

## Before Starting the CoC Application

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

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

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

1. The FY 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2022 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2022 CoC Program Competition on behalf of your CoC.

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

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

## 1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

**1A-1. CoC Name and Number:** WV-503 - Charleston/Kanawha, Putnam, Boone, Clay Counties CoC

**1A-2. Collaborative Applicant Name:** Kanawha Valley Collective, Inc.

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** Kanawha Valley Collective, Inc.

## 1B. Coordination and Engagement–Inclusive Structure and Participation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>1B-1.</b>	<b>Inclusive Structure and Participation–Participation in Coordinated Entry.</b>	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.	

In the chart below for the period from May 1, 2021 to April 30, 2022:	
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:

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

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

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

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

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

(limit 2,500 characters)

1.KVC constantly solicits new members. Personal invitations are extended to individuals/agencies when KVC members interacts with them during work functions, meetings, and social venues. Meeting information is shared on social media as well as on the United Way’s Community Calendar. Community outreach events are held several times through the year and are opportunities to engage new individuals/agencies to become part of the COC. Invitations to solicit new members include postings at local agencies, discussions at community meetings, postings at member agencies, and communications at events such as the WV Housing Conference, PIT media articles, and local civic group presentations. KVC also uses social media to reach the community and to solicit new members. The KVC uses Facebook, website, Twitter, etc. to reach individuals and groups. The KVC also extends a specific invitation to include those who are homeless and/or formerly homeless individuals. As a result, several member agencies (Covenant House, YWCA of Charleston, and Pretera Center) includes homeless/formerly homeless on their Boards. KVC develops flyers which lists all upcoming board and general membership meetings. This flyer is placed at social service agencies along with other areas frequently visited by homeless/formerly homeless individuals. 2. All CoC communication is available in accessible electronic formats. Public meetings & focus groups are held in accessible spaces. A sign language interpreter is employed by a CoC member program and is available to provide interpretation. KVC has completely revamped its website which now enables all individuals to access information. 3. Organizations that serve culturally specific communities receive a special invitation from the KVC. These organizations include BIPOC led faith based organizations, agencies that serve individuals who are LGBTQ+, and individuals with disabilities.

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

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

(limit 2,500 characters)

1.KVC meetings are open to the public who are welcome to attend and express their opinions. Quarterly membership meetings have diverse stakeholders and speakers which allow for communication on providing better services and making informed decisions. KVC ensures COC Committees and Board broadly reflect diversity and include homeless providers, healthcare providers, meal providers, city officials and community members. KVC members inform others about homelessness when they attend community meetings, and they are continuously inviting new members to join KVC. Any agency who has a question and/or issue on homelessness are referred to KVC for information and guidance. Social media is a great tool used by KVC Board to inform the public about homelessness as well as a way to generate opinions and conversations.

2. In 2019 the City of Charleston formed the Charleston Addiction Response Effort (CARE) team which is comprised of four full-time team members - CARE Director, Homeless Outreach Coordinator, Mental Health Coordinator and QRT Team Coordinator - that work diligently to get people housed and into treatment to create a better quality of life for those struggling. Additionally, CARE collects information through listening sessions, meetings with key stakeholders, aggregated overdose data, and research on best practices used across the country to inform a joint strategy for addressing substance use disorder and homeless in our city and the surrounding community. The analysis identifies gaps in services, expand and evaluates programs to conduct outreach with comprehensive resources for providers and those experiencing homelessness.

3. Local groups of citizens, business owners, city officials, and providers have had multiple meetings over the past few years to address homelessness. Through these meetings, KVC agencies have started a storage program for individuals experiencing homelessness, new showers and laundry services have started after existing services closed, new supportive services team has been funded, and low barrier cold weather shelters have been created. Additional services have been identified and members of the COC are working on a permanent seasonal low barrier shelter, low barrier non-congregate transitional housing, and expansion of outreach and centralized assessment teams.

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

(limit 2,500 characters)

1. KVC holds open competition for new/renewal projects each year. The public is notified when proposals are being sought via social media, email blasts, and meeting discussions. The LOI was released on 8/11/22 via KVC Facebook page, Twitter, KVC website, and KVC email lists. The LOI included links to the COC Competition Page and the NOFA. The COC Program competition is discussed year round at KVC Membership and Board meetings, both of which are open to the public, as well as at meetings non-KVC members attend so all are made aware of the upcoming grant cycle. All new/renewal applications are reviewed by the Prioritization Committee, and all that meet the following criteria are included in the competition process: agency capacity, eligible costs, eligible clients served. The KVC is open to receiving applications from organizations that have previously not received funding as long as the project meets the above listed criteria. 2. Potential project applicants must submit a LOI. KVC reviews the LOI to determine if the project meets the COC program requirements. If so, the applicant is invited to submit a complete project application. Information included are links to the Project Application, Exhibit One, Instructions, Contact Numbers, and due dates. 3. To determine whether a project application is included and addresses HUD's policy priorities and an unmet need, KVC uses objective, performance-based scoring criteria and selection priorities approved by the KVC Board. It also considers the project costs to serve and house an individual/family compared to other projects serving similar populations. These items help to determine if a project should be included and its ranking. KVC reallocates funds to new projects whenever reallocation will improve outcomes and reduce homelessness. 4. KVC meetings, committees & focus groups are held in handicap accessible spaces. A sign language interpreter is employed by a CoC-funded program. KVC has updated its website to be ADA compliant. The visually impaired are able to use it with the help of a special reader that scrolls over items and reads to the blind.

## 1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
  - 24 CFR part 578;
  - FY 2022 CoC Application Navigational Guide;
  - Section 3 Resources;
  - PHA Crosswalk; and
  - Frequently Asked Questions

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

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



18.	WV Department of Health and Human Resources	Yes
-----	---	-----

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

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

(limit 2,500 characters)

1. CoC staff works closely with the State ESG Grantee, the WV Community Advancement and Development Office (WVCAD), annually on the planning and allocation of ESG funding for providers located in the KVC. Each applicant for ESG funding must submit, to the CoC, a statement of their proposed ESG activities and answer specific questions regarding the alignment of the proposed activities with the CoC's initiatives of coordinated entry, prioritization, rapid rehousing, low barriers to entry, housing first, and rapid exits to permanent housing. Also, the CoC compiles a recommendation for each applicant that is included with the ESG application to WVCAD. This form certifies the applicant consulted with the CoC while designing their application, lists the CoC meetings each applicant agency attended, certifies involvement in the PIT, and allows for narrative by the CoC to describe why the agency does, or does not, have the support of the CoC.
2. The KVC Steering Committee evaluates the performance of ESG funded programs during monthly meetings utilizing APR and SPM data. The committee has established targets based upon system's prior performance, seeking to improve upon prior results. Areas needing improvements are addressed in that forum. The state ESG program coordinator is in regular communication with the KVC Executive Director, and the Director is a member of the KVC's Board of Directors. The ESG program performance is reported to the City of Charleston for use in their Consolidated Plan and is provided to WVCAD upon their request.
3. KVC provides updated Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the City of Charleston for their Consolidated Plan. This is the only HUD Consolidated Plan within the KVC's jurisdiction.
4. Whenever an update is needed for the City's Consolidated Plan, contact is made with the KVC to obtain the most up-to-date homeless information and data. The same City staff is involved with both the Consolidated Plan and the KVC so information is easily conveyed between the two.

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

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

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

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

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

1.	Youth Education Provider	No
2.	State Education Agency (SEA)	No
3.	Local Education Agency (LEA)	Yes
4.	School Districts	No

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

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

(limit 2,500 characters)

The KVC works in partnership with Homeless Facilitator/Liaison (HFL) to ensure each child/youth residing in COC shelters with their family has an opportunity to reach fullest potential. HFL is actively involved with shelters that house families with children and attends membership/BOD meetings to keep KVC abreast of any changes related to homeless students and their parents/guardians. DOE, thru McKinney-Vento, provides funding to Sojourner’s and others (Daymark, Turning Point, Children’s Home Society) to bridge educational gaps between school system & homeless youth. Sojourner’s works closely with HFL to ensure barriers to immediate enrollment in school and/or daycare are removed and transportation is provided. Sojourner’s staff have an excellent rapport with S/LEA. Presentations/trainings have been done together including Handle with Care Conference and Celebrating Connections Conference. Staff works closely with the school systems regarding academics and issues that prohibit a student from achieving their educational goals. Sojourner’s has a written agreement with Kanawha County Schools to provide a structured, year round program to include an After-School Program with the primary goals to remove barriers, strengthen the education of children and youth who are homeless, improve school attendance, prevent dropouts, and future and/or generational homelessness. HFL was a member of KVC BOD and attends regular meetings, which ensures KVC is kept abreast of changes that may affect population served as KVC works closely with schools the youth attend. Youth residing in the shelter are immediately connected into the system, to avoid any time lapse. Although the COC doesn’t have a formal partnership with the school district, the HFL serves as a link as they are actively involved in fulfilling the needs of the youth. Not only does the HFL attend meetings but also meets with stakeholders to determine the needs and locations of homeless youth.

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

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

(limit 2,500 characters)

The policies and procedures adopted and followed by the KVC are in accordance with LEA/Kanawha County Schools' guidelines which define the purpose of the McKinney-Vento Act, goals, provisions, and the eligibility of educational services to individuals and families who become homeless. The shelter's children's services staff works closely with their Homeless Facilitator to ensure that each parent residing in a homeless facility is fully aware of the educational services for which their child is eligible. The goal is to immediately enroll homeless children who are not in school, provide school choice, encourage parent involvement in enrollment decisions, ensure services are to be provided in a way that do not isolate or stigmatize, promote success and completion of school or High School Equivalency Test (HiSET), and support collaboration between districts and social service agencies serving homeless students. Information regarding the eligibility for educational services for parents of homeless children and youth is communicated by the shelter's children's services staff during initial intake, weekly program orientation, the bi-weekly house meeting, and the weekly individual meeting with the shelter's children's services staff and their case manager. and also thru the Centralized Assessment Team for anyone not going into a shelter. Each County in West Virginia has a Home Student Support and Well Being Coordinator. The Coordinator for Kanawha County is also involved with the KVC membership committee.

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

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

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

1C-5.	<b>Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaborating with Victim Service Providers.</b>	
	NOFO Section VII.B.1.e.	

	Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:
1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1. There are two organizations, Branches DV Shelter (Branches) and the YWCA of Charleston Resolve Family Abuse Program (Resolve), within the Kanawha Valley Collective's (KVC) footprint who provide domestic violence services to victims and survivors of domestic violence, dating violence, sexual assault, and stalking. Both Branches and Resolve are active members of the KVC. In addition, each of these organizations works closely with other victim service providers in their catchment area such as the two sexual assault service providers, local Prosecutor's offices and their victim's advocates, and law enforcement based victim advocates. Both Branches and Resolve are active members of the West Virginia Coalition Against Domestic Violence and many of the WVCADV programs are dual programs that serve both domestic violence and sexual assault victims and survivors. The collaboration between victim's service providers and other mainstream resources within the KVC is robust and ongoing. Branches and Resolve bring their expertise to the table in many different ways. They are active in decision making, training, and are hands-on partners with the Centralized Assessment Team.

2. Branches and Resolve provide advocacy and housing programs that are low-barrier and trauma competent and work closely with all members of the KVC to ensure that all programs understand what trauma-informed services look like and work to help other service providers become trauma competent and victim-centered. Both organization's staff are part of the membership of the KVC as well as serving as committee leadership. By having such an active part in the KVC and an open and reciprocal working relationship with other members around the table Branches and Resolve continue to share victim service best practices and emerging topics centering on housing, advocacy, and outcome based service provision. Branches and Resolve operate their housing programs with the Housing First philosophy, as do all the other members of the KVC and have found that those embracing Housing First are open to learning more about and operating a trauma-informed program.

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

	Describe in the field below how your CoC coordinates to provide training for:
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

**(limit 2,500 characters)**

1. Both Branches and Resolve operate programs for victims and survivors of domestic violence, dating violence, sexual assault, and human trafficking and work diligently across the KVC to share national, state, and local best practices and insights gained through delivery of services. In addition both Branches and Resolve offer low-barrier programs embracing Housing First Principles and provide not only trauma-informed but trauma-competent as well as survivor centered services to all. Recognizing that other providers in the KVC may not have the opportunity for training to gain the expertise needed to provide trauma-competent care both agencies seek to continually share that knowledge with all the other mainstream service providers who sit around the table at the KVC meetings. The principles of trauma-informed care as well as survivor-centered service delivery are discussed at least quarterly and trainings to project staff are offered at least yearly.

2. Much like the answer listed above both Branches and Resolve operate programs for victims and survivors of domestic violence, dating violence, sexual assault, and human trafficking and work diligently across the KVC to share national, state, and local best practices and insights gained through delivery of services. In addition both Branches and Resolve offer low-barrier programs embracing Housing First Principles and provide not only trauma-informed but trauma-competent as well as survivor centered services to all. Recognizing that other providers in the KVC may not have the opportunity for training to gain the expertise needed to provide trauma-competent care both agencies seek to continually share that knowledge with all the other mainstream service providers who sit around the table at the KVC meetings. The principles of trauma-informed care as well as survivor-centered service delivery are discussed and share with the Centralized Assessment Team at least quarterly and trainings to project staff are offered at least yearly. It is the goal of Resolve to expand the program to allow for at least one, preferably two domestic violence advocates to become part of the Centralized Assessment Team during this round of funding but until that is possible Resolve staff meet with the CAT team members frequently to share best practices as well as updating them on trauma-informed care and the Dangerousness and Lethality Guidelines that may impact the client's need for immediate safe relocation or shelter.

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC uses for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

**(limit 2,500 characters)**

1. Domestic violence survivors enter the Coordinated Entry System (CES) through a comparable database, initiated by 3 - 24 hour domestic violence hotlines and/or hotline chats: Branches' DV Crisis Hotline, Resolve's DV Crisis Hotline or Crisis Chat, and the National DV Crisis Hotline. The comparable CES assesses the danger and specific areas of vulnerability for adults and families using the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). Assessments are used to prioritize survivors with the highest acuity and in the greatest danger. Through the Centralized Assessment Team (CAT), a DV advocate enters data from the VI-SPDAT and intake forms into the comparable databased called EmpowerDB and assesses immediate danger using the Dangerousness and Lethality Assessment Guide (DLAG). EmpowerDB allows the victim service providers to share non-personally identifying demographic information in the aggregate regarding services to clients to comply with Federal, state, tribal, or territorial laws, reporting, evaluation, or data collection requirements. Data is also collected through the HMIS database to track previous instances of service outside of survivor/victim specific service providers with the KVC's geographic service region. KVC also tracks data from the following: aggregate, comparable CoC, Point-In-Time Count, Housing Inventory Count, state/nationwide statistics, WV Coalition Against Domestic Violence (WVCADV), WV Coalition to End Homelessness (WVCEH), National Census of DV Services, Community Needs Assessments, and best practices related to domestic violence, dating violence, sexual assault, bullying, stalking, and human trafficking.

2. KVC, in partnership with the local victim service providers, used the data to both identify unmet need facing victims and survivors, and narrow that need. This partnership allowed KVC to create an ever-evolving homelessness system that is responsive and equitable in prioritizing the most vulnerable household across population using the VI-SPDAT and the DLAG to assess lethality of dv situation. In many instances, the response to survivors facing both homelessness and dv, dating violence, sexual assault, stalking and/or human trafficking is immediate as the collaboration is such that the CAT team will immediately reach out to staff at Branches or Resolve to move victims and survivors into safe housing and bring support services and advocacy to them.

1C-5c.	Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
	1. the emergency transfer plan policies and procedures; and	
	2. the process for individuals and families to request an emergency transfer.	

(limit 2,500 characters)

1.All KVC member agencies, including but not just HUD and ESG funded service providers, are required to follow VAWA regulations, which are included in KVC policy and procedures. Trainings occur on all policies and procedures, and questions can be asked at weekly By Name List Meetings on bi-monthly COC Steering Committees. KVC also has policies and procedures that ensure all individuals receiving or seeking CoC program assistance are informed about the KVC's Emergency Transfer process.

2.Emergency transfers can be requested by the client at any point in the process, whether it is in Coordinated Entry, Emergency Shelter, after they are housed through either RRH or PSH. Options include internal transfers, transfers to outside programs, or moving to other safe and available units. Survivors are assessed for housing using the VI-SPDAT with safety, planning and confidentiality, which is entered into a comparable database and a unique ID is generated. The unique ID is entered onto the By Name List ensuring anonymity and equal access to all available housing and services within the CoC's geographical area. DV providers have access to both DV and non-DV dedicated housing. Households are able to choose the type and location of housing that best meets their needs without losing prioritization on the By Name List.

&nbsp;

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

Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area.

(limit 2,500 characters)



Access to equal services for victims and survivors of domestic violence, dating violence, sexual assault, or stalking is imperative to all member of the KVC. The Centralized Assessment Team (CAT) assesses and instantly refers those with indicators of domestic violence, dating, violence, sexual assault, or stalking to Branches or Resolve depending on their geographic location. Both Branches and Resolve are licensed domestic violence providers and members of the West Virginia Coalition Against Domestic Violence. Both programs are able to assist survivors with an array of trauma-competent services such as emergency shelter, rapid re-housing, safety planning, counseling, support group, and court advocacy. Resolve also offers transitional housing and a monitored visitation and exchange center. Branches and Resolve staff are specifically trained to address survivor’s unique needs such as: confidentiality, proximity to the abuser, safety planning, and relocation.

All programs within the KVC have access to Branches and Resolve for consultation to help mainstream providers adopt survivor-centered and trauma-informed practices to maximize safety and confidentiality. In following along with survivor-center care the survivor may choose not to use domestic violence specific services and Branches and Resolve will refer back to the CAT. This partnership allows victims and survivors entering the KVC the most barrier-free, rapid, and successful entry into housing as possible; ensuring that persons fleeing domestic violence, dating violence, sexual assault or staling have access to housing and services that prioritize safety and accommodate each of their unique situations. Survivor choice is the center of any referral or placement. Victims and Survivors have equal access and choice to seek an array of services through Branches or Resolve or a mix of other KVC providers. Services are tailored to the acuity and need of each, utilizing a low-barrier, housing first approach. Participation in services are encourages by actively employing evidence-based practices for client engagement such as motivational interviewing. However, clients will not be terminated from a program for lack of participation, lack of progress, or as a condition to housing. Survivor-centered service and safety plans utilize survivor input to devise the most rational, individualized path to success.

1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC’s coordinated entry includes:	
1.	safety protocols,
2.	planning protocols, and
3.	confidentiality protocols.

(limit 2,500 characters)

KVC’s coordinated assessment protocols were expanded through collaboration with 2 licensed DV services providers: YWCA of Charleston’s Resolve Program and Branches. The partnership allowed KVC to create a homelessness system that is responsive and equitable in prioritizing the most vulnerable households across populations.

1. KVC and its partners have ongoing relationship across agencies and systems and there is continued communication and collaboration among KVC, homeless service providers, Resolve and Branches. Mainstream and victim service providers use the same assessment tools - VI-SPDAT and SPDAT. Assessments for victims and survivors are completed by trained dv advocates and/or housing specialists with attention to safety planning. It is designed to prioritize ongoing relationship building between survivors and service providers. KVC CAT staff utilizes best practices for engaging survivors and ensuring survivor safety. Staff works to ensure victim service providers are aware of how centralized assessment works and available resources for survivors through CoC and ESG projects.
2. KVC in consultation with local victim service providers developed an emergency transfer planning process. The process allows for easy low threshold access to an emergency transfer and brings to bear the entirety of KVC’s resources to quickly identify appropriate alternative housing and assist the household to access the housing.
3. Confidentiality of victims and survivors is paramount and addressed many ways in the KVC. Resolve and Branches use the HMIS comparable database, EmpowerDB to store client information. Housing related data is used to prioritize individuals and families experiencing domestic violence and homelessness through data which has removed all personal identifying information but still allows for data points to make prioritization possible. For CAT and prioritization Resolve and Branches clients use an EmpowerDB provided ID# for the name listing and referrals.

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

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

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

Describe in the field below:

1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
----	--

2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1. The KVC reviews the COC-wide anti-discrimination policy at least annually based on feedback. The policy is also reviewed any time a potential act of non-compliance is raised. An Equal Access Rule Training is held annually, and equal access is discussed at many other trainings offered through the year.
2. The KVC encourages all members to adopt the existing policies, however, for any agency that wishes to have their own policy, the KVC provides guidelines for creation of Non-Discrimination and Fair Housing Policies.
3. Complaints are encouraged to be initially addressed with the specific agency. All members are required to keep written documentation of incidents and exceptions. Confirmed acts of discrimination, harassment and misconduct will be dealt with appropriately on a case by case basis. Responsive actions will include training, counseling, and progressive correction measures
4. If the COC determines there is noncompliance with the anti-discrimination policies, the COC will impose the appropriate action to the agency for the compliance violation. The responsive action could include training, counseling, and other appropriate corrective measures.

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

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

Enter information in the chart below for the two largest PHAs highlighted in gray on the FY 2021 CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2021 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Charleston-Kanawha Housing	5%	Yes-Both	Yes
South Charleston Housing Authority	33%	Yes-Public Housing	No

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

Describe in the field below:

1. steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or

	2. state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.
--	--

(limit 2,500 characters)

1. Both of the two PHAs within the KVC COC service area for which KVC has a working relationship with have a homeless admission preference in their written policies. KVC will continue to work closely with both PHAs to answer any questions they may have on this as well as discuss the homeless situation in the KVC service area. A presentation will be given to each of the Boards, as requested, and these presentations will also serve as an opportunity to explain KVC's functions to those on the PHA Boards who may not be aware of all that the KVC does. This also provides a way to generate new individuals to become involved in the KVC and other homeless initiatives. CKHA, which is the largest PHA in the KVC area, is active in the homeless programs as it has 62 units of HUD VASH and 26 S+C units which serve over 88 homeless individuals during the year. There is also a smaller housing authority within the KVC area that does have this homeless admission preference.

2. NA

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	No
2.	PHA	No
3.	Low Income Housing Tax Credit (LIHTC) developments	No
4.	Local low-income housing programs	No
	Other (limit 150 characters)	
5.		

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

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

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

7.	Public Housing	No
8.	Other Units from PHAs:	

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		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.	

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
--	--	-----

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

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
--	--	-----

If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

<b>PHA</b>
Charleston-Kanawh...

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

**Name of PHA:** Charleston-Kanawha Housing

## 1D. Coordination and Engagement Cont'd

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition.	9
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition that have adopted the Housing First approach.	9
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2022 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

Describe in the field below:

1.	how your CoC evaluates every recipient—that checks Housing First on their Project Application—to determine if they are actually using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1. The Kanawha Valley Collective has passed Permanent Supportive Housing Protocols that adhere to a Housing First approach. The KVC believes in the Housing First philosophy and that it is the fastest way to get individuals who have the most barriers into safe, affordable housing. The CoC and Coordinated Entry ensure people referred to housing projects are not denied access based on income, disability, criminal history, or history of victimization. KVC does yearly monitoring of all COC programs including reviews of Policies and Procedures from each project as well as an HMIS monitoring of client files. Through the local monitoring process, the Housing First Assessment Tool from the HUD Exchange is used to discuss with project staff their use of the Housing First approach. The CoC provides annual re-education training to housing providers to ensure that a Housing First and harm reduction approaches are in place. As part of the COC NOFO Prioritization process, the compliance with the Housing First approach is discussed in depth on a per project basis.
2. Discussion of Housing First compliance begins with these three concepts: a. Individuals are placed and stabilized in housing without preconditions b. individuals never face requirements to participate in services as a condition to retain their housing and c. individuals do not face a “three strikes” eviction policy.
3. The COC Steering Committee creates PSH and RRH policies and works to ensure that the Housing First philosophy is followed. As part of the COC NOFO Prioritization process, each project is examined not only to verify their commitment to following a Housing First approach, but to ensure the approach is actually followed. This is done by an HMIS review to ensure individuals served meet the definition of chronic homelessness, their VI-SPDAT scores qualify them for the PSH programs, and they have the highest needs/most housing barriers. Reasons for discharges from programs is also monitored year round.

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

(limit 2,500 characters)



1. KVC provides coordinated street outreach to identify and engage people living in unsheltered locations by managing ongoing outreach efforts supported with a proven data collection tool: “Show the Way” a mobile application to improve data quality and support the ongoing management of a “by name list” of unsheltered people. Within the app, Street Outreach teams can geo-tag the location of specific encampments and interactions to provide an enhanced view of where people are experiencing homelessness. All street outreach contacts and housing placements are documented in HMIS to provide a coordinated-entry process with established data-sharing agreements and protocols. Outreach providers can access data that helps them more effectively focus on supporting housing outcomes. 2) Street Outreach covers 100% of the CoC geographical area of the following WV counties Kanawha, Boone, Clay and Putnam. 3) Street Outreach is conducted 7 days a week with teams going out at different times to meet the needs of the community they are serving. The hours of operation can be from 8 am and until 9 pm. 4) Coordinated Street outreach identifies and engages people living in unsheltered locations such as in cars, parks, abandoned buildings, encampments, and on the streets to build rapport. Through partnerships Street Outreach Teams provide cell phones to sustain connections and to help facilitate communication. Additionally, KVC partners with the University of Charleston and other local organizations to provide translation services to non-English speaking population.

<b>1D-4.</b>	<b>Strategies to Prevent Criminalization of Homelessness.</b>	
	NOFO Section VII.B.1.k.	

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

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

<b>1D-5.</b>	<b>Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).</b>	
	NOFO Section VII.B.1.I.	

		2021	2022
	Enter the total number of RRH beds available to serve all populations as reported in the HIC—only enter bed data for projects that have an inventory type of “Current.”	97	66

<b>1D-6.</b>	<b>Mainstream Benefits–CoC Annual Training of Project Staff.</b>	
	NOFO Section VII.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:

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	TANF–Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	

<b>1D-6a.</b>	<b>Information and Training on Mainstream Benefits and Other Assistance.</b>	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC:

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

**(limit 2,500 characters)**

1. The CoC systematically provides up-to-date information on mainstream resources available for program participants by facilitating the bi-monthly COC Steering Committee, monthly Community Solutions Meetings, and quarterly membership meetings. At these meetings, community providers, including non CoC members, are invited to provide program spotlights, increasing the range of knowledge of resources available to clients. Examples of agencies that provide mainstream benefits and are invited to provide program spotlights include: WVDHHR (which present on Food Stamps, TANF, Medicaid, etc.); area food pantries; 2-1-1 (Information and Referral line); the Ryan White & HOPWA Programs; DV Providers and Fair Housing Advocates. The CoC also regularly updates its members of changes in accessing/utilizing mainstream resources via email. 2. The CoC collaborates w/ healthcare orgs to assist program participants receive healthcare services (i.e. substance use treatment, mental health treatment, physical health care) by engaging & inviting healthcare partners, both CoC & non CoC members, to present at monthly COC meetings. For example, the CoC engages local Medicaid/Medicare administrators & Healthcare Navigators to educate providers on eligibility criteria, plan options, trainings on health literacy, accessing enrollment/plan support, & accessing healthcare (medical transportation). The CoC also hosts healthcare providers (i.e. Cabin Creek health Systems and WV Health Right) at Membership meetings, which present on available services. This information is communicated directly to program staff, who then connect clients w/ appropriate healthcare services. 3. The CoC actively promotes the SOAR model & trainings are hosted by the State of WV Soar lead - the WV Coalition to End Homelessness.

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

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

**(limit 2,500 characters)**

The COC has worked diligently at expanding its capacity for non-congregate sheltering throughout the COVID-19 pandemic. They pursued multiple building options, but to date non of them have been appropriate. Over the past two years funding has been requested from the National Low Income Housing Association, local foundations, the City of Charleston and ESG-CV for this endeavor. Non-congregate shelter has been used by both individuals who have tested positive for COVID-19 as well as those at risk of COVID-19. Non-congregate shelters have also been used during times the KVC's shelters could not take new intakes due to COVID-19 outbreaks. The CoC has worked to create non-congregate-like settings for clients in hotels/motels by providing on-site wrap-around services to clients placed in hotel/motels. Support services that are provided include case management, community referrals, and access to basic necessity items, such as food and hygiene items. As a result, clients receive the necessary services in a a non-congregate setting, increasing positive outcomes and referrals to wrap-around services In the past two years to more than 300 people that have received assistance though non-congregate shelters, including as many as 41 at one time in January 2021.

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

(limit 2,500 characters)

The KVC worked with the local Health Department as well as Healthcare providers to create the following protocol:

- 1) Once notified of a positive resident or employee, the shelter director will immediately notify KCHD, MOECD, WV Health Right and the KVC
- 2) Positive resident is removed from the shelter (if not already) and should wait outside with a shelter staff member for transport to quarantine hotel. In the case of a positive staff member, the individual immediately returns to his or her home and begin self-quarantine for 5 days.
- 3) The shelter director notifies all staff and all current residents of the COVID case and “lock down” exit or entry to new residents.
- 4) WV Health Right works with the KCHD and the State to assign an outbreak # and secure mass testing supplies and deploy staff to complete testing. Testing will occur outside and shelter staff will need to help assist in getting all residents to the testing area.
- 5) Shelter will provide WV Health Right a running list of all residents and staff possibly exposed and a list of anyone who left before testing occurred (i.e. refused to be tested and/or quarantine).
- 6) Any resident concerned about problems with their employer for missing work will be provided a letter from WV Health Right stating possible exposure infectious disease (no mention of residence at a shelter) and mandatory quarantine requirements at the time of testing.
- 7) Those who leave the shelter will be advised they cannot be readmitted to the shelter until 7 days of quarantine have passed and they have proof of a negative COVID test on day 7.
- 8) A notification of the shelter outbreak, its closure and a list of names of anyone who refused to quarantine will be sent to the EOC social service group by the shelter director within 4 hours of identification
- 9) Quarantine shall remain in place with no new residents admitted at that shelter until (a) all test results are back and negative (b) the shelter has been deep cleaned and (c) Kanawha County Health Department reviews outbreak status and gains clearance to reopen.
- 10) KCHD will notify the shelter director when they are able to reopen, and the director who then notify his/her staff, residents and the entire EOC social service group they have reopened.

2.The KVC used healthcare education, sanitation stations and non-congregate shelter to help mitigate the spread of COVID-19 and similar response will be made for all future infectious disease outbreaks.

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

**(limit 2,500 characters)**

1. The Kanawha Valley Collective worked with the Kanawha County Health Department as well as local healthcare providers on agency protocols to ensure that both healthcare providers and social service agencies receive all needed information regarding infectious disease outbreaks. Two years prior to COVID-19, there was a Hepatitis A outbreak in our area that laid the groundwork for unified response to infectious disease. Our area is also currently dealing with an HIV. We have created a local Emergency Operations Center (EOC) that consists of healthcare officials, local healthcare providers and key KVC members to 1. Monitor any needed actions to address a potential infectious disease outbreak, 2. Identify needed responses to the outbreak 3. Make any adjustments to our unified response.

2. The KVC has also been able to purchase PPE that can be distributed to agencies, staff and clients as needed. We have a protocol for offering any created vaccinations or other preventative measures. COVID-19 rapid tests were secured for both residential programs and outreach programs to allow 24 hour per day rapid testing as needed.

These efforts have allowed us to create channels and protocols that can be mobilized to respond to practically any public health crisis. We have used both weekly By Name List meetings as well as secure communication apps, such as Signal, to make sure that not only agency leaders are informed, but that front line workers, including outreach workers, are kept up to date on needs and changes in infectious disease outbreaks.

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

**(limit 2,500 characters)**

1. The Centralized Assessment Team (CAT) and Street Outreach cover 100% of the KVC COC area. While the KVC prefers to do assessments Face to Face, assessments can also be completed by phone. Street outreach goes into encampments and other places not meant for habitation to complete a VI-SPDAT (KVC Centralized Assessment Tool) in an effort to link all individuals to their housing of choice. 2. The KVC utilizes the VI-SPDAT which is their Centralized Assessment Tool. 3. The KVC's Centralized Assessment Team (CAT) has gone through some significant changes in the past 18 months as a result of client and community feedback. The grantee agency changed to the KVC because of the belief that this program needed to sit with the KVC, an agency involved in the day to day efforts to end homelessness. The staffing structure also changes so that rather than having a rotating team, there is a stable CAT staff Monday - Friday. Regardless of the day and/or time, clients will have the same staff assist them, and this helps with service delivery. The location moved to an office which has enabled the office to be open daily - even though COVID is still a concern. KVC projects have had positive feedback regarding these changes, referrals are more streamlined, information is more consistent, and clients become document ready for housing more quickly than in the past. 3. The KVC Coordinated Entry meets on a regular basis and will make changes and updates to the system based upon feedback received from projects and households that have participated in the Coordinated Entry System.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section VII.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
4.	takes steps to reduce burdens on people using coordinated entry.	

(limit 2,500 characters)

1. The KVC Centralized Assessment Team (CAT) reaches people least likely to seek out homeless assistance by partnering with street outreach services. individuals can access services and housing through street outreach workers. Outreach workers can function as an extension of the Centralized Assessment Team (CAT) to ensure that individuals who are resistant to enter the CAT office still have access to all services within the KVC. This system arrangement makes sure that all individuals in our shelters and on our streets are receiving the assessments and By Name List placement that will get them housed more quickly.

2. The KVC prioritizes individuals most in need of service by utilizing a Centralized Assessment tool. This tool ensures that all individuals seeking services are asked the same questions, the same way, every time. This takes the element of luck out of the services equation. It utilizes a standard set of prioritization criteria such as length of time homeless, family status, health issues and other system involvement. It ensures that people with the greatest needs, with the most barriers, with the highest vulnerability are prioritized first.

3. The COC ensures that individuals most in need of assistance receive housing in a timely manner by using the By Name List. The By Name List prioritizes based on needs and barriers as described in #2. This takes us away from a first come, first serve model. At the time of the persons assessment, they are placed on the list which is discussed weekly by direct service and housing providers. Referrals are made to housing openings, with every effort taken to make sure the referrals are appropriate and the individuals qualifies for the program being referred to.

4. The KVC has worked diligently at developing the Centralized Assessment system to improve both the individual outcomes as well as ease of use. This system eliminates the need for those experiencing homelessness to seek homeless programs that meet their needs, and the need for them to go from program to program learning criteria and seeking openings. Individuals are only referred to projects that they meet the eligibility criteria for to avoid frustration and wasted time.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	08/11/2022

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

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

(limit 2,500 characters)

The KVC has made a commitment to identify and eradicate racial disparities in the provision and outcomes of services within our continuum.

1. Racial demographics are reviewed monthly to be reviewed by the COC Steering committee. Bi-monthly this data is reviewed by the KVC Board of Directors. This data includes demographic data from: the By Name List, program entry, program discharge and housing placement. Specific data points that indicate the potential presence of racial disparities are highlights and discussed. APR and CAPER information is also reviewed on project levels.

2. In the most recent analysis of the entire COC it was discovered that POC made up 8% of our local population, but 34% of our homeless service system. This is a huge discrepancy, and the KVC is discussing ways to prevent homelessness among this population. However, the KVC also discovered that 38% of their discharges to Permanent Housing are people of color.

1D-10b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.q.	

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		



1D-10c.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.

**(limit 2,500 characters)**

The KVC has worked at both identifying and addressing disparities or potential disparities as trends are notices. While we know that racial disparities in homelessness exist everywhere, as most places across the country see higher rates of homelessness among BIPOC, we are closely monitoring the work of our programs to ensure that our services are provided in an equitable manner. The KVC works with both Legal Aid of WV and Mountain State Justice on issues pertaining to fair housing, not only for BIPOC, but also LGBTQ+ individuals. Staff from both agencies have been very responsive to the needs of those we serve. The KVC has also worked with Mountain State Justice to monitor the local ordinances that impact individuals experiencing homelessness to insure that they are not unlawfully targeting individuals. In July 2022 we began working with the WV Coalition to End Homelessness who received a fair housing grant that covers all 4 of West Virginia's Continua of Care. In August 2022, there was a Fair Housing training held that was mandatory for all COC and ESG funded agencies.

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

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.

**(limit 2,500 characters)**

The KVC has completed a racial disparity analysis every year since 2018. Going forward, we will continue reporting to the KVC Board and the COC Steering Committee about the demographics, including race and gender, of all individuals served in the current year. On a program level, we will continue to make sure programs are providing assistance in an equitable manner. All referrals that are denied are investigated to determine why the referral was denied. We will look for patterns not only in race and ethnicity, but also LGBTQ+ and SMI/SUD.

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

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

**(limit 2,500 characters)**

Individuals with lived experience are involved with every level of the KVC including: KVC Staff, Board of Directors, Americorps positions, member agency staff, and board members. Outreach efforts include announcements at agencies, and program level invitations. Each agency encourages active involvement from its participants with them being encouraged to participate in agency functions and to provide input which will better shape the future. The more meetings that are attended and the more active involvement will help make the agency better, The clients are very good at providing feedback along with their input as to how to make things better and changes that need to be made to meet their needs.

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

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	15	10
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	4	3
3.	Participate on CoC committees, subcommittees, or workgroups.	8	5
4.	Included in the decisionmaking processes related to addressing homelessness.	15	10
5.	Included in the development or revision of your CoC's local competition rating factors.	5	2

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

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

**(limit 2,500 characters)**

Annually the Margaret Taylor Job Readiness Center provides the following education and employment skills to nearly 400 homeless and/or at-risk of becoming homeless, including Veterans: Pre-HiSET classes, computers and office technology, Adult Basic education/Adult Literacy Career building (job placement/keeping skills), life skills and money management, health and wellness education, and supportive counseling. Transportation is also available for program participants. Pre-HiSET classes help participants prepare for the High School Equivalency Test exam in order to earn a West Virginia High School Equivalency Diploma. They are given instruction on the HiSET testing areas, which include math, reading, language, arts, science, social studies, and writing. Computer instruction and opportunities include computer and internet skills, data entry and other office skills, and Windows and Microsoft Office (Word, Excel, and PowerPoint). Adult basic education/literacy includes Basic Skills such as math and language arts to help participants prepare for employment testing, US Postal Service, HiSET preparation, civil service, vocational and college preparation. Career Development is employment seeking and keeping skills including self-marketing and interview techniques, job leads, referrals, follow-ups and related documentation, resume and job application preparation, dressing to impress, role-playing, salary negotiations, and career counseling.

Life skills include money management, communication skills, voter registration, and identifying/accessing mainstream resources.

Health education focuses on services for women including pre-and post-natal counseling and referrals. Both men and women can receive services relating to building self-esteem, parenting, nutrition and wellness, assertiveness, and health issues.

Second Choice is a weekly meeting that covers individual and group counseling and prevention education sessions.

Transportation assistance is provided in arranging transportation for career interviews and employment.

All services are provided free to the homeless/at-risk of homelessness, regardless of their place of refuge.

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

Describe in the field below how your CoC:

1.	how your CoC routinely gathered feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance; and
2.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness

**(limit 2,500 characters)**

1. Feedback from people experiencing homelessness and people who have received assistance is routinely gathered, The staff listens to the program participants from the first to join the program to the graduates who are independent, The staff works closely to guide the program to meet the needs of all who participate. The KVC often have people with lived experiences of homelessness who serve on the boards and people who are currently working alongside each day, The KVC strives to make a difference in every life it touches and remain open to expansion, change, and input. Feedback is received in the form of both written and verbal communication, There are completed surveys with suggestions/ideas on ways the services can be improved Information is collected and shared with the team when meetings are held to discuss ways of improvement, This is a never ending cycle as the KVC moves to improve and push itself forward everyday.

2. The KVC has taken many steps to address these challenges that are raised by people with lived experiences of homelessness. Surveys are given to individuals when they have completed the KVC's program. The surveys are then provided to the team to discuss ways in which the services can be improved. Orientation occurs to which all program participants are notified of the services offered. It is at this point recommendations are made as to what the KVC can do better, Some examples have been bringing in tutors to assist with learning, broadening the job search areas to include higher waged jobs, etc. It is important to create a collaborative environment where a person who has lived experience can lead the charge and where their contributions are valued and prioritized. The KVC has worked diligently to allow open spaces on their boards, meetings, and wherever there is room for improvement. Persons who have lived experiences are able to offer relevant solutions that work best in their communities.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

**(limit 2,500 characters)**

The KVC has multiple conversations with the City of Charleston regarding the City's use of HOME Funds. Currently these funds are earmarked for home purchasing, specifically first-time home buyer's subsidies. We have advocated that some HOME funds be used for building acquisition and rehabilitation. The KVC believes that this would allow for the spread of affordable housing in a way that did create large housing units.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice.	
	NOFO Section VII.B.2.a. and 2.g.	
	You must upload the Local Competition Deadline attachment to the 4B. Attachments Screen.	

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC’s local competition.	08/11/2022
--	---	------------

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

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

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

1E-2a.	<b>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.</b>	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

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

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	9
3.	What renewal project type did most applicants use?	PH-PSH

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

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

(limit 2,500 characters)

1. In FY22, the KVC used Program APRs were used to determine that each project had successfully housed and served participants in permanent housing projects.
2. The KVC uses referral reports, the By Name List, and a targeted by name list to analyze information on how long it takes for individuals to get into permanent housing.
3. Commitment to Housing First and compliance with the CoC's Centralized Assessment Team (CAT) are included in scoring in the local competition to ensure projects are serving program participants with the greatest level of service needs and vulnerabilities. The KVC identified the following needs and vulnerabilities - persons living unsheltered, persons living with SUD or SMI, persons fleeing DV, and persons experiencing chronic homelessness. PSH projects are required to serve people experiencing chronic homelessness and are scored against distinct performance benchmarks to account for differences in outcomes that may be impacted by the acute needs of the target population as compared with RRH program participants. All new RRH and PSH projects are scored based on demonstration of how they would employ Housing First practices, specifically related to preventing program terminations and ensuring barriers to program entry are eliminated for people who have a criminal record, active substance use issues, a lack of income, or critical support needs. In alignment with the priority to meet the gap in housing and service interventions for people with the most complex needs, the CoC Ranking Policy prioritizes PSH projects over RRH projects in their year's competition.
4. All new and renewal projects are ranked using the same scorecard but measured against benchmarks set for each component type to appropriately evaluate projects by considering the housing barriers of the target population being served. Additional points are available for projects who serve individuals with more identified vulnerabilities and needs.

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

(limit 2,500 characters)

1. Input on strategies for ending homelessness is consistently sought from groups of stakeholders who are representative of the racially diverse population of people experiencing homelessness within our CoC. When putting together rating factors for projects, the KVC worked with individuals of the race over represented in the local homeless population. Two of the individuals on the KVC's rating and review committee discussed their experiences in obtaining services.
2. Input by individuals of different races and ethnicities helped the KVC rating and ranking committee ensure we were looking at rating and ranking through a lens of equity when possible and appropriate. The input of this diverse mix of people was vital and gave us more comfort in our process than in years past.
3. The racial makeup of the review committee closely resembled the racial makeup of the KVC local population experiencing homelessness.
4. All projects who submitted renewal applications were examined and reviewed for racial equity. Population served was compared to population racial breakdown of all who had entered the Centralized Assessment Team. Bonus points were given to programs that promoted racial equity; those programs whose population make up closely mirrored that of individuals experiencing homelessness. The race of individuals who were discharged was also examined to ensure that BIPOC were not over represented in negative discharges. The biggest step made by the KVC to strive towards racial equity has been in our outreach services. Making sure that all individuals had access to services has been vital. Making sure we had outreach staff that mirrored not only the racial makeup of our population, but also mirrored the experienced of our population has been incredible.

<b>1E-4.</b>	<b>Reallocation—Reviewing Performance of Existing Projects.</b>	
	NOFO Section VII.B.2.f.	

Describe in the field below:

1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any projects through this process during your local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

**(limit 2,500 characters)**

1. The reallocation process is outlined in the KVC Prioritization and Ranking Policy. Through the ranking process, program performance is evaluated using scoring tools and the need for a project is discussed.
2. The KVC did not identify any projects for reallocation through its local competition.
3. The KVC did not identify any projects for reallocation which were identified as low performing or less needed projects,
4. Discussion of projects, including the specific populations served, were taken into account when rating and ranking. It was determined that all projects were needed regardless of performance and that it would be the work on the COC to assist projects with improvement.



1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	No
--	--	----

1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject or reduce any project application(s)?	No
2.	Did your CoC inform applicants why their projects were rejected or reduced?	No
3.	If you selected Yes for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/14/2022

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/14/2022
--	--	------------

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

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes
--	--	-----

1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/28/2022
--	--	------------

1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application has been posted on the CoC’s website or partner’s website.	09/28/2022
--	---	------------

## 2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>2A-1.</b>	<b>HMIS Vendor.</b>	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	Wellsky
--	--	---------

<b>2A-2.</b>	<b>HMIS Implementation Coverage Area.</b>	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Statewide
--	--	-----------

<b>2A-3.</b>	<b>HIC Data Submission in HDX.</b>	
	NOFO Section VII.B.3.a.	

	Enter the date your CoC submitted its 2022 HIC data into HDX.	05/04/2022
--	---	------------

<b>2A-4.</b>	<b>Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.</b>	
	NOFO Section VII.B.3.b.	

	In the field below:
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in databases that meet HUD’s comparable database requirements; and
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.

**(limit 2,500 characters)**

1. Currently domestic violence survivors enter the Coordinated Entry System (CES) through a comparable system initiated by the three 24 hour domestic violence helplines: Branches’ Domestic Violence Crisis Hotline, YWCA Resolve Family Abuse Program’s Domestic Violence Helpline and 24 hour helpline chat, and the National Domestic Violence Crisis Hotline. The comparable Coordinated Entry System assesses the danger and specific areas of vulnerability for adults and family using the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). Assessments are used to prioritize survivors with the highest acuity and the greatest danger. Through the Centralized Assessment Team (CAT), a DV Advocate enters data from the VI-SPDAT and intake forms into a comparable database called EmpowerDB.
2. Examples of compliance include submitting de-identified aggregate data to the CoC for inclusion in the Housing Inventory Chart and Point In Time Count; and utilizing data outcomes from DV providers in the Rank and Review tool. Additionally, CoC DV providers regularly perform CSV uploads for ESG-CV funding reporting, as well as uploads to Sage for APRs.

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

Enter 2022 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	344	23	255	79.44%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	36	21	25	166.67%
4. Rapid Re-Housing (RRH) beds	66	29	37	100.00%
5. Permanent Supportive Housing	157	0	95	60.51%
6. Other Permanent Housing (OPH)	64	0	0	0.00%

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

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

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

**(limit 2,500 characters)**

1. The KVC has attempted to set multiple meetings with the faith based shelter in an effort to convince them to use HMIS, but the faith based shelter is non committal to this process. As leadership changes within the agencies, the KVC will continue to work on this process. Additionally, if there is an Ad-Hoc Warming Station shelter this year, that Warming Station will be put into HMIS. For the PSH beds currently not in HMIS, the KVC will be working with the local housing authority to get these beds in the system. These PSH beds will be in HMIS during the next 12 months.

2. The HMIS Administrator will meet with representatives from the Charleston-Kanawha Housing Authority (CKHA), the agency that administers the HUD-VASH to work towards getting these vouchers in the HMIS system. The CKHA has made great advances this year in their management of COC-PSH grants within Servicepoint, so we are hopeful in their ability to manage HUD-VASH within Servicepoint.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section VII.B.3.d.	

Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?	Yes
--	-----

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>2B-1.</b>	<b>PIT Count Date.</b>	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	01/27/2022
--	---	------------

<b>2B-2.</b>	<b>PIT Count Data–HDX Submission Date.</b>	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	05/04/2022
--	---	------------

<b>2B-3.</b>	<b>PIT Count–Effectively Counting Youth.</b>	
	NOFO Section VII.B.4.b.	

	Describe in the field below how during the planning process for the 2022 PIT count your CoC:	
	1. engaged stakeholders that serve homeless youth;	
	2. involved homeless youth in the actual count; and	
	3. worked with stakeholders to select locations where homeless youth are most likely to be identified.	

**(limit 2,500 characters)**

The KVC has multiple service providers that serve homelessness youth, including youth 17 and under as well as youth 18-24.

1. In planning the Point In Time Count, the KVC worked with Daymark, Sojourners, Giltinan and street outreach workers to engage in the Point in Time process.

2. The KVC and City of Charleston outreach workers both employ individuals that are formerly homeless youth. Outreach workers have gained the trust of unsheltered individuals including homeless youth and this has lead to referrals of additional youth that may have been hesitant to trust providers.

3. All agencies that serve homeless youth were engaged to identify locations where homeless youth hang out as well as unsheltered locations where these youth sleep at night.

<b>2B-4.</b>	<b>PIT Count–Methodology Change–CoC Merger Bonus Points.</b>	
	NOFO Section VII.B.5.a and VII.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable; and	
	3. describe how the changes affected your CoC’s PIT count results; or	
	4. state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2022.	

**(limit 2,500 characters)**

Not Applicable. No changes were made from 2021 to 2022.

## 2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

**(limit 2,500 characters)**



1. The KVC continues to work on improving our ability to accurately pinpoint risk factors to identify persons who may experience first time homelessness. Our process has included analyzing HMIS data including Stella P. System Performance Measures and Coordinated Entry data and conducting consumer interviews. KVC completed a survey with participants that showed the main reasons for 1st time homelessness were substance abuse, mental health, and disruption of a support system. This aligned with HMIS data regarding MH/SA and allowed KVC to identify the issues with a support system which are not always captured in HMIS. Drug abuse is both a cause and a result of homelessness. Studies show WV is one of the top 10 states for rates of drug-use and continues to have the highest age-adjusted rate of drug overdose deaths involving opioids. The KVC also works closely with our United Way, who oversees the 2-1-1. 2-1-1 operators collect data on the precipitating factor that lead to the caller utilizing 2-1-1, including reasons such as facing eviction, seeking rental assistance, and searching for homeless prevention resources.

2. KVC developed the following strategies to reduce the number of 1st-time homeless: a. KVC's Centralized Assessment Team (CAT) placed diversion as its top priority when meeting with possible homeless individuals. CAT members determine if an individual is truly homeless, has no other place to go, and will benefit in a homeless facility. Some individuals and families are more at risk of becoming homeless due to payments owed on utility bills, rent, etc. In these cases CAT works to help find resources to address this issue so they can remain housed. b. KVC partners with the City of Charleston's Family Reunification Program to assist individuals with transportation to be reunited with family as a diversion to homelessness. Multiple checks are made to ensure the individual/family is going to a safe home. c. Work with WV 211 which serves as a critical connection between individuals and families in need and the appropriate community-based organizations and government agencies.

3. The organization responsible for this is HMIS within the KVC.

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section VII.B.5.c.	

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

(limit 2,500 characters)

1. The KVC's strategy for reducing the length of time an individual experiencing homelessness centers around resource allocation. by increasing landlord engagement, we increase potential housing for the individuals we serve. By matching individuals with a level of intervention, we provide more right sized programing for all individuals served. By giving people most in need of intensive services, the services they need, we can not only reduce the amount of time they are homelessness, but we can eliminate homeless recidivism. By insuring our PSH and RRH policies remove housing barriers, we get people housed more quickly.

2. Centralized Assessment Team (CAT) utilizes a prioritized By Name List which lists clients by vulnerability, need, and if it is a family. The intake paperwork has been revised with regards to policies and procedures as to how prioritization should work. KVC is adhering to CPD 16-11-Orders of Priority - regarding the order in which eligible households should be served in all COC Program-funded PSH. The goal of this process is to ensure those persons with the longest histories residing in places not meant for human habitation, in emergency shelters, and in safe havens and with the most severe service needs are given first priority. The process also establishes a recommended order of priority for PSH that is not dedicated or prioritized for chronic homelessness in order to ensure that those persons who do not yet meet the definition of chronic homelessness but have the longest histories of homelessness and the most severe service needs, and are therefore the most at risk of becoming chronically homeless, are prioritized. Outreach services have been expanded. HMIS is used to identify individuals with the longest length of time homeless, as this is generated through the KVC's By Name List which not only shows length of time homeless, but also identifies those experiencing chronic homelessness. 3. While KVC is the agency responsible for overseeing this strategy, it is led by the HMIS Specialist.

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

(limit 2,500 characters)

1. The KVC's focus on a true Housing First philosophy which is absent any preconditions and barriers and strives to house the homeless within 30-45 days of first engagement. As a result, some of these individuals may have difficulty adhering to rules and may be expelled from their housing. However, there is a commitment to refer those with a history of homelessness and hospitalization to aftercare, community engagement, and partial hospitalization programs such as the Aftercare, CES, VISTA, ACT, etc. These programs are operated by the following KVC agencies: Roark-Sullivan Lifeway Center, YWCA of Charleston, Pretera, VA Outreach HUD VASH, Coalfield CAP, and Covenant House. The KVC just secured ARPA funding to create a program that will provide supportive services only to individuals who need wrap-around services to assist with housing stabilization. The agencies' weekly By Name List meeting, which is continuing to meet, discusses clients, how to move them into housing quicker, and services they need which is beneficial.
2. The KVC continues to work with those in PH by combining case management and supportive services. The services are designed to build independent living and tenancy skills and connect people with community based health care, treatment and employment services. It has proven to be effective as the retention rate for those in PH has remained 95% for the last three years. Additionally, the KVC will be continuing to secure additional funding for supportive services projects that will provide intensive, voluntary assistance to individuals moving into permanent housing.
3. The HMIS Specialist with the KVC is responsible for overseeing this strategy.

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

(limit 2,500 characters)

1. Substance abuse, serious mental illness, loss of income, DV and the loss of a support system, have been identified as the major reasons for recidivism. The KVC is able to track its recidivism through its HMIS as CE assessment and case conferencing. Specifically, the Centralized Assessment Team (CAT) asks about prior episodes of homelessness. During weekly By Name List case conferencing, case managers discuss common barriers to remaining housed. By Name List conferencing supports subsequent successful placement of households by addressing common needs among those who return to homelessness and specific needs of the individual households being rehoused.

2. In order to reduce returns to homelessness there is an increased emphasis among all COC providers on wrapping supportive services and case management around individuals in the community when housed through a clearly defined process of referrals to the appropriate programs. Weekly monitoring of all COC programs are conducted to ensure the needs of those vulnerable to recidivism are being met and they are being provided the vital support needed to remain stable and retain their housing. If a person returns to homelessness, they must go back thru the CAT process where they will be referred to shelters and programs which meet their needs from diversion to wrap around case management services. The KVC is starting a designated supportive services team but up until now has had a group comprised of Housing First and Shelter+Care which help these individuals.

3. While the KVC is the agency responsible for the oversight of this strategy, the work is done by the weekly By Name List Committee.

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

(limit 2,500 characters)

1.The KVC has continued and expanded strategies which have proven to be effective. At the YWCA Sojourner's Margaret Taylor Job Readiness Center where participants can receive GED/Hi-SET prep classes in order to earn a West Virginia High School Equivalency Diploma by using the most updated computers and office technology. Participants are given instruction in the most common testing areas such as math, reading, language, arts, science, social studies, and writing. While using our office technology, participants also have the option to look into instruction on computer and internet skills, data entry and other office skills, and Windows and Microsoft Office. From time to time, tutors are also brought into the Readiness Center, like our math tutor Paul Kinneberg, who volunteers weekly. While studying adult basic education and literacy, participants learn basic skills such as math and language arts to help them prepare for employment testing, civil service, vocational and/or college preparation. A participant can obtain education in career building which is employment seeking and updating and keeping skills including sett-marketing and interview techniques, job leads, referrals, follow-ups, resume building, job application preparations, and how to dress for success in an interview and once employment is secured.

2.Mainstream employment organizations are invaluable resources to the KVC-CoC and play an important role in increasing the income of homeless individuals and families. All of the KVC-CoC projects, and specifically the YWCA Sojourner's Margaret Taylor Job Readiness Center, are regularly connecting participants with employment opportunities through informal partnerships with Workforce WV, the state agency that oversees the unemployment insurance program and a network of workforce development services, as well as individual employers.

3.The KVC is responsible for this strategy as it is a collaborative among all HUD funded homeless agencies and agencies that have case managers who provide these services.

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

(limit 2,500 characters)

1. With regards to non-employment cash income, the KVC has continued and expanded several strategies which have proven to be effective. At YWCA Sojourner's Shelter for Homeless Women and Families, there is a Community Engagement Specialist (CES) who assists with changing program participant's to on-site location for non-cash benefits. CES also assists with Department of Health and Human Resources benefits like Temporary Assistance for Needy Families (TANF) or Supplemental Nutrition Assistance Program non-cash benefits to assist with groceries and essentials. The Children's Coordinator assists Program Participants with applying for Connect WV which assists with non-cash childcare. At YWCA Sojourner's Shelter for Homeless Women and Families there is also a Social Security Lesion who assist with SSA and SOAR applications and the process of signing for Social Security or Social Security Disability Assistance.

2. KVC agencies provide the clients with a list of various non-employment cash resources along with a list of requirements for each source. The KVC agencies work with the various clients to assist in whatever ways may be necessary to help them obtain these resources. The KVC is responsible for this strategy as it is a collaborative among all HUD funded homeless agencies and agencies that have case managers who provide these services.

### 3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
--	--	----

<b>3A-2.</b>	<b>New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.</b>	
	NOFO Section VII.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
--	--	----

<b>3A-3.</b>	<b>Leveraging Housing/Healthcare Resources–List of Projects.</b>	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	
	If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.	

Project Name	Project Type	Rank Number	Leverage Type
This list contains no items			

### 3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>3B-1.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	NOFO Section VII.B.1.s.	

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

<b>3B-2.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	NOFO Section VII.B.1.s.	

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

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

**(limit 2,500 characters)**

NA



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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

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

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

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

(limit 2,500 characters)

## 4A. DV Bonus Project Applicants

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section II.B.11.e.	

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

4A-1a.	DV Bonus Project Types.	
	NOFO Section II.B.11.e.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2022 Priority Listing.

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

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

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

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

1.	Applicant Name	YWCA Charleston
2.	Project Name	Resolve CAT Expansion
3.	Project Ranking on Priority Listing	11
4.	Unique Entity Identifier (UEI)	M65CDU158DD7
5.	Amount Requested	\$173,311

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

Describe in the field below:

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

(limit 2,500 characters)

1. When the Coordinated Entry project was rolled out in 2021, we found some insufficiencies in the program. Many of these issues we have been able to address, but providing the best, most responsive services to those fleeing domestic violence, dating violence, sexual assault, or stalking is something we know still needs improvement. Our Centralized Assessment Team staff is small (2 people) and when you add our full time street outreach, we are still only a team of 6. None of these staff have expertise in DV, even though we focus on a lot of DV training. But we do not have anyone in our Centralized Assessment Officers that readily identify individuals who are fleeing. We don't have individuals skilled at human trafficking. And the most frustrating part is that we do not have the ability to seamlessly assist individuals who are fleeing.

2. This DV project will allow us to have DV advocates embedded in our Centralized Assessment Team. The DV advocate will just be another team member, meaning they will not attract attention when they are speaking to someone, because they will actually be available to speak with everyone.

4A-2b.	Plan to Involve Survivors in Policy and Program Development in the New SSO-CE DV Bonus Project.	
	NOFO Section II.B.11.(e)(2)(d)	

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

(limit 2,500 characters)

Applicant Name
This list contains no items