036	238,273
PSH = Adult Stayers plus successful outcomes		43			
Actual Expenditures Cost/Successful Outcome	$	7,890.91			
Amount of Funds Returned under HUD 2023	$	-			
Percentage of Grant Returned:		0.00%			

Timeliness of Billing	On time?	Late?
January	1	
February	1	
March	1	
April	1	
May	1	
June	1	
July	1	
August	1	
September	1	
October	1	
November	1	
December	1	
Total	**12**	**0**

Notification of Projects Rejected-Reduced
PA-600

PA 600 rejected 5 applications for new projects through the competitive procurement processes of the CoC's lead agency, DHS. These notifications were sent on October 10, 2024

From: DHSProposals
Sent: Thursday, October 10, 2024 3:40 PM
To: grants@sisterspgh.org; ciora.thomas@sisterspgh.org
Subject: Please Read: Allegheny County DHS RFP Decline

Good afternoon,

Thank you for your submission for the Allegheny County Department of Human Services (DHS) RFP for a New Continuum of Care (CoC) Program for Individuals and Families Experiencing Homelessness: Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH) and Joint Transitional Housing/Rapid Re-Housing (TH/RRH).

Each submission was reviewed by an evaluation committee that included representatives from across DHS and external stakeholders. The evaluation committee reviewed all responses extensively and based their recommendation for qualification on which proposer could best meet the goals and objectives listed in the RFP.

We regret to inform you that your submission has not been selected. If you are interested in feedback regarding your submission, please let us know and we can arrange a phone call. We thank you for your interest and appreciate the time you spent preparing your submission. We encourage you to continue to review DHS's website for future solicitations that may interest you.

**Disclaimer: This notice was sent through Bonfire as well. Please respond to this email to indicate your interest in receiving feedback. You cannot respond to the message sent through Bonfire.*

Best regards,

DHS Procurement

Additionally, PA 600 eliminated 1, and reduced 3 renewal projects as a result of the performance based, data driven review and ranking project. Initial notice of reductions went out on August 20, 2024, after which the CoC worked closely with the projects to plan for their reduce allocation requests. The eliminated project is administered by the CoC lead agency, DHS, so notification was not required.

HUD Application/Ranking

Eamigh, Rob
To De'netta Benjamin-Miller

↩ Reply   ↞ Reply All   → Forward

Tue 8/20/2024 2:51 PM

Hi De'netta,
Hope all is well.

I am reaching out to inform you that your Moms II program is ranked at or near the bottom of Tier 2 for this upcoming HUD application. We would like to meet to discuss the future of the program and options.

Please provide me with some available time windows for yourself and any staff you want included. I will then coordinate with our folks and set the meeting up in Teams.

Thank you
Rob

Rob Eamigh
Fiscal Administrator, Housing and Homeless Services
Allegheny County Department of Human Services
One Smithfield Street, 2nd Floor
Pittsburgh, PA 15222
Ph# (412) 350-3063
Fax# (412) 350 4986

Final confirmation of the reductions as sent on October 15, 2024.

Official CoC Ranking for 2024 HUD Application

Eamigh, Rob

To Horn, Abigail; Halfhill, Andy; Scherer, Hilary; Bustos, Andrea; Keenan, Chuck

📄 Allegheny County CoC_HUD CoC Project Lists_FY2024 Competition .pdf 304 KB ∨

Good afternoon CoC Providers,

The Homeless Advisory Board (HAB) of the Allegheny County CoC has approved the final project lists for the Allegheny County CoC's application to HUD in response to the FY 2024 and FY 2025 Continuum of Care Competition and the Renewal or Replacement of Youth Homeless Demonstration Program. Through the CoC's annual review and ranking processes, the following projects will be included in our CoC's HUD funding application for FY25-26. Attached is the full ranking with a complete list of the projects, scores, and funding amount being applied for. As you are aware, your project is being included in the application but was recommended for reduced reallocation. This email confirms the finalization of that reduction.

Organization	Project(s)
ACTION Housing	Housing Plus II
	MyPlace PSH
	MyPlace RRH
Allegheny County CoC/DHS	Allegheny Link
	Allegheny Link Expansion
	HMIS
	HSSCY
Allegheny Valley Association of Churches	Hospitality Homes I
Alle-Kiski Area Hope Center	DV Unified Project
Allies for Health and Well Being	Choice I
Auberle	At Home
	HOPE
	Youth RRH
Bethlehem Haven	Haven Homes
	Haven Housing Dedicated Plus
Chartiers Center	Atlas PSH
	Hestia Project
	Athena
Center that Cares	Youth RRH
Community Human Services	Families United
	Work Toward Sustainability from Crisis
	Housing Health Partnership
Familylinks	Community Housing Program
	Community Housing Program Expansion
Gaudenzia	Village Phase I
Goodwill	Northside Common Ministries PSH
	Harbor II RRH
	Good Start (includes recent expansion)
Mercy Life Center	A River to Home
	Path to New Life
Sister's Place	Sunrise
Sojourner Moms	Moms II
The Salvation Army	LIGHT
UPMC Presbyterian Shadyside	Flex 50
	Flex 51
	Neighborhood Living Program (includes recent expansion)
	Soteria
Veterans Leadership Program	Victory
	Constitution RRH
YWCA	YW Bridges RRH

Please let me know if you have any questions.

Notification of Projects Accepted
PA-600

PA 600 accepted 3 applications for new projects through the competitive procurement processes of the CoC's lead agency, DHS. These notifications were sent on September 25, 2024

Final confirmation of all renewal and new projects accepted sent on October 15, 2024.

Official CoC Ranking for 2024 HUD application

Earnigh, Rob
To
Cc Horn, Abigail; Bustos, Andrea; Halfhill, Andy; Keenan, Chuck; Scherer, Hilary

Tue 10/15/2024 1:48 PM

Allegheny County CoC_HUD CoC Project Lists_FY2024 Competition .pdf 304 KB

Good afternoon CoC Providers,
The Homeless Advisory Board (HAB) of the Allegheny County CoC has approved the final project lists for the Allegheny County CoC's application to HUD in response to the FY 2024 and FY 2025 Continuum of Care Competition and the Renewal or Replacement of Youth Homeless Demonstration Program. Through the CoC's annual review and ranking processes, the following projects will be included in our CoC's HUD funding application for FY25-26. *Attached is the full ranking with a complete list of the projects, scores, and funding amount being applied for.

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	Allegheny Link Expansion
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	HSSCY
Allegheny Valley Association of Churches	Hospitality Homes I
Alle-Kiski Area Hope Center	DV Unified Project
Allies for Health and Well Being	Choice I
Auberle	At Home
	HOPE
	Youth RRH
Bethlehem Haven	Haven Homes
	Haven Housing Dedicated Plus
Chartiers Center	Atlas PSH
	Hestia Project
	Athena
Center that Cares	Youth RRH
Community Human Services	Families United
	Work Toward Sustainability from Crisis
	Housing Health Partnership
Familylinks	Community Housing Program
	Community Housing Program Expansion
Gaudenzia	Village Phase I
Goodwill	Northside Common Ministries PSH
	Herbor II RRH
	Good Start (includes recent expansion)
Mercy Life Center	A River to Home
	Path to New Life
Sister's Place	Sunrise
Sojourner Moms	Moms II
The Salvation Army	LIGHT
UPMC Presbyterian Shadyside	Flex 50
	Flex 51
	Neighborhood Living Program (includes recent expansion)
	Soteria
Veterans Leadership Program	Victory
	Constitution RRH
YWCA	YW Bridges RRH

Please let me know if you have any questions.

Allegheny County Continuum of Care (CoC)
2024 HUD CoC Program Competition
Project Listings

Renewal Project Listing (Ranked)

Results	Ranking	Organization	Project	Project Type	Household Type(s) Served	Site Type	# of Units	Score	2024 HUD CoC Request	Reallocated Funds	Running Total
Accepted	1	Alle-Kiski Area Hope Center	DV UP / Safe at Home	RRH	Both	Scattered Site	82	101%	$ 1,507,141.00		$ 1,507,141.00
Accepted	2	Veterans Leadership Program	Constitution RRH	RRH	Households without Children	Scattered Site	18	93%	$ 255,056.00		$ 1,762,197.00
Accepted	3	Chartiers Center	Atlas PSH	PSH	Households without Children	Scattered Site	46	91%	$ 863,401.00		$ 2,625,598.00
Accepted	4	Auberle	At Home	RRH	Households without Children	Scattered Site	10	86%	$ 150,153.00		$ 2,775,751.00
Accepted	5	Goodwill	Northside Common Ministry (Goodwill Supportive Housing)	PSH	Households without Children	Scattered Site	11	84%	$ 149,556.00		$ 2,925,307.00
Accepted	6	UPMC Presbyterian Shadyside	Flex 50	PSH	Households with Children	Scattered Site	113	83%	$ 1,837,339.00		$ 4,762,646.00
Accepted	7	Allies for Health and Well Being	Choice I	PSH	Both	Scattered Site	39	82%	$ 531,935.00		$ 5,294,581.00
Accepted	8	Familylinks	Community Housing Program	PSH	Both	Scattered Site	12	79%	$ 157,992.00		$ 5,452,573.00
Accepted	9	YWCA	YW Bridges RRH	PSH	Both	Scattered Site	40	78%	$ 754,643.00		$ 6,207,216.00
Accepted	10	Goodwill	Good Start	RRH	Households with Children	Scattered Site	32	78%	$ 599,907.00		$ 6,807,123.00
Accepted	11	Chartiers Center	Hestia Project	PSH	Both	Scattered Site	99	77%	$ 1,139,350.00		$ 7,946,473.00
Accepted	12	UPMC Presbyterian Shadyside	NLP	PSH	Both	Scattered Site	161	77%	$ 2,295,388.00		$ 10,241,861.00
Accepted	13	Goodwill	Harbor II RRH	RRH	Households without Children	Scattered Site	45	75%	$ 662,259.00		$ 10,904,120.00
Accepted	14	ACTION	Housing Plus II	PSH	Households without Children	Facility-based	11	75%	$ 215,156.00		$ 11,119,276.00
Accepted	15	UPMC Presbyterian Shadyside	Flex 51	PSH	Households without Children	Combination	147	75%	$ 2,441,368.00		$ 13,560,644.00
Accepted	16	Veterans Leadership Program	Victory	PSH	Both	Scattered Site	48	74%	$ 799,796.00		$ 14,360,440.00
Accepted	17	UPMC Presbyterian Shadyside	Soteria	RRH	Both	Scattered Site	17	74%	$ 268,107.00		$ 14,628,547.00
Accepted	18	Mercy Life Center	Path to New Life	PSH	Both	Scattered Site	74	73%	$ 718,399.00		$ 15,346,946.00
Accepted	19	Bethlehem Haven	Haven Housing Dedicated Plus	PSH	Both	Scattered Site	20	73%	$ 320,056.00		$ 15,667,002.00
Accepted	20	Allegheny Valley Association of Churches	Hospitality Homes I	PSH	Both	Scattered Site	20	73%	$ 357,744.00		$ 16,024,746.00
Accepted	21	ACTION	MyPlace PSH	PSH	Both	Scattered Site	5	72%	$ 75,076.00		$ 16,099,822.00
Accepted	22	Gaudenzia	Village Phase I	PSH	Both	Scattered Site	16	72%	$ 281,322.00		$ 16,381,144.00
Accepted	23	ACTION	MyPlace RRH	RRH	Both	Scattered Site	65	68%	$ 992,543.00		$ 17,373,687.00
Accepted	24	Bethlehem Haven	Haven Homes	PSH	Households without Children	Facility-based	16	67%	$ 294,265.00		$ 17,667,952.00
Accepted	25	Mercy Life Center	A River to Home	PSH	Households without Children	Scattered Site	41	67%	$ 615,625.00		$ 18,283,577.00
Accepted	26	Sisters Place	Sunrise	PSH	Households with Children	Scattered Site	25	66%	$ 526,734.00		$ 18,810,311.00
Accepted	27	ACDHS	Allegheny Link Expansion	SSO-CE	N/A	N/A	N/A	N/A	$ 512,582.00		$ 19,322,893.00
Accepted	28	ACDHS	HMIS	HMIS	N/A	N/A	N/A	N/A	$ 198,942.00		$ 19,521,835.00
Reduced Reallocated	29	Community Human Services	Work Towards Sustainability from Crisis	PSH	Households without Children	Combination	40	64%	$ 461,700.00	$ (155,518.00)	$ 19,983,535.00
Accepted	30	ACDHS	Allegheny Link	SSO-CE	N/A	N/A	N/A	N/A	$ 68,761.00		$ 20,052,296.00
Reduced Reallocated	31	Community Human Services	Families United	PSH	Both	Scattered Site	37	63%	$ 791,435.00	$ (105,309.00)	$ 20,843,731.00
Reduced Reallocated	32	Sojourner Moms	Moms II	PSH	Both	Facility-based	26	59%	$ 646,000.00	$ (301,041.00)	$ 21,489,731.00
Fully Reallocated	N/A	ACDHS	HMIS Expansion	HMIS	N/A	N/A	N/A	N/A	$ -	$ (152,250.00)	$ 21,489,731.00

New Project Listing (Ranked)

Results	Ranking	Organization	Project	Project Type	Household Type(s) Served	Site Type	# of Units	Score	2024 HUD CoC Request	Reallocated Funds	Running Total
Accepted	33	NEW (Reallocation) Chartiers Center	Athena	PSH	Both	Scattered Site	33	(RFP Review)	$ 714,118.00	$ 714,118.00	$ 22,203,849.00
Accepted	34	NEW (Bonus) The Salvation Army	LIGHT	RRH	Both	Scattered Site	9	(RFP Review)	$ 157,155.00		$ 22,361,004.00
Accepted	35	NEW (Bonus) Familylinks	Community Housing Program Expansion	PSH	Both	Scattered Site	12	N/A	$ 210,756.00		$ 22,571,760.00
Accepted	36	NEW (Bonus) CHS	PSH New Project (Name Pending)	PSH	Households without Children	Scattered Site	60	(RFP Review)	$ 1,256,849.00		$ 23,828,609.00
Rejected	N/A	East End Cooperative Ministry		RRH	Both	Scattered Site	34	(RFP Review)	$ -		$ 23,828,609.00
Rejected	N/A	Hugh Lane Wellness Foundation		RRH	Both	Scattered Site	15	(RFP Review)	$ -		$ 23,828,609.00
Rejected	N/A	Pittsburgh Hispanic Development Corporation		RRH	Both	Scattered Site	27	(RFP Review)	$ -		$ 23,828,609.00
Rejected	N/A	SisTers PGH		Joint TH/RRH	Households without Children	Combination	15	(RFP Review)	$ -		$ 23,828,609.00
Rejected	N/A	The King's Community Center		Joint TH/RRH	Households without Children	Combination	16	(RFP Review)	$ -		$ 23,828,609.00

YHDP Renewal Projects (Not Ranked)

Results	Ranking	Organization	Project	Project Type	Household Type(s) Served	Housing Sites	UNITS	Score	2024 HUD CoC Request	Reallocated Funds	Running Total
N/A	accepted	Allegheny County Department of Human Services	Homelessness Services & Support Coordinators for Youth	SSO	Youth	N/A	N/A	N/A	$ 345,506.00		$ 24,174,115.00
N/A	accepted	Auberle and Center That CARES	Youth Rapid Re-Housing	RRH	Youth	Scattered Site	55	N/A	$ 939,482.00		$ 25,113,597.00
N/A	accepted	Auberle	HOPE	SSO	Youth	N/A	N/A	N/A	$ 479,160.00		$ 25,592,757.00

YHDP Replacement Projects (Not Ranked)

Results	Ranking	Agency	Project	Project Type	Household Type(s) Served	Housing Sites	UNITS	Score	2024 HUD CoC Request	Reallocated Funds	Running Total
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

CoC Planning (Not Ranked)

Results	Ranking	Agency	Project	Project Type	Household Type(s) Served	Housing Sites	UNITS	Score	2024 HUD CoC Request	Reallocated Funds	Running Total
N/A	accepted	Allegheny County Department of Human Services	CoC Planning Grant	N/A	N/A	N/A	N/A	N/A	$ 1,500,000.00		$ 27,092,757.00

UFA (Not Ranked)

Results	Ranking	Agency	Project	Project Type	Household Type(s) Served	Housing Sites	UNITS	Score	2024 HUD CoC Request	Reallocated Funds	Running Total
N/A	accepted	Allegheny County Department of Human Services	UFA Grant	N/A	N/A	N/A	N/A	N/A	$ 993,512.00		$ 28,086,269.00

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www.salvationarmy-wpa.org

October 2, 2024

Allegheny County Department of Human Services
One Smithfield St., Ste 400
Pittsburgh, PA 15222

Dear Erin Dalton,

The Salvation Army Western Pennsylvania Division (TSA WPA) is pleased to provide leverage services for DHS's application for the United States Department of Housing and Urban Development (HUD) Notice of Funding Opportunity (NOFO).

TSA WPA has been awarded an OVC FY24 Anti-Trafficking Housing Assistance Program grant. This grant will run from October 1, 2024, to September 30, 2027. Through this grant, TSA WPA and a subrecipient will expand housing resources for victims of human trafficking in western Pennsylvania with an enhanced focus on labor trafficking victims and Latino trafficking victims. The project will support 16 units of short-term housing assistance for 6 to 24 months via program-rented units and landlord/tenant partnerships. Staff will provide dedicated housing navigation services to identify landlords, educate stakeholders about housing protections for victims, and develop relationships with housing professionals.

Victims have many barriers to obtaining stable housing including the overall lack of affordable housing units, the increasing costs of rent, barriers to obtaining income quickly, and the lack of a continuum of housing options. TSA WPA offers the only low-barrier, scattered site, housing program for trafficking victims in western Pennsylvania, including Allegheny County. Connecting this program to the CoC will improve victims' access to needed housing resources. The Rapid Rehousing units included in DHS's application for the HUD NOFO will serve victims referred through the Continuum of Care, expanding the total program capacity to 25 units.

Sincerely,

Lauren Fair, JD
Divisional Social Services Director
Lauren.fair@use.salvationarmy.org
412-596-5632

UPMC HEALTH PLAN

May15, 2024

Brendan Harris
UPMC Health Plan
600 Grant Street
Pittsburgh, PA 15219

Allegheny County Department of Human Services
One Smithfield Street
Pittsburgh, PA 15219

Dear Evaluation Committee,

UPMC Health Plan is proud to support Community Human Services' (CHS) application for funding through the Allegheny County Continuum of Care for a new permanent supportive housing program.

The mission of the UPMC Health Plan is to improve the health and well-being of our members and the greater community. UPMC Health Plan is active in many community forums in and around the Pittsburgh region and has made active investments of financial and human resources to address housing and social needs. As part of an integrated health care delivery and financing system, UPMC Health Plan is committed to providing its members with better health, more financial security, and the peace of mind they deserve. UPMC Health Plan partners with UPMC and community network providers and other community-based organizations (CBOs) to produce a combination of knowledge and expertise that provides the highest quality care at the most affordable price. The UPMC Insurance Services Division offers a full range of group health insurance, Medicare, Medicare Special Needs, CHIP, Medical Assistance, behavioral health, employee assistance, and workers' compensation products and services to over 4.4 million members.

UPMC Health Plan and CHS have collaborated for over a decade on our Cultivating Health for Success (CHFS) evidence-based model for serving people experiencing homelessness. CHFS braids public housing subsidies with UPMC Health Plan-funded supportive services at CHS, move-in and member emergency funding, and mobile health services via our Community Team.

A 2023 evaluation of CHFS found statistically significant lower medical expenses among participants in the 12 months post-housing compared to the 12 months prior to housing. Members had a median reduction of $902 per member per month and utilization of Medicaid behavioral health fell an additional $280 PMPM. Satisfaction is high (averaging 6.05/7) and there is an average 15 percent increase in quality-of-life surveys from move-in to graduation. In total, we have housed 205 homeless members housed in 3 counties, most of which with CHS in Allegheny County.

We are pleased to support this application with a cash match of $157,000 annually to support individuals enrolled in the program and encourage collaboration between CHS and the healthcare providers that participants interact with. UPMC Health Plan support will be used to support its members health and housing needs. Additionally, we are able to provide annual in-kind resources of staffing, participant benefits, and collaborative support in the amount of $112,000 and one-time move-in allowances for UPMC Health Plan members of $2500.

UPMC Health Plan

It's been proven that collaboration between housing and healthcare greatly reduces reliance on unplanned care, emergency department services, and inpatient care. We wholeheartedly endorse CHS' application for this funding and urge the Department of Human Services to support their efforts. By investing in this permanent supportive housing program, we invest in the well-being and resilience of our community. Thank you kindly for your consideration of this application. We hope you will join us in support of this vital endeavor.

Sincerely,

Brendan J. Harris
President, UPMC *for You* & State Programs