

## Before Starting the CoC Application

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

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

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

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

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

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

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

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

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

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

**1A-1. CoC Name and Number:** HI-501 - Honolulu City and County CoC

**1A-2. Collaborative Applicant Name:** Partners In Care - Oahu Continuum of Care

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

**1A-4. HMIS Lead:** Partners In Care - Oahu Continuum of Care

## 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) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
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- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

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

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

(limit 2,500 characters)



1.The invitation process for new members includes open invitations & coordinated campaigns with targeted outreach. The CoC website and weekly e-newsletter extends an open invitation to the public with instructions and contact information. Additionally, non-members who attend CoC meetings or events are invited to join. Each November, the Member Relations Committee conducts a membership drive, which is communicated via the CoC email listserv (650+ contacts). Committees request that CoC partners identify potential new members, including homeless service consumers, community advocates, individuals with lived experience (both adults and youth) to ensure broad representation. They also conduct strategic outreach to engage stakeholders that are underrepresented in the CoC.

2.The CoC complies with the Americans with Disabilities Act (ADA) and provides information & materials to individuals with disabilities using accessible formats. Alternative formats (e.g., Braille or audio) are available upon request for all CoC membership invitations (online invitations, in-person invitations, invitations offered at public events).

3.To engage individuals who currently have lived experience with homelessness, the CoC speaks with local leaders of homeless communities (e.g., Ka Po'e o Kaka'ako, Puuhonua O Waianae, Hui Mahi'a's Aina) to identify interested community members. To engage individuals with previous lived experience, the CoC works with providers and advocacy groups to identify former clients who would be interested in CoC involvement. The Oahu Youth Action Board (OYAB) includes individuals with lived experience and it outreaches to other youth with lived experience. In addition to the OYAB, we have 4 CoC Advisory Board members with lived experience. To ensure inclusion and to coordinate efforts, the CoC works with organizations that serve the indigenous people of Hawaii, this includes formal data sharing partnerships with Liliuokalani Trust & the Office of Hawaiian Affairs. The CoC also works closely with We Are Oceania, which serves the Compact of Free Association residents of Micronesian, Marshallese, and Palauan decent. LGBTQ+ providers such Hawaii Health and Harm Reduction (HHHRC) and Gregory House programs have leaders serving on the Advisory Board ensuring the the efforts to continue equity among these populations continue to be addressed. Similiary, there is an Advisory board position held by DV provider Child and Family Services.

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

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

**(limit 2,500 characters)**

1.As CoC lead agency, PIC aims to prevent & eliminate homelessness through open & inclusive participation of stakeholders representing different sectors & systems. The CoC solicits opinions through General Membership/board/committee & community meetings, an annual homelessness awareness conference, annual stakeholder surveys, focus groups, & key informant interviews.

The Member Relations and Advocacy Committees implement annual surveys soliciting feedback from stakeholders regarding the CoC’s service priorities, membership goals, & policy initiatives. The CoC facilitates focus groups and conducts interviews & surveys with community members to gather input regarding specific planning initiatives or applications for new funding resources. CoC members regularly participate in neighborhood board meetings to share information & gather community input. The CoC coordinates the Statewide Homelessness & Housing Conference annually in November, providing an opportunity for the community to collaboratively address challenges.

2.Information is communicated & solicited at CoC General, board, committee, & workgroup meetings, including opportunities for comments & questions. CoC meetings are open to the public. Meeting dates, minutes & agendas are posted to the website & sent to the listserv via newsletter in advance. CoC meetings maintain a participatory structure that encourages the free flow of ideas regarding improvements & approaches in preventing & ending homelessness on O’ahu.

3.The CoC complies with the ADA and provides information & materials to individuals with disabilities using accessible formats. Alternative formats (e.g., Braille or audio) are available upon request for all manners of providing feedback (online solicitation for public input, in-person solicitation for public input, solicitations for input at public events).

4.In July 2023, the CoC hosted a Strategic Planning event utilizing a facilitator/trainer with expertise in homeless services & housing. This event brought more than 70 stakeholders together & solidified our 10 Core Priorities. While there were several people at the Strategic Planning event who had lived experience, we also held a lived-experience specific event where a larger group of currently & formerly houseless individuals were able to review the CoC strategic plan & provide input. The CoC is currently working on addressing these priorities and will be implementing the new plan over the next 3 years.

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

	3. about how your CoC would determine which project applications it would submit to HUD for funding; and
	4. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.

**(limit 2,500 characters)**

1. On July 19, 2023, the CoC issued an RFP on its website and through its listserv requesting proposals from agencies providing shelter & supportive services to persons experiencing homelessness. The CoC emailed the RFP to a list of over 650 individuals representing over 70 organizations – 12 of which currently receive CoC funding and include YHDP programs. Many listserv recipients have not previously received CoC program funding. The RFP included a description of submission requirements & methods and the evaluation process for all project types, including new projects. The CoC announced acceptance of new project proposals from both CoC & non-CoC funded agencies at open public meetings including: Two RFP Information Sessions on July 20 and 21, 2023, the General Membership Committee meeting, and all other committee meetings during late July and early August. Community members who have not previously received CoC program funding are able to, and do, join these committee meetings.

2. The RFP instructed applicants to submit their hard copy proposals, which included 1 original & 5 copies, and 1 digital pdf combining all documents on a flash drive. The CoC also instructed potential applicants on how to submit their applications during the RFP Information Sessions on July 20 and 21, 2023. The RFP emphasized the importance of timely submission of applications.

3. The RFP included a thorough explanation of the process for determining inclusion and prioritization of projects in the CoC Program Competition as well as provided background on the CoC program and funding competition. The RFP and the CoC website also included the scorecards evaluators would be using for each project type. Additionally, the RFP included narrative guides for applicants to follow to ensure that they addressed all required criteria. The CoC reviewed this process and scorecards with evaluators and potential applicants during the Information Sessions.

4. The CoC complies with the ADA & provides information or materials to individuals w/disabilities using accessible formats. Alternative formats (e.g., Braille or audio) are available upon request for all communications regarding the application process including online postings, in-person meetings, and any other events.

## 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) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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- Frequently Asked Questions

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

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

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

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

**(limit 2,500 characters)**

1.The ESG program recipient for the O’ahu CoC is the City & County of Honolulu (City). The CoC’s Planning Committee (PC) includes representatives from the City & ESG sub-recipients, consultants with the 2 City departments responsible for ESG planning & fund allocation: Department of Community Services (DCS) and Budget & Fiscal Services (BFS). The PC conducts research using data from CES, HMIS, & the PIT Count to determine needs & to create a fiscal mapping document that identifies system gaps. The PC presents this research annually to the City and makes recommendations on how to allocate ESG funding across the 5 eligible categories of expenses: Shelter Operations, Street Outreach, Homelessness Prevention, HMIS, & RRH. In addition, the City requests input from the CoC on contract amendments and reallocation of funding across categories if the evaluation process determines that a subrecipient is underperforming.

2.The CoC participates in ESG evaluation & reporting through consultation with city representatives and ESG recipients. The CoC Planning Department works closely with DCS and BFS. Through these efforts, the CoC Planning Department and Housing & Planning Comm. review issues that are either programmatic and/or financial. This information is shared with the city to inform the CAPER.

3.CoC staff, PC members, and other community volunteers conduct an annual PIT Count of homelessness on Oahu and publishes a report on the findings. The CoC shares this report and the Housing Inventory Count (HIC) data on its website for transparency. The CoC includes the City when reporting and submitting information & data on the Oahu homeless population. Other reports include the City and County of Honolulu’s Consolidated Annual Performance and Evaluation Report (CAPER).

4.CoC staff & PC members work with DCS & BFS to develop actions plans that operationalize the Consolidated Plan (CP), which is updated every 5 years. Information on opportunities (e.g., new programming that can be leveraged and integrated into the CP) as well as trends or emerging needs are all communicated through CP action planning meetings, monthly CoC meetings, emails, & the CoC website.

<b>1C-3.</b>	<b>Ensuring Families are not Separated.</b>	
	NOFO Section V.B.1.c.	

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

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

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

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

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

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

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

**(limit 2,500 characters)**

The CoC provides a framework through which educational partners work together to reduce the risk of youth (re)entering homelessness, particularly when exiting a public system (e.g., release from corrections or “aging out” of extended foster care). Representatives from public systems and the youth service providers contracted by these systems to deliver direct services participate in monthly CoC meetings as well as CES meetings. The CoC collaborates with youth providers in planning, delivery, coordination of training or technical assistance, & resource development (awarded FY 2019 YHDP grant). The State Coordinator from the HIDOE Office of Curriculum Instruction & Student Support (OCISS)—Education for Homeless Children & Youth (EHCY) participates in CoC activities & is the regional representative for the National Association for the Education of Homeless Children & Youth (NAEHCY). The Coordinator shares OCISS and NAEHCY information with CoC members at monthly meetings.

1. The Homeless Youth Services Network (HYSN), a 50-member group of youth serving agencies, is a CoC member, as are all the youth housing service providers and Runaway Homeless Youth (RHY) providers working with unaccompanied youth on Oahu.

2 and 3. SEA and LEA: The CoC has a formal partnership with HIDOE, which is the state & local education agency for Oahu. Representatives have a participatory role in CES case conferencing.

4. School Districts: O’ahu’s 4 public school districts (Honolulu, Windward, Central & Leeward) are represented in the CoC through School Liaisons (McKinney Vento & State funded) who are focused on prevention & diversion services, and work through the OCISS.

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

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

(limit 2,500 characters)

The CoC adopted the following policies and procedures to ensure individuals and families who become homeless are informed of their eligibility for educational services. CoC funding recipients serving households with children must:

- 1)adhere to the local Educational Assurances Policy (EAP), which requires the identification of staff whose job is to ensure children are enrolled in school, consistent with HUD EAP and the Elementary and Secondary Education Act;
- 2)formally adopt and post an EAP;
- 3)file a signed EAP;
- 4)support family choice for selecting housing near child’s school;
- 5)assist DV families in enrolling children in a public school of their choice and with procedures to ensure safety;
- 6)offer families a letter verifying eligibility for services;
- 7)ensure access to transportation;
- 8)review rights with parents;
- 9)provide advocacy when educational rights are violated;
- 10)include education as a component of exit plans;
- 11)provide technical assistance on request; and
- 12)contact HIDOE when warranted.

AUW 211 obtains and disseminates information of educational rights/referrals specifically for families with children experiencing homelessness. All families remain eligible for certain rights or protections regardless of their circumstance. HIDOE school liaisons work closely with shelter and outreach providers to inform families and unaccompanied students of their rights under the McKinney Vento Act. The school liaisons are instrumental in ensuring that students are connected to services to receive free meals, transportation, and other school-related supports. HIDOE school liaisons also collaborate with youth shelters/agencies, Head Start, etc. to better meet the needs of families outside of a school's jurisdiction.

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

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

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



<b>9.</b>	<b>Tribal Home Visiting Program</b>	No	No
	<b>Other (limit 150 characters)</b>		
<b>10.</b>	Native Hawaiian Council- Liliuokalani Trust	No	No

	<b>1C-5. Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaboration with Federally Funded Programs and Victim Service Providers.</b> NOFO Section V.B.1.e.
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In the chart below select yes or no for the organizations your CoC collaborates with:

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

	<b>1C-5a. Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.</b> NOFO Section V.B.1.e.	
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Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

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

**(limit 2,500 characters)**

1. In 2019, DV service providers applied for & received funding for a DV-specific CES & a HMIS comparable data system. Training for DV CES & HMIS was conducted by the PIC teams; all policies & procedures are reviewed at the same time to ensure alignment. The CoC works very closely with DV service providers to ensure policies are appropriate for the population. CoC policies are consistently updated to include any amended protocols for DV data collection, service provision, & housing. Every month there is both a CES Oversight Meeting & a HMIS Data Committee meeting where both mainstream & DV service providers attend to review the prioritization matrix and policies & procedures.

2. The DV CES Coordinator regularly meets with PIC's CES and HMIS teams to strategize and ensure that housing and services provided in the CoC are trauma-informed and meet the needs of survivors. PIC CES joins DV CES case conferencing meetings and sub-committee meetings each Friday to provide support to both DV CES and Victim Service Providers. DV CES also presents on the DV subpopulation during CES Oversight Committee meetings. Prior to the monthly CES Oversight Committee meetings, PIC CES and DV CES meet to review DV CES housing data (placement rates, unassignment reasons, time standards to house, number of survivors served in a specific time period, etc). Together we can determine if there are gaps in services, data discrepancies, and overall conversations that need to be brought forth to the CES Oversight Committee. Most recently, PIC CES and DV CES have discussed the possibility of a need for PSH within the DV CES system. This will require collaboration between PIC CES, DV CES, Victim Service Providers, and the CoC as a whole. PIC CES and DV CES also created a system to ensure that survivors had protected, confidential access to programs that came out of CARES Act funding, as well as the Emergency Housing Voucher program for both State and City & County Housing Authorities. As a result, many survivors have ended up in permanent, stable housing.

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

(limit 2,500 characters)

1.The DV CES Coordinator provides ongoing protocol training to project staff. They are trained when hired, annually, & by request. Additionally, annually at the CoC’s statewide conference, DV service providers inform other providers about best practices in safety & planning protocols.

System entry begins at the confidential DV hotline monitored by providers, who screen for services using trauma-informed language. Depending on needs identified during the call, the survivor may be admitted to shelter & assigned a case manager there or connected directly to a DV housing case manager. Protocols require all case management to be trauma-informed & victim-centered. Staff may submit a request for special prioritization for the survivor based on client explanation of safety needs. DV housing case managers complete victim-centered housing needs assessments to identify appropriate housing. If survivors cannot be accommodated with DV-specific resources, their non-identifying information is shared with PIC CES. This increases access to housing & services through other programs. Housing case management that is victim-centered & trauma-informed includes connecting survivors to community resources in their area to promote safety. Safety protocol requires following Emergency Transfer Plan procedures if needed. Procedures require immediate transfer, trauma-informed care, client choice, collaboration with other DV providers, & safety plans. The 2022 VAWA changes have been implemented.

2.The DV CES Coordinator provides ongoing protocol training to CE staff. Monthly, PIC's CES team attends sub-committee meetings in which DV CES policies & procedures are discussed & reviewed.

DV CES takes a victim-centered approach to provide rapid access to the most appropriate housing & services. Regular case conferencing with DV providers helps quickly identify survivor needs. DV CES is designed to be trauma-informed & reduce the stress of experiencing homelessness as a result of DV by limiting assessments & interviews to only the most pertinent in resolving the immediate housing crisis. Cultural & linguistic competencies in CES assessment & referral activities ensure survivor perspectives are incorporated. DV CES operates the By-Number-List (BNL), a real-time catalog of survivors who need housing & services. Part of trauma-informed care in DV CES is ensuring the most vulnerable survivors are prioritized on the BNL so that feelings of safety are quickly restored.

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

(limit 2,500 characters)

CoC providers are trained in the complexity of responding to individuals and families fleeing domestic violence, privacy and confidentiality, and safety planning, including how to handle emergency situations at access points. The updated 2022 VAWA changes have been noted, implemented, and adhered to all levels.

Providers participating in the Coordinated Entry System (CES) shall provide necessary safety and security protections for persons fleeing or attempting to flee domestic violence, stalking, dating violence, or other domestic violence situations. Minimum safety planning must take into account the level of potential or continued risk of domestic or other violence to the participant, minor children, or any other vulnerable family member; their immediate needs, including medical and dental care, legal assistance, food, shelter, and clothing, and their health status, recent housing status, and history of homelessness. CoC providers make safety referrals to victim service providers as determined to be clinically appropriate or at the request of the client. If providers believe it necessary, they follow VAWA-compliant Emergency Transfer Plan procedures to request emergency transfer of assistance between housing units. These procedures include immediate transfer, trauma-informed care, client choice, use of preferred housing providers, interagency MOUs, referral to non-CoC services when appropriate, safety plans, safety-first networks, and training.

Providers participating in the CES work, in partnership with advocacy organizations/shelters serving survivors of domestic violence, ensure considerations are made to address the specific confidentiality needs of victims. These considerations include the following: Giving individuals and families the ability to decline housing in neighborhoods that would compromise their location, the choice to be entered anonymously into a separate database, and the right to have full access to housing options. Federal & Hawai'i State Laws protect victims of violence & prevent disclosure of identifying information or the location of DV residents to unauthorized persons.

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

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

(limit 2,500 characters)

1.The 2023 O’ahu PIT Count showed 21% of sheltered individuals experiencing homelessness and 25% of unsheltered individuals experiencing homelessness were DV survivors. While this is below national data of roughly half of women experiencing homelessness reporting DV, Hawai’i’s women cite intimate partner violence as a factor in their lack of housing. Women who have successfully managed to leave their abusers often find themselves with desperate housing and financial needs, compelling them to return to their abusers. Hawai’i’s high cost of living, food, transportation, and medical care converge with inadequate pay, unequal pay for women, lack of affordable housing, and practical barriers to accessing support (e.g., unmet needs for childcare, lack of transportation, inability to leave work) often make it difficult for survivors to achieve housing stability.

As mentioned previously, separate coordinated entry has also been established for DV survivors and is fully operational. When a survivor needs to access housing and services, they can access these resources without disclosing personal information. If resources are not available in the DV system, survivors are able to access additional services through the mainstream coordinated entry process, with their identifying information removed. Due to the confidentiality requirements of working with survivors, each DV housing provider utilizes their own internal HMIS comparable database to track participation as well as service utilization and needs.

2.DV service providers utilize the aggregate data from their databases to identify the following: Needs and trends among domestic violence, dating violence, sexual assault, and stalking survivors; increasing rates of homelessness among families experiencing domestic violence; longer stays in emergency shelter, especially for larger families, due to a lack of affordable housing; increases in single DV survivors exiting shelters and transitional housing to live with family or friends; and major utilizers of transitional housing as families, not single survivors. The data also shows the following: Single (individual) DV survivors tend to be chronically homeless and have entered DV or other homeless shelters multiple times; high rates of substance use and mental health issues exist among homeless DV survivors; there has been an increase in the number of survivors with emotional support animals; and that there is a need for housing that accommodates pets.

**&nbsp;**

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
	1. whether your CoC has policies and procedures that include an emergency transfer plan;	
	2. the process for individuals and families to request an emergency transfer; and	
	3. the process your CoC uses to respond to individuals’ and families’ emergency transfer requests.	

**(limit 2,500 characters)**

1. At entry, households are informed of the CoC policies & procedures emergency transfer plan. The policy, typically provided in a document form, states that in accordance with the Violence Against Women Act (VAWA), programs must allow participants to request an emergency transfer from one unit to another unit due to a lack of/perceived lack of safety. Requesting a transfer is available regardless of sex, gender identity, or sexual orientation. To achieve improved communication with the DV population specifically, PIC collaborated with DV Providers to access their 24/7 Domestic Violence Hotline. If any adult survivors of domestic or intimate partner violence, sexual assault, or stalking, with or without children, are currently experiencing physical or emotional abuse or are in imminent danger of abuse, we take immediate action to connect them with a DV Hotline to provide emergency shelter to ensure their safety. If a survivor is not seeking shelter services, the Crisis Hotline staff will assess and evaluate their situation. Based on their evaluation, they will provide necessary intervention and stabilization and connect the survivor to additional resources and more intensive services if required.

2. Emergency Transfer Requests: According to the Hawai'i Revised Statutes §521-80, a tenant can end a rental agreement of one year or less without any penalty, fees, or future rent liability if the tenant or a member of their immediate family residing at the dwelling unit has been a victim of domestic violence within the last ninety days prior to serving notice of early termination to the landlord. If the survivor is housed and seeking to request an emergency transfer to another location that will break the lease agreement, the participant will submit a written request to their case manager. The case manager and participant then notify the property management office. The participant's written request for an emergency transfer should include either: 1. A statement expressing that the participant reasonably believes there is a threat of imminent harm from further violence if they were to remain in the same unit; or 2. A statement that the participant is a survivor of sexual assault & the sexual assault occurred on the premises during the 90-calendar day period preceding the request.

3. Programs will honor requests from participants providing the request is in accordance with the CoC Policy and Procedure listed above.

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

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

(limit 2,500 characters)

1.The By-Number-List (BNL) managed by DV CES is a real-time catalog of survivors of domestic violence who need housing and services. The BNL aids in assessing participants' needs and helps to track participants' entry into, and exit out of, the CoC system. It is listed from most vulnerable to least vulnerable (maintaining Fair and Equal Access to CES housing programs and services) and does not contain any of the participants' personally identifying information (PII). DV CE covers the CoCs entire geographic area of the City and County of Honolulu. Child and Family Service (O'ahu DV CE provider) supplies survivors of domestic violence and sexual assault or stalking with housing opportunities throughout the island. If survivors cannot be accommodated with DV specific resources, non-identifying information, including VI-SPDAT score & household side, is shared with PIC CES. This increases survivors' access to housing & services available through the CoC, ESG, Dept. of Justice, and the Dept. of Health & Human Services programs.

2.The PIC and DV CES teams facilitate and collaborate in the monthly DV subcommittee meetings. During this time, the teams meet with victim service providers to discuss successes and challenges such as barriers providers face in safely housing their clients. Barriers that are repeatedly identified may be systemic. Bi-weekly case conference meetings also provide a space in which the PIC CES team, DV CES Coordinator, and victim service providers discuss real time barriers the survivors are encountering when matched to housing referrals including lack of employment or child care, location-based safety concerns, etc.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC:

1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and
2.	accounted for the unique and complex needs of survivors.

**(limit 2,500 characters)**

1. The CoC integrates the viewpoints and proficiency of survivors by involving members who work closely with this population. The CoC consists of 6 DV providers, including the Hawaii Coalition Against Domestic Violence. These groups contribute firsthand experience and knowledge of the challenges that survivors face and the difficulties they may encounter. Additionally, our Board of Directors has a Domestic Abuse Provider with over 30 years of experience working directly with the survivors. Understanding and addressing domestic violence (DV) requires a deep understanding of lived experience. DV is a complex and deeply personal issue that profoundly impacts individuals and families. It is critical to comprehend, address, and prevent domestic violence effectively. DV providers can support this by hiring staff with lived experience. This brings a human perspective to a complex issue, informs policy and practice, and provides essential support and resources for survivors. Listening to and valuing the voices of those who have lived through domestic violence is crucial for creating policy change.

2. Accounting for survivors' unique and complex needs, particularly in the context of trauma or difficult experiences, requires a compassionate and individualized approach. Whether someone has survived a natural disaster, a traumatic event, an abusive relationship, or any other challenging situation, providing support that recognizes their distinct needs and experiences is essential. Each survivor's experience is unique, and tailored support is crucial for healing and recovery. The CoC looks to its DV providers for guidance, who undergo more than 60 hours of domestic violence-specific training. These providers follow a trauma-informed approach, which creates a safe environment to promote healing and avoid re-traumatization. Additionally, the CoC is in good standing with the Hawaii State Coalition Against Domestic Violence and maintains an ongoing dialogue with its DV members to ensure that the needs of survivors are met.

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

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

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

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



3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

**(limit 2,500 characters)**

1. There is a strong LGBTQ+ community in Hawaii & in the CoC system. PIC reviews & updates the CoC's Policies & Procedures each year and can make changes whenever necessary if the CoC supports. Representatives from the LGBTQ+ community in the CoC sit as members of the Advisory Board & hold Committee Chair roles; they are involved in all policy updates. The CES Oversight Committee, which also contains LGBTQ+ members, reviews CES policies & procedures on a regular basis, including the anti-discrimination policy. There are several programs specifically serving members of the LGBTQ+ community, & those providers help train the CoC, influencing policy changes to ensure they remain trauma-informed & are meeting the needs. Recently, HHHRC hosted a Lunch & Learn for the CoC on the topic of LGBTQ+ cultural humility, an important aspect of a person-centered approach & trauma-informed care. In 2022, the CoC published a sub report from the PIT count specific to the LGBTQ+ community ("Sexual & Gender Minorities") & will be completing a second report within the next several months. Reviewing the statistics of these reports is a collaborative effort with our LGBTQ+ partners, as is exploring policy changes that may better support the community moving forward.

2. The collaborative applicant conducts regular monitoring & evaluation on all providers and requests to view policies & procedures. Issues or inconsistencies in project-level anti-discrimination policies highlight the need for the CoC to provide trauma-informed care training, or other best practice training, so the agency can develop a better policy consistent with the CoC's. The annual homelessness & housing conference hosted by the CoC has sessions on proper service provision & support for the LGBTQ+ community. This information should also assist providers in developing appropriate anti-discrimination policy.

3. Compliance with CoC policy is evaluated through regular monitoring & evaluation site visits.

4. Grievances regarding providers discriminating against participants are brought to the lead agency & Advisory Board. The Board will review the complaint & determine whether or not corrective action is required. If the grievance is found to be valid, the Board will require the provider to write a letter that includes their plan to mitigate any further non-compliance activities. A valid grievance will also result in a full review of the program's policies & procedures.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy.	
	NOFO Section V.B.1.g.	
	You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.  Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:	

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Hawaii Public Housing Authority	35%	Yes-Both	Yes
City and County of Honolulu Public Housing Authority	30%	Yes-Both	No

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

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

**(limit 2,500 characters)**

1. The establishment of the Hawai'i Interagency Council on Homelessness (HICH) in 2011 provided an opportunity for coordination between stakeholders, such as the Hawai'i Public Housing Authority (HPHA), the City and County of Honolulu, the CoC, and homeless service providers. The stakeholders collaborate in the development of policies to address homelessness throughout the state. One such policy relates to preferences for federal and state public housing resources as administered by HPHA. Housing placement preferences in state and federal programs (e.g., Section 8 HCV Programs, Federal Public Housing Programs) include priority preferences for families residing in a transitional shelter for the homeless and who have successfully completed a social service plan, along with their other priorities. Per state law, not less than 50% of available units are for applicants without preference, and up to 50% of available units are available for applicants with a preference. HPHA has aligned with the CoC housing and service system and looks forward to further developing a partnership with the CES. Partnering with CES would allow them to track progress in prioritizing access to housing resources for vulnerable families experiencing homelessness.

2. The Oahu CoC has been working with both local PHAs (State and City) to distribute Emergency Housing Vouchers (EHV) that were disbursed by HUD. Both PHAs have a homeless preference for these vouchers, and the CoC is excited to continue to build our relationship with the two PHAs. Over the last 2 years, the work completed with the PHAs has resulted in the creation of far more housing resources to those experiencing homelessness. Additionally, during the 2023 legislative session, the State PHA requested funding for landlord engagement services and damage mitigation funds; these asks were precipitated by the success of the EHV program. Promoting support for landlords has been a goal of the CoC's, as it would result in an increased supply of readily available units, to be used for those experiencing homelessness upon receiving HUD subsidized vouchers/other funding sources. Training on Housing Quality Standards (HQS) was completed by Landlord Engagement Program, operated by the Collaborative Applicant. This resulted in the State PHA accepting inspections conducted by non-PHA staff for the first time. The CoC anxiously awaits new housing vouchers directed at those experiencing homelessness in the future.

<b>1C-7b.</b>	<b>Moving On Strategy with Affordable Housing Providers.</b>	
	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	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	No
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

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

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

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

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		<b>Program Funding Source</b>
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

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

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

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

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

PHA
City and County o...
Hawaii Public Hou...

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

**Name of PHA:** City and County of Honolulu

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

**Name of PHA:** Hawaii Public Housing Authority

## 1D. Coordination and Engagement Cont'd

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

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

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

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

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	No

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	22
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	22
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

1. For project application evaluations, PIC & the researchers from UH Manoa ensure that a question specifically addressing how the program implements Housing First (HF) appears on all project narratives. The question reads: Explain how this project has/will adhere to a Housing First or Low Barriers model or approach - a. Explain what rules your project has/will have for participants and what happens if clients break these rules; b. Explain the project’s process for terminating participants from the program; c. How does/will the project ensure client choice in housing and services?

2. Factors & performance indicators:

- a. Are applicants allowed to enter a program without income?
- b. Are applicants allowed to enter the program even if they are not "clean & sober" or "treatment compliant"?
- c. Are applicants allowed to enter the program even if they have criminal justice system involvement?
- d. Are service & treatment plans voluntary, such that tenants cannot be evicted for not following through?

3. The CoC has implemented annual monitoring & evaluation (M&E) of all CoC funded agencies. Part of the M&E process involves an overview of agencies’ Policies & Procedures to determine if they are adhering to HF standards. If an agency is found to be in violation of HF, they are expected to make corrections to the Policies & Procedures within 90 days of the M&E. Additionally, the agency’s CES/HMIS data is examined for un-assignment reasons. If PIC sees un-assignment reasons that are not HF, PIC connects with the provider in violation & requests more information on the un- assignments. If there is a need, the CoC will require a corrective action plan for any provider who does not clearly indicate & practice HF in their programs.

While the CoC does not directly oversee non CoC funded programs, all providers must be aligned with HF principles. HF principles are regularly shared with the community. If programs are not part of the CoC system, they will still only get referrals from CES to programs that are HF. PIC is in the process of securing a CoC-wide HF training to ensure that all agencies have equal opportunity in understanding a) the scope of HF and b) the expectation & agreement that agencies within the CoC will operate accordingly. At the time of writing, PIC has received one proposal for a Housing First training, & details are being negotiated.

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

	Describe in the field below:
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;



2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

1.The CoC has 6+ partners that provide street outreach. Outreach workers are trained in best practices such as motivational interviewing, stages of change, & trauma informed care. The CoC is partnered with Language Services Hawaii; if a person encountered indicates they are not proficient in English during any encounter or intake, the worker can call LSH for translation services.

Outreach workers assist clients in obtaining IDs & other vital documents, provide transportation, & conduct initial screening/assessment/referral to CES access points. In this manner, the outreach workers facilitate participant access to services. The focus of street outreach is identifying those who are unsheltered & facilitating their access to an Emergency Shelter or other safe, stable housing option. Alternatively, if the individual is not ready for shelter, the goal is to provide harm reduction services. Identifying a person's needs & matching appropriate interventions to the assessed needs is crucial. VI-SPDATs are conducted during outreach if/when a person indicates both desire for housing and willingness to work with the outreach worker. Chronically mentally ill persons are outreached regularly by specialists over a longer period of time to build trust & engage clients in seeking treatment & housing.

2.CoC street outreach covers 100% of O'ahu.

3.Street outreach is conducted 365 days of the year. In order for outreach workers to be effective, they must gain the trust of those they encounter by consistently following up with clients. During severe weather events such as hurricanes, flooding, fire, etc., outreach workers are often the only point of contact for individuals and families out on the streets. Outreach is also conducted prior to enforcement of City ordinances, i.e., sweeps.

4.Street outreach serves hard to reach populations using an approach that emphasizes "meeting individuals where they are at" as well as customized/targeted approaches for subpopulations (veterans, seniors, IV drug users, etc). One example of a customized/targeted approach is the outreach conducted by DHS Adult Mental Health. In this approach, a psychiatrist is part of a street outreach team that aims to identify and support those with chronic mental illness experiencing homelessness. The support is in the form of medication management and referrals to Adult Protective Services for those clients who are most vulnerable or experiencing abuse.

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

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	1,374	438

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

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

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

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

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
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 works with UH's Richardson School of Law to coordinate annual training for providers on mainstream benefits. CoC partner agency, the Department of Human Services(DHS) operates the Benefit, Employment & Support Services Division (BESSD) which administers 9 public benefits programs. DHS provides PIC with up-to-date information on benefits, including changes to eligibility requirements, changes to qualifying purchases (i.e. benefit recipients able to use SNAP for hot food temporarily during crisis), changes to renewal/review timelines, changes to benefit amount caps, & information regarding the application process. PIC puts this information in the weekly newsletter, sends it directly to the listserv via email, and hosts Lunch & Learn sessions available to the entire CoC.

2.Participation of the healthcare partners and Medicaid health plans in CES ensure that partnering agencies' program participants have access to health insurance. The integration of Medicaid health plans into the CES supports the State's implementation of the 1115 Medicaid waiver amendment for pre-tenancy & tenancy supports for chronically homeless individuals. The CoC supports effective utilization of Medicaid resources through case conferencing activities. These resources are part of a more holistic approach to establishing safety, stability & self-sufficiency for clients of CoC funded projects. We have been working with our partners at the State Department of Health and the State Adult Mental Health Department to address the short supply of substance abuse and mental health treatment programs. The CoC is also working with state policy makers to fund Assertive Care Teams and other mental health initiatives within the CoC.

3. CoC partners promote SOAR certification of program staff by providing information on a) how the SOAR program can help their clients and b) how the SOAR program can make their jobs easier. This initiative increases access to SSI/SSDI for adults experiencing homelessness who also have a mental illness, medical impairment, and/or substance use disorder. Increased access to cash benefits for this vulnerable population can increase housing stability.

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

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.
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**(limit 2,500 characters)**

The CoC's primary motivation for providing non-congregate sheltering is to prevent the spread of any infectious disease and especially to protect high-risk individuals from infectious disease. Throughout the pandemic, providers moved to depopulate congregate shelters and transfer individuals & families into transitional and permanent housing. The CoC is currently working to secure additional sites (create more units) for non-congregate sheltering. Tiny homes and Kauhale Villages have been a viable non-traditional way of increasing affordable housing stock. These programs provide safe, healthy living space with minimal cost for construction and maintenance.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:

1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and
2.	prevent infectious disease outbreaks among people experiencing homelessness.

**(limit 2,500 characters)**

1. The CoC and the Department of Health started coordinating closely to develop CoC-wide policies and procedures during COVID. When an outbreak (of COVID, hepatitis, monkeypox, syphilis etc.) is discovered in the general community or in the encampments, the policy and procedure is for providers to notify both the Department of Health as well as Partners In Care. The DOH & CDC then give PIC the priorities for responding to the outbreak, as well as accurate & relevant information to be circulated by providers in the CoC. This information is disseminated in General Membership meetings and in the weekly newsletter. Work groups are formed to create detailed plans for addressing the outbreak. Depending on the situation, the groups may meet on a daily, weekly, or semi-regular basis. Work continues until the outbreak is contained or controlled. Partners In Care also consults with the CoC-partnered health centers - Waikiki Health, Kalihi-Palama, Waimanalo Health, Waianae Coast Comprehensive, and HHHRC - to determine the best procedures for the CoC to respond to infectious disease outbreaks.

2. In the past year, the CoC has collaborated with the Department of Health to increase Sexually Transmitted Infection (STI) testing among homeless populations given data indicating outbreaks among these communities. IHS, Project Vision, and HHHRC (local public health agencies & CoC partners) all provide mobile health services on the streets. Services include infectious disease testing, distribution of protective gear (masks, condoms, hand sanitizer), and provision of information on infectious disease.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC:

1.	shared information related to public health measures and homelessness, and
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	2. facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.
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**(limit 2,500 characters)**

1.Partners In Care, the O'ahu CoC, continues to disseminate relevant public health information to its cohort of over 70 providers (650 individuals). The information includes increased prevalence or outbreak of infectious diseases (COVID, hepatitis, monkeypox, syphilis, etc.) and the measures they can take to combat outbreaks in their program. Experts from the Department of Health’s Disease Outbreak Control Division conduct regular information sharing activities with the CoC. During monthly membership meetings and in provider specific meetings, members are continually updated with the latest information. During a recent General Membership meeting, partner agency HHHRC gave a presentation on the increasing rate of syphilis cases in women and newborns in Hawai’i. Providers were given information on how to prevent future outbreaks and how to treat infected individuals.

2.The COVID-19 pandemic helped the CoC to standardize and improve communication between public health agencies and homeless service providers. CoC representatives conduct regular touchbases with public health agencies such as the Queens Medical Center, all FQHS, and the health plans. Public health “Lunch and Learns” are also conducted on a regular basis and consist of updates as well as trainings. Outreach agencies have more specialized meetings focused on supporting their providers out in the field, including determining how to continue working while dealing with increased rates of infectious diseases.

Through a collaboration between the CoC-partnered health plans and the State’s MedQuest department, street medicine is now reimbursable by Medicaid. This means more integration of health services in homeless spaces – shelters, encampments, and parks, which will improve our mitigation of infectious disease outbreaks. The CoC would like to continue increasing the communication between public health agencies and homeless service providers so we can receive even better-quality information from health experts.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC’s coordinated entry system:

1.	covers 100 percent of your CoC’s geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

**(limit 2,500 characters)**

1.CES covers 100% of HI-501 geographic area.

2.The CE process primarily utilizes HMIS for data collection. Providers collect data required for CES as defined by the CoC, including “universal data elements” (in HUD’s HMIS Data Standards Data Manual & in PIC HMIS Policies and Procedures). All participants sign/verbally accept the HMIS Client Consent Form prior to collection of assessment data for CES. The VI-SPDAT assessment is entered in HMIS to put clients on a By Name List, where they will come up for referral. Housing referrals are made in HMIS by CES.

3.The Data Committee & CES Oversight Committee review the Policies & Procedures of CES regularly, and continuously get feedback from providers. Changes must be approved by the CES Oversight Committee, which has members that utilize CES as well as members with lived experience. For significant changes, the Advisory Board & General Membership are asked to approve; both committees also contain members that utilize CES & members with lived experience. P&Ps are reviewed by CoC members annually and an MOU is signed by the HMIS/CES Lead & the CoC Chair.

The CoC is reviewing our assessment tool & prioritization matrix (VI-SPDAT) to determine if/how it needs to be modified, or if another tool would better suit our community. Final decisions to be made by early 2024. The VI is criticized as invalid, unreliable, & racially biased. There is little justification for cutoffs between recommended housing resources. CES created a VI evaluation survey, shared with the entire CoC. 18 of 49 providers (37%) who responded have lived experience in homelessness, so this feedback is very valuable. CES has a Coordinated Assessment workplan with HUD TA to ensure the process is collaborative & thorough. PSH & RRH program participants were also asked to share their experience of being navigated through CES into housing, & how it could improve.

The CoC/CES is revising our written standards/policies & procedures, to be completed by the end of 2023. Small workgroups made up of individuals at all levels of the CoC (program managers, direct service staff, people with lived experience) will work on the community-driven portion of the written standards. The goal is to determine how the written standards/P&Ps are interpreted by community members & what changes will increase efficacy & fairness in provision of services to a vulnerable population.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
4.	takes steps to reduce burdens on people using coordinated entry.	
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**(limit 2,500 characters)**

1.CES facilitates weekly community-wide case conference meetings that include healthcare providers - which helps connect households who present at a healthcare facility to the homeless service system. Collaborating with a variety of community members in case conferencing increases our ability to reach those least likely to apply for services.

2.Once the VI-SPDAT is completed in HMIS, a household will appear on the CoC’s prioritization list, or By-Name List (BNL). The household will appear on the BNL according to a specific set of criteria - referred to as the prioritization matrix - designed to identify their level of need. The criterion for prioritization includes chronic homelessness, disabling conditions, VI-SPDAT score, & more outlined in the CES P&Ps. As mentioned previously, the CoC is currently evaluating the VI to determine if it is the right tool to capture vulnerabilities.

3.CES is transparent with providers who request specific housing interventions for their clients. CES informs providers which housing referrals are made less frequently due to space limitations. If a housing intervention is requested but not likely to become available in a timely manner, CES will encourage discussing other housing options with the client in an effort to secure permanent housing faster. However, a client-centered approach & participant choice are guiding principles of the coordinated entry process, and are especially crucial during the referral phase. Participants can reject services & housing referrals without repercussion. If a household declines a referral, they remain on the BNL until the next opportunity is available. CES also informs providers of other community resources (not part of coordinated entry) that are consistent with household preferences and may be quicker to provide permanent housing.

Additionally, CES monitors emergency shelters & transitional housing programs and provides housing navigation guidance to those that typically have a longer average time from project entry to residential placement. Housing navigation guidance emphasizes speed but also accuracy with regard to client preference.

4.The CoC is currently evaluating the CE assessment tool (VI-SPDAT). Among the criticisms of the VI is that the questions are invasive and/or unnecessarily complex. 50+ direct service partners have provided opinions on the VI questions, and CES has a Coordinated Assessment workplan with HUD TA; final decisions to be made by early 2024.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry–Reporting Violations.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

**(limit 2,500 characters)**

1. The Oahu CoC affirmatively markets housing and supportive services to eligible participants regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. The marketing strategy developed by the CoC ensures all people in different populations and subpopulations in the CoC’s geographic area, including people experiencing chronic homelessness, veterans, families with and without minor children, youth, and survivors of domestic violence, have fair and equal access to the coordinated entry process.

CES participating providers must make every effort to market access points to CES in as many ways possible including, but not limited to: Service provider and local coalition websites & social media, newsletters, street outreach.

2. Nondiscrimination is a guiding principle of the CES and as such, collaborating agencies must share and uphold that guiding principle.

All services coordinated through the Continuum of Care must be available to all eligible participants, regardless of actual or perceived race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, height, or weight. The CoC and its partners take all necessary steps to ensure that housing and services are administered in accordance with all applicable Federal, State, and local civil rights laws as specified in 24 CFR. 5.105(a), including, but not limited to: Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status; Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving federal financial assistance; Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color, or national origin under any program or activity receiving federal financial assistance.

3. All clients shall be informed of their right to access housing and services without discrimination, and of their right to initiate a grievance process if they believe they have been discriminated against.

All complaints and grievances can be mailed to the administrative office of Partners In Care.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/12/2023

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



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

(limit 2,500 characters)

1. In 2019, the CoC developed a partnership with researchers at the University of Hawaii (UH) to assess racial disparities within the CoC regarding service provision & outcomes. Each year, the HMIS team works with UH researchers to extract disaggregated race data for all service users during the previous year. Researchers then calculate racial equity based on overall service users compared to total homeless population, by service type, & by housing outcomes (e.g., exit destinations & recidivism). The CoC meets with researchers to discuss findings & determine next steps in addressing disparities. The CoC releases an annual equity report & adapts its processes based on findings. In 2022, the CoC began conducting racial equity analyses for sub-populations. The sub-reports are deep dives into any PIT count data considered notable. The data can help inform us what services are most needed.

2. According to the most recent racial equity analysis (done in 2023 for 2022), the demographics of clients who utilized homelessness services is roughly reflecting the demographics of the 2022 Point in Time count, with individuals identifying as White, Black, & Asian being slightly over-represented in service utilizers. Examining disparities in types of services accessed revealed that racial disparities were starkest for program types that require CES referral. For example, clients identifying as Native Hawaiian or Pacific Islander (NHPI) were over-represented in transitional & RRH programs, while those identifying as White & Asian were under-represented in these program types. Notably, previous disparities in PH-PSH program enrollments have improved; NHPI were no longer significantly under-represented in PH-PSH programs in 2022. Those services in which clients can self-select (e.g., emergency shelter) showed no significant disparities. As in previous years, NHPI were over-represented in exits to permanent destinations, while those identifying as White and Asian were under-represented. NHPI clients were also less likely to exit to literal homelessness while those identifying as Asian, White & Black were more likely. Clients identifying as White were also over-represented in exits to institutions & more likely to die while enrolled.

At time of writing, PIC's HMIS team has published two sub-reports based on data from the 2023 PIT count: One on Native Hawaiians & one on the elderly, both disproportionately represented in the homeless community.

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

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

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

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

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

(limit 2,500 characters)

The CoC has responded to these disparities by 1) investigating why and 2) developing a plan to respond. Given that racial disparities were most pronounced for services that require CES entry prior to enrollment, the CoC and researchers examined the average VI-SDPAT score, finding that individuals identifying as multiracial, White, and Asian had the highest average VI-SPDAT scores and were more likely to be enrolled in PSH programs, which require the highest scores for prioritization. Individuals identifying as Micronesian and African American, African, or Black had the lowest VI-SDPAT scores and were more likely to be enrolled in Rapid Re-housing programs, which have the lowest threshold. Thus, results suggested that VI-SPDAT scores contribute to racial disparities in service type and that racial disparities are introduced systematically through the assessment used in the CES prioritization process. In response, the CoC is collaborating with UH researchers and community organizations to conduct a comprehensive participatory needs assessment with populations over-represented in homelessness—Native Hawaiians—and who experience the most disparities (Micronesians and Samoans) In particular, this needs assessment would attempt to understand particular vulnerabilities and strengths of these groups in an effort to develop an CES assessment that is culturally-based, empirically validated, and does not introduce bias into our system. Additionally, this assessment will provide important information on what services these groups need and how the CoC can respond.

1D-10d.	<b>Tracked Progress on Preventing or Eliminating Disparities.</b>	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
	1. the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
	2. the tools your CoC uses.	

**(limit 2,500 characters)**

1. The CoC has a data-driven process in place for examining racial equity. In addition to the annual racial equity analysis, the CoC-UH research partnership investigates trends over time in racial equity. This approach helps the CoC understand which strategies are working (and which are not) to address disparities. Additionally, the CoC recognizes that social identities are intersectional, and has worked with researchers to examine service use patterns and outcomes by race, gender, household types, types of disabling conditions, and needs. The CoC has worked with researchers and homeless service providers to ensure that certain combinations of identities are not falling through the cracks (e.g., Native Hawaiian LGBTQ youth or Micronesian families). Understanding these different groups' experiences has been helpful in designing services and outreach approaches that are more tailored to their needs.

2. To facilitate this data-driven process, the PIC HMIS team has worked to disaggregate race data and to capture differences between ethnic groups (e.g., between Filipino and Japanese groups). Because Hawaii is racially diverse, understanding these groups' different experiences with the homeless service system is imperative for ensuring racial equity. Finally, the O'ahu CoC is a racially diverse continuum that regularly and systematically solicits feedback from its members belonging to under-represented groups in an effort to prevent racial disparities in service provision and outcomes. Having a combination of ongoing feedback from data and on-the-ground perspectives allows the CoC to rapidly detect emerging disparities within our system and pivot to address them effectively.

1D-11.	<b>Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC's Outreach Efforts.</b>	
	NOFO Section V.B.1.r.	
	Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.	

**(limit 2,500 characters)**

To engage individuals who currently have lived experience with homelessness, the CoC speaks with local leaders of homeless communities (e.g., Ka Po'e o Kaka'ako, Puuhonua O Waiānae (POW)) to identify interested community members. To engage individuals with lived experience, the CoC works with providers and advocacy groups to identify former clients who would be interested in CoC involvement. The Oahu Youth Action Board (OYAB) includes individuals with lived experience, and it outreaches to other youth with lived experience. OYAB has recently reactivated their Instagram account and is active on social media to engage youth in decision-making processes.

The Oahu CoC has worked closely with individuals with lived experience in a variety of ways. The CoC was awarded a Youth Homelessness Demonstration Program in 2019 based on an application that was created by youth with lived experience in homelessness. This program pulled youth who have lived experience together to create the Oahu Youth Action Board. This Board created the coordinated community plan that detailed the need for services for youth. OYAB members have continued to be involved and meet monthly to discuss updates to the grants, potentially helpful trainings, and ways to improve collaboration. The OYAB has become a permanent committee within the CoC and has a representative sitting on the Advisory Board of the CoC. The Oahu CoC has 4 members with lived experience on the Advisory Board. Individuals with lived experience have also participated in talk story sessions regarding this NOFO. Recommendations and suggestions were shared with CoC members and implemented in many programs.

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

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	30	8
2.	Participate on CoC committees, subcommittees, or workgroups.	25	8
3.	Included in the development or revision of your CoC's local competition rating factors.	5	5
4.	Included in the development or revision of your CoC's coordinated entry process.	5	5

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

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

**(limit 2,500 characters)**

Individuals with lived experience in homelessness who have participated in CoC activities have been provided with opportunities for professional development and employment. A recently created council for those with lived experience (OLEC) has been created and will further the CoC’s ability to share goals and strategies with individuals who have lived experience, past or present. Peer specialists are part of several YHDP programs and CoC programs. Peers are those individuals who have had similar histories to those accessing services through CoC providers. Peers can have similar histories, disabilities, be of similar age and/or sexual orientation. Youth involved with the Oahu Youth Action Board have requested training on a variety of issues including resume building, self-advocacy, CPR, and other skills that have helped them access work opportunities within the CoC and in different career paths. Lunch and Learn sessions are open to all CoC members, including those with lived experience, and cover topics such as community health worker training and other practical skills.

Several people with lived experience sit on the Advisory Board as well as other committees within the CoC. 36% percent of the PIC Advisory Board report that they have been precariously housed at some point, and 21% report they have experienced literal homelessness. There are two spaces on the CoC Advisory Board reserved for those with lived experience, and an additional two chairs are currently filled with individuals with lived experience (total of four acting CoC Advisory Board members with lived experience).

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	
	Describe in the field below:	
1.	how your CoC routinely gathers feedback from people experiencing homelessness;	
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and	
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.	

**(limit 2,500 characters)**

1. The CoC consistently conducts outreach to people experiencing homelessness and gets good feedback once trust has been established.
2. The CoC facilitates service fairs led by those with lived experience. It is important for people with lived experience to lead service fairs because they have excellent insight on what services are needed. The YHDP was led by youth with lived experience, and they continue to monitor and evaluate programs in YHDP. Additionally, as mentioned previously, 18 of the 49 providers (37%) who responded to our VI-SPDAT evaluation survey identified themselves as having lived experience.

During the CoC's 2023 Strategic Planning session there were several members with lived experience in attendance. The host of that event returned to Oahu one month later to meet with a group consisting of only people with lived experience to review and get feedback on the Strategic Planning goals determined in the initial session. This group gave their full support of the CoC priorities, and discussed how they would like to see them implemented.

At the 2022 Homeless Awareness Conference, the Oahu Lived Experience Council (OLEC) spoke as a panel, answering questions regarding their experience with homelessness in this CoC and what kind of system change they would recommend. At the 2023 conference, there will be more opportunities for people with lived experience to speak. For the session "Growing Up Homeless In Hawaii", the presenters will be POW Youth, who have lived experience. The speaker for the Outreach session is also a person with lived experience, currently employed at Partners In Care. The Awareness Committee, which does all the conference planning, has a person with lived experience in this CoC as its chair.

3. A primary challenge in working with individuals who have lived experience is paying them for their time and services. There is limited funding to address this challenge. YHDP stipends were only paid out to the youth for the first year. Since then, stipends have had to come from a planning fund at PIC.

Another challenge that has come up is the need for different voices. Programs often have the same individuals with lived experience speak on behalf of their community. PIC has been requesting a larger cohort of individuals with lived experience. Facilitator training has been offered, as well as stipends for specific activities. Providing a stipend shows respect and value for their time and input.

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

**(limit 2,500 characters)**

1. Our CoC assists with writing & passing measures that will have a positive impact on our community, especially through our Advocacy Committee during the Legislative Session. The CoC has meetings during & outside of session with officials & policy makers, especially those on the Health, Human Services & Homelessness Committee, as well as the finance committees. CoC partners participate in legislative hearings at the state & local level, also submitting testimony & comments to officials whenever possible. CoC members meet with department heads, the governor, & the mayor on a regular basis to share information for improving policies.

During the 2023 Legislative Session, "Creation of Affordable Housing" was one of the CoC's three priorities. The CoC supported the following: The use of General Obligation bonds to assist with housing development, an increase in the conveyance tax collected for the State of Hawaii Rental Housing Revolving Fund, & the rehabilitation of Hawaii Public Housing Authority units sitting empty due to need for repairs. All these measures would create new housing and/or open up units not currently utilized. At the City level, the CoC has supported an Empty Homes Tax program that focuses on empty units in the community currently unavailable to rent. These units decrease the amount of housing available to the community. Other measures supported by the CoC in recent years include the 201H program and Bill 7, which provides a cut in costs normally associated with the building of affordable housing. The CoC will continue to support the development of affordable housing during the 2024 legislative session & at the City Council.

2. Over the last several years, we have been able to get waivers for the construction of affordable housing projects. Governor Josh Green has signed several emergency proclamations that have decreased the number of barriers associated with building affordable housing. The waivers allowed for the production of units in a timely manner as well as the creation of several Kauhale villages (Hawaiian community of small homes and community areas for eating, bathing etc.). Over the last year, several such villages have been created to meet the needs of those experiencing homelessness in Hawaii. This model of housing enables the formation of supportive communities.

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

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

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

1E-1.	<b>Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice.</b> NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	08/15/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	08/15/2023

1E-2.	<b>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.</b> NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
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1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes



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

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	23
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC collects and analyzes housing data for project applicants primarily through HMIS APR exports and project narrative questions. All projects that house participants in permanent housing were scored using scorecards developed by the CoC in collaboration with researchers at the University of Hawaii (UH). Approximately 20% of scorecard criteria for renewal projects included criteria based on objective measures of housing process and outcomes (e.g., average time from entry to placement in housing; the percentage of clients exit to permanent housing). Project applicants submitted this data by answering questions in the project narrative as well as by submitting the HMIS APR for the grant period. Additionally, programs with external evaluators are asked to submit any external evaluation reports. Evaluators considered all data sources when scoring the application.

2. Approximately 4% of the overall project score for renewal projects was based on how long it takes to house clients in permanent housing (e.g., “1. On average, time from project entry to residential placement is 15 days (RRH), 30 days (DV RRH), or 180 days (PSH & TH)”). This data was available in the projects’ APRs as well as provided by the program in the project narrative.

3. Scorecard criteria regarding housing is adjusted based on the type of program (e.g., ideal average time from entry to placement is 15 days for RRH and 30 days for DV RRH), with the understanding that RRH clients have fewer vulnerabilities than DV RRH clients (and both likely have fewer vulnerabilities than individuals prioritized for PSH). Additionally, project narrative questions specifically ask applicants to detail client needs and barriers to services, and evaluators are trained to consider these special populations when scoring and ranking projects.

4. The CoC presented a funding scenario to the evaluators in which Parents and Children Together (PACT) and Women In Need (WIN) projects were funded in Tier 2 as opposed to not funded at all, which is what would have happened based on their raw scores. Partners In Care reminded the evaluators that PACT and WIN both serve domestic violence survivors, a vulnerable and hard to serve population. Even though these projects may result in lower performance levels for the CoC, the evaluators chose to request Tier 2 funding for PACT and WIN.

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

**(limit 2,500 characters)**

1.The CoC developed scorecards in collaboration with researchers at the University of Hawaii at Manoa. The rating factors were reviewed & approved by non-conflicted members of the CoC’s Planning Committee & Advisory Board. The Advisory Board is composed of 15 members, and Native Hawaiian/Pacific Islander makeup the largest percentage (43%). Native Hawaiian/Pacific Islander is also the most over-represented group in the local homeless population. While they make up approximately 10% of the total population on O’ahu, they represent more than 35% of those experiencing homelessness. The second most represented group on the Board is Asian at 36%. When considering races, one or in combination, individuals identifying as white make up 50%, 43% as Native Hawaiian/ Pacific Islander, 36% as Asian, followed by American Indian/ Alaskan Native/ Indigenous at 14%, and Portuguese at 7%.

2.The Evaluation Team was racially diverse & included individuals identifying as Multiple Races (3) and Asian (1). All three evaluators who identified as Multiple Races identified as part Native Hawaiian. Therefore, 75% of the Evaluation Team identify as part of O’ahu’s most overrepresented race in homelessness. The final rankings were reviewed & approved by the non-conflicted members of the Planning Committee & Advisory Board. As stated previously, members identifying as Native/Hawaiian Pacific Islander make up the largest percentage of both the Board & local homeless population.

3.The CoC’s RFP emphasized promotion of racial equity as a priority on a system, agency, & program level. It required reporting of how a project advanced equity, programmatic changes needed to make participant outcomes more equitable, and if there is a plan to make those changes. Agencies reported their projects’ racial demographics, so evaluators could determine the degree to which they reflected the demographics of those experiencing homelessness.

The scorecards included equity factors at all levels; approximately 12% of the total projects’ scores were based on those questions. Evaluators paid particular attention to the degree to which the projects’ racial demographics reflected those of the local homeless population. If the demographics did not reflect a high proportion of Native Hawaiian/Pacific Islanders served, the agency could still receive points for identifying what programmatic changes they could implement to eliminate barriers to participation for this community.

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

Describe in the field below:	
1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC’s local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

**(limit 2,500 characters)**

1. The CoC’s written process for involuntary reallocation allows the reallocation of excess funding and/or reallocation of funding from low-performing projects to new projects with the intent that the new project(s) will be higher-performing and fit an emerging need in the CoC. The CoC evaluated project applications based upon alignment with HUD priorities, monitoring findings, degree to which program promotes equity, data quality, objective performance measures, system-level need for the project, cost-effectiveness, & financial performance. The Evaluation Panel, comprised of 4 independent evaluators, scores applications using scorecards based on these criteria. Evaluators then rank projects and make reallocation recommendations based on project scores and system need, considering the length of time the project has been funded (i.e., a newer project may need more time to demonstrate effectiveness) and project location or target population (i.e., whether reallocation would create a gap in services based on geography or capacity to serve an especially vulnerable or hard-to-reach population). Non-conflicted CoC Advisory Board members review and approve Evaluation Panel recommendations.

2. The CoC identified a low performing project this year. Utilizing the process described in element 1 of this question, the decision was made to reallocate a portion of these funds.

3. The CoC generally reallocates 5% of funding for new programs. This year, the CoC will be reallocating \$455,680 from a low-performing project to a new project, with the anticipation that the new project will be higher-performing.

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

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

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/06/2023

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/06/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank—if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	
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**You must enter a date in question 1E-5c.**

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

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	
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**You must enter a date in question 1E-5d.**

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

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

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

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

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

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

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

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

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

**(limit 2,500 characters)**

1. DV Service Providers were awarded DV Bonus funds in FY 2019 to create and implement a DV CE System for the Oahu Continuum of Care. Within the past two years DV providers have been taking part in biweekly conferencing meetings with the DV CE Team and the regular CE team to ensure survivors are being appropriately coordinated through the housing process. The VI-SPDAT generates the Coordinated Entry System (CES) By-Number-List (BNL). The DV BNL shares no identifiable information other than family size, therefore adhering to the most up to date VAWA requirements (2022) and ensuring the survivor's confidentiality and security.

2. Yes, DV housing and service providers in our CoC are using a HUD-compliant comparable database in compliance with the FY 2022 HMIS Data Standards.

3. Yes, our CoC including the DV comparable database is compliant with the 2022 HMIS Data Standards, as well as the 2023 updated standards going into effect on October 1, 2023.

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

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	1,550	94	1,550	106.46%
2. Safe Haven (SH) beds	48	0	48	100.00%
3. Transitional Housing (TH) beds	1,005	30	1,005	103.08%
4. Rapid Re-Housing (RRH) beds	438	6	467	108.10%
5. Permanent Supportive Housing (PSH) beds	2,092	0	1,204	57.55%
6. Other Permanent Housing (OPH) beds	938	0	80	8.53%

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

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

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



**(limit 2,500 characters)**

1. Permanent Supportive Housing rates are below 85% because HUD VASH is not an HMIS participating project. For OPH, the rate is below 85% because the Emergency Housing Voucher program, as well as City & State Section 8 programs, are not HMIS participating projects. The CoC will be strategically seeking partnerships with the entities that do not currently utilize HMIS. The CoC will also increase units input to the HMIS that are funded by various other sources; one example of units that are non-CoC funded but will be participating in the CoC/HMIS is the newly developed kauhale (tiny homes) by the Governor’s Office. Additionally, CES will be working on increasing system flow and quick housing placement to improve bed coverage rates.

2. Over the next 12 months, the CoC will utilize the increase in planning dollars to fund an additional staff person who will strategically seek partnerships with the entities who do not currently utilize HMIS.

The CoC will utilize PIC’s LEP team and the housing database to help identify units funded by other (non-CoC) sources to be utilized by the CoC & input to the HMIS. Additionally, the CoC’s weekly meetings with the Governor’s Office will allow us to maintain communication & continue strategizing on solutions for increasing our bed utilization through new units.

CES has implemented a policy requiring that Chronic Homeless Verification and Disability Verification must be uploaded to HMIS and verified by the CES team prior to receiving a referral to a housing program that requires these documents.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC’s FY 2023 HDX Competition Report to the 4B. Attachments Screen.	
	Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes

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

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/23/2023
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<b>2B-2.</b>	<b>PIT Count Data–HDX Submission Date.</b>	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023
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<b>2B-3.</b>	<b>PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.</b>	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

1. While planning for the 2023 PIT Count, the O'ahu CoC held specially designed meetings with youth service providers to plan how best to capture the amount of youth experiencing homelessness. Just prior to the Point In Time Count, youth providers asked their unaccompanied youth clientele to share information among their peers about the Count, including how important it is to participate in the survey. There is a strong bond between many of our youth who are experiencing homelessness. They often rely on each other for safety and access to food and services. This word-of-mouth strategy was intended to maximize youth numbers captured in the Count.

2. Outreach providers for youth experiencing unsheltered homelessness conduct outreach throughout O'ahu on a regular basis, as they take pride in continuity of care. Therefore, these providers are aware of the locations at which these youth spend time. Additionally, providers at drop-in centers work on building trust, enabling unaccompanied youth to share where they and their friends stay on a regular basis. The youth homeless service providers are able share all of this information with Partners In Care in preparation for the PIT Count.

3. Youth (18-24) experiencing homelessness were involved in the PIT Count as counters. They were encouraged by youth service providers to volunteer as counters. The youth experiencing homelessness that make up the O'ahu Youth Action Board (OYAB) participated as counters and were also given the opportunity to review the results of the Count.

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

(limit 2,500 characters)

1. Not Applicable, no changes.

2. One key difference in the unsheltered PIT Count was that in some of the regions, the team went out twice, at two different times. This choice was made based on previous count feedback from providers stating that sending out a first and second wave of volunteers would make for a fuller count of those areas in addition to making ground operations smoother.

3. The HMIS team cannot confirm that this new strategy in fact provided a fuller count, based on the data received. However, based on provider feedback, it did succeed in making the survey more tactically feasible.

## 2C. System Performance

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

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

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

**(limit 2,500 characters)**

1.CoC Planning & Housing and Data Subcommittees identify risk factors for first time homeless through reviewing HMIS data collected on individuals who are first-time-homeless through reviewing HMIS data collected on individuals who are first-time-users of ES, SH, TH, or PH to identify factors that are prevalent, such as relating to income, experience of DV, release from incarceration or mental health facility. The PIT Count process also provides information on risk factors through survey questions.

2.The CoC has multiple strategies to address individuals and families at risk of becoming homeless. CoC partners collaborate to address system issues such as income inequality and lack of affordable housing. Providers deliver prevention and diversion services for all at risk of homelessness: Survivors of DV, veterans, system-engaged youth, low-income households, Native Hawai'ians, and those with high-needs such as addictions and/or mental health challenges. One prevention strategy utilized is the promotion of activities that enhance social integration and facilitate transitions into stable housing for individuals exiting public systems (justice, mental health, child welfare) such as Community Court and LEAD Pre-Arrest Program. Landlord engagement (mitigation and mediation, crisis management and response via a landlord crisis and question call line) is helpful to prevent eviction and homelessness, as is utilization of legal resources such as LASH and the landlord/tenant hotline. There are also some limited rental subsidies and RRH for at-risk households. High need individuals are connected with Community Care Services (CCS) case managers assigned by Medicaid behavioral health plans, helping to provide stabilization. The CoC website serves as an online information hub that provides information on a range of resources and services to prevent homelessness.

3.PIC (including HMIS-CES staff), oversees strategies to reduce or end the number of persons experiencing homelessness for the first time. Partners In Care is the Collaborative Applicant, HMIS and CES Lead. CES & HMIS work in partnership with the Office of Homelessness and Housing Solutions to keep an up-to-date list of agencies who can provide homeless prevention resources.

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

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:
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1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

<b>2C-2.</b>	<b>Length of Time Homeless—CoC's Strategy to Reduce.</b>	
	NOFO Section V.B.5.c.	

In the field below:
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1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
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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.Strategies to reduce LTH: a. strengthening of performance & accountability measures for service providers; b. establishing fair & reasonable expectations of clients in ES, safe havens, TH & RRH to move towards independence as quickly as possible, & c. equipping them for success through provision of interventions and resources that address barriers to housing stability, within a Housing First/low barrier framework. The CES is the CoC approach to organizing & providing services to persons experiencing a housing crisis. Persons seeking assistance are directed to defined entry points, assessed in a uniform & consistent manner, prioritized for housing & services based upon acuity levels, & linked to available interventions.

2.The CoC identifies individuals & families with the longest LTH through the BNL. The BNL includes date of first entry into homelessness based upon HMIS data. The BNL is reviewed during CES case conferencing occurring weekly for individuals and families, monthly for youth and veterans. Attendees collaborate to identify housing resources for clients who are unsheltered using the VISPDAT & TAY VI-SPDAT which prioritizes clients based upon their VI scores. Homeless providers communicate project vacancies, either bed, unit or voucher to the CES on a real time basis through the HMIS. The VI-SPDAT gets updated at least annually for individuals who are in the CES, and increased chronicity (length of time homeless) will result in an increased VI-SPDAT score which will prioritize them for available housing.

3.PIC (including HMIS-CES staff), supported by the CoC board & subcommittees, oversees strategies to reduce LTH.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section V.B.5.d.	

In the field below:

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

**(limit 2,500 characters)**

1. The CoC works to increase the speed at which clients in these programs receive Permanent Housing (PH) as well as the number of exits from these programs to PH. PIC’s CES team hosts post-referral conferencing with “providers of record” & the housing programs. These meetings & the accompanying comment threads are meant to decrease the time from when a household receives referral for a PH resource to when they secure PH. PIC’s LEP team continues to assist providers with unit search, utilizing their relationships with landlords. LEP helps to both increase the speed at which clients are housed & increase the number of successful exits to PH. Additionally, CES works with providers to determine if a non-traditional form of PH, such as a care home or shared housing, would work for a household. Placements in non-traditional housing allows more people to be permanently housed and may also increase the PH retention rate due to increased access to services (care home) and increased socialization/decreased financial burden (shared housing). The braiding of funding is another strategy for increasing exits to PH. The CoC is prioritizing PH in its application for HUD funding, thus maximizing funding for those programs & increasing the number of households that can receive PH placements. The CoC looks to other systems for additional funding of other resources.

2. The CoC increased the rate of households in PH exited to PH because of the EHV program. Before EHV, CES did not have resources to prioritize households in PH projects for other PH. When presented with EHV, CES elected to prioritize move-on households (in RRH, PSH, OHN etc.) for the vouchers. As far as PH participants exiting to non-EHV PH, CES continues to encourage housing programs to apply households for affordable housing. Many of these community resources are equally or more appropriate than their current PH project. When Section 8/Public Housing lotteries open, CES informs providers during case conferencing, & announcements are sent to the entire CoC. Regarding PH retention, CES assists in increasing the rate of retention through promotion of homeless prevention services. The team works with SOHHS to maintain a current list of prevention resources on the PIC website. CES encourages access points to connect households to these resources to prevent recidivism.

3. The CES Oversight Committee is responsible, & PIC is the entity that staffs the CES.

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

(limit 2,500 characters)

1. HMIS monitors returns to homelessness on a quarterly basis across the CoC & within the projects. Additionally, CES’s major prioritization criteria (chronic homelessness, disabling conditions, VI-SPDAT) help identify who returns to homelessness. Even for a new participant, the vulnerabilities help indicate likelihood of recidivism. Weekly CES case conferencing brings together homeless service providers, healthcare providers, DOE liaisons, etc. Discussion among a variety of stakeholders with differing knowledge improves identification of recidivism risk factors in participants.

2. Once risk factors are identified, providers discuss what supports may promote success in retaining housing. CES facilitates a separate Ohana Conference for more challenging cases. Providers can request to continue/re-start case conferencing for clients who are housed to promote housing retention. The CoC emphasizes prevention & diversion strategies to reduce recidivism. CES's transfer policy is a diversion strategy. CES is working on structuring Clarity HMIS so that providers must attempt a transfer before exiting to homelessness. CES & SOHHS maintain a current list of prevention resources on the PIC website. Increasing income for all participants is important to the CoC. It is particularly important for reducing recidivism rates of RRH participants. These households are at high risk of recidivism if they cannot afford rent upon program end. Providers link clients to job fairs, programs for resume-building & job search, and programs that mitigate barriers to employment i.e., access to transportation & required attire. The CoC also encourages all programs to maximize resources provided to households at exit to help reduce the recidivism rate. Resources should include the link to PIC’s Landlord Engagement Program form and the numbers for the landlord-tenant hotline & LASH. If a participant has behavioral health issues, they should be connected to BH services and a CCS case manager if eligible. Finally, the CoC stresses follow-up/aftercare to enhance housing stability. CoC-funded projects are required to offer supportive services (for health, youth education, employment, social inclusion) beyond participant exit.

3. PIC (HMIS/CES staff), Data Committee, & CES Oversight Committee is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

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

(limit 2,500 characters)



1.The CoC is represented on the Hawaii Workforce Development Council and the O’ahu Workforce Improvement Board to advocate for programs that might better serve homeless persons. CoC partners (local government, Hawai’i Appleseed Center for Law and Economic Justice) support research, policy development, advocacy and system change to address income inequality as a major driver of homelessness.

CoC partners provide services that help increase employment income such as linkages to employment training and education opportunities (GED classes, certification or degree programs offered by DOE Adult Programs or community colleges) that can help individuals secure higher wages. Close case management involves both linkage to, and follow up on, these services.

CoC partners also provide supportive services to address prevalent barriers to employment such as resources for transportation (i.e., free bus passes for shelter residents to travel to and from job interviews/work until a paycheck is received). Case managers connect clients with DHS’s Child Care Connection program to address the childcare barrier.

2.CoC partners participate in training from Job Corps on how to explain the program to clients, who are eligible, and how clients can get enrolled. Mainstream employment organizations are included in CoC-connected service fairs in numerous locations across the island. Additionally, a homeless service provider is embedded in the American Job Center Hawai’i to deliver core services, facilitate access to programs & resources, and provide information on job hotlines or call centers that can assist with questions about job loss, unemployment benefits and job training.

3.PIC, including HMIS-CES staff, is responsible for overseeing the CoC’s strategy to increase jobs and income from employment. The Planning and Housing Committee is also involved in CoC strategy and have conducted job fairs in the community in an effort to attract individuals with lived experience to access jobs within the homelessness services sector.

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

(limit 2,500 characters)

1. Specific strategies used by the CoC and CoC funded partners to increase nonemployment cash income are: a) Use of intake assessment protocols that assess eligibility for any cash benefits such as Supplemental Security Income (SSI), Social Security Disability Income (SSDI), or unemployment benefits, for individuals who may have become unemployed through no fault of their own and thus are eligible for unemployment insurance. b) Screening conducted for the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), & General Assistance (GA), as well as health insurance coverage eligibility. Non-veterans are typically eligible for HI Medquest services and participants are assisted in the application process. Vets are linked to VA medical benefits as needed. c) Case management services that have a direct link to obtaining non-employment cash income. This includes working with clients to gather any missing vital documents that may be required (birth certificate, SS card, ID), and assisting with completion of paperwork to receive non-employment cash income.

2. PIC, including HMIS admin staff, oversee and implement the CoC's strategy to increase non-employment cash income. The Hawaii Department of Human Services, Benefit, Employment & Support Services Division (BESSD), Homeless Programs Office (HPO) is a CoC member. BESSD provides access to monthly benefits including Temporary Assistance for Needy Families, General Assistance, Childcare Connection, and the SNAP programs.

### 3A. Coordination with Housing and Healthcare

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

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

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

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

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

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

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

Project Name	Project Type	Rank Number	Leverage Type
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) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

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

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

**(limit 2,500 characters)**

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

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

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

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

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

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

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

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

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

(limit 2,500 characters)

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

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

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

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

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

## 4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/26/2023
1C-7. PHA Moving On Preference	No		
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/19/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/19/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting	09/26/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/18/2023
1E-2a. Scored Forms for One Project	Yes	Scored Form for O...	09/25/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/18/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/25/2023
1E-5b. Local Competition Selection Results	Yes	Local Competition...	09/25/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HDX Report	09/18/2023
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No	Letters of Support	09/25/2023



## **Attachment Details**

**Document Description:** PHA Homeless Preference

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Letter Signed by Working Group

## **Attachment Details**

**Document Description:** Housing First Evaluation

## **Attachment Details**

**Document Description:** Web Posting

## **Attachment Details**

**Document Description:** Local Competition Scoring Tool

## **Attachment Details**

**Document Description:** Scored Form for One Project

## **Attachment Details**

**Document Description:** Notification of Projects Reduced

## **Attachment Details**

**Document Description:** Notification of Projects Accepted

## **Attachment Details**

**Document Description:** Local Competition Selection Results

## **Attachment Details**

**Document Description:**

## **Attachment Details**

Document Description:

## **Attachment Details**

Document Description: HDX Report

## **Attachment Details**

Document Description:

## **Attachment Details**

Document Description:

## **Attachment Details**

Document Description:

## **Attachment Details**

**Document Description:** Letters of Support

## Submission Summary

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

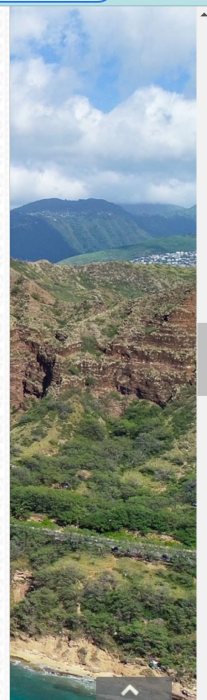
Page	Last Updated
1A. CoC Identification	08/03/2023
1B. Inclusive Structure	09/26/2023
1C. Coordination and Engagement	09/25/2023
1D. Coordination and Engagement Cont'd	09/26/2023
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/26/2023
2B. Point-in-Time (PIT) Count	09/25/2023
2C. System Performance	09/25/2023
3A. Coordination with Housing and Healthcare	09/20/2023
3B. Rehabilitation/New Construction Costs	09/20/2023
3C. Serving Homeless Under Other Federal Statutes	09/20/2023

<b>4A. DV Bonus Project Applicants</b>	09/20/2023
<b>4B. Attachments Screen</b>	Please Complete
<b>Submission Summary</b>	No Input Required

**1c-7. PHA Homeless Preference**

**HI-501**

**Partners In Care – Oahu Continuum of Care**



**Q.11 Is there a homeless preference?**

A.11 Yes. If you are placed on the waiting list and you are a Family certified as receiving housing assistance through a program for the homeless administered by the City and County of Honolulu, you will have a preference. No more than twenty-five percent of the Vouchers issued in one year shall be allocated to homeless Families under this preference.

**Q.12 If I do not live on Oahu but want to move to Oahu, can I apply?**

A.12 You may apply as long as you meet the income and eligibility requirements. However if you do not currently live on Oahu and are offered a housing choice voucher from us, you will have to lease a place on Oahu for the initial minimum term.

**Q.13 Can people pass on a voucher to other family members who would not qualify?**

A.13 The Section 8 voucher is not transferable.

**Q.14 Will people already on the wait list have priority over new applicants?**

A.14 YES. We will completely exhaust the current waiting list first before going to the new waiting list.

**Q.15 Will families be able to find a rental unit?**

A.15 Approximately 40-50% of families currently being processed off the waitlist have stated that they intend to rent their current unit. A big factor in renting a new place is the requirement for a security deposit. Section 8 does not provide a deposit so families must rely on savings or assistance from family to provide the deposit.

### More information:

#### Small Area Fair Market Rents

- [Federal Fiscal Year 2023 Small Area Fair Market Rents](#)
- [Federal Fiscal Year 2022 Small Area Fair Market Rents](#)
- [Federal Fiscal Year 2021 Small Area Fair Market Rent](#)

• For previous data on U.S. Department of Housing and Urban Development (HUD) established Fair Market Rents (FMR), please visit <https://www.huduser.gov/portal/datasets/fmr.html>

GO TO TOP



**Notice #: 0001374924-01**  
**Public Notices**

State of Hawaii  
Hawaii Public Housing Authority

**OPENING OF PROJECT-BASED WAITING LISTS**

NOTICE IS HEREBY GIVEN that the Hawaii Public Housing Authority (HPHA) in accordance with §15-185-28, Hawaii Administrative Rules, Hawaii Revised Statutes, regulations outlined by the U.S. Department of Housing and Urban Development (HUD) and the HPHA's Section 8 Administrative Plan, will temporarily reopen the waiting list for applicants with a preference.

The HPHA will have the waiting list open for applicants to apply for the following programs:

**July 11, 2022 thru July 15, 2022**

Palolo Valley Homes Project-Based (Bedroom sizes: 2, 3, 4, and 5)  
Kuhio Park Terrace Project-Based (Bedroom sizes: 3)

**Online applications will be accepted from eligible applicants who meet one of the following preferences: 1) Homeless 2) VAWA<sup>1</sup>, or 3) Involuntarily displaced<sup>2</sup>.**

The online application portal will be opened for five days starting on Monday, July 11, 2022, at 8:00 a.m. and close on Friday, July 15, 2022, at 4:30 p.m.

**What is Project-Based Voucher Assistance:** The project-based voucher (PBV) program is a public-private partnership that maintains affordable rental homes for low-income persons. The family's portion of the rent is based on household income and ranges from 30% to 40% of the family's adjusted monthly income. HPHA pays the rest of the rent directly to the landlord. HPHA serves the City and County of Honolulu. With some restrictions, Section 8 housing assistance allows families to live in a qualified unit and area of their choice.

**How do I submit an application?** Pre-applications can only be submitted online. Devices such as mobile phones and tablets with Internet access may be used; however, not all operating systems support this pre-application.

Pre-applications WILL NOT be accepted at the Housing Authority's office.

1. Be prepared by having the names, dates of birth, and Social Security Numbers available for all persons who will be listed on your pre-application. You will need to know the monthly gross income (before taxes) for each source of income for all persons listed on your pre-application. You must list all the sources of income individually.
2. Complete the pre-application on-line at [hpha.myhousing.com](http://hpha.myhousing.com) by clicking on "Start Here".
3. Submit a completed pre-application between 8:00 a.m. on July 11th, 2022, and 4:30 p.m. on July 15th, 2022, for the Palolo Valley Homes Project-Based 2, 3, 4, and 5-bedroom Waitlists, and Kuhio Park Terrace Project-Based 3-bedroom Waitlists. Pre-applications submitted before or after this period will be automatically rejected by the system and not accepted. Applications not fully completed (i.e., in the middle of submission) prior to the closing will be rejected.
4. Print your receipt or write down your Pre-Application Confirmation Number. A confirmation receipt is issued immediately after the pre-application is submitted. Print and save this confirmation.

**No duplicate applications will be accepted. Any duplicate applications with same or similar household members**

**1D-11a. Letter Signed By Working Group**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

# PARTNERS IN CARE

*Oahu's Continuum of Care*

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*Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.*

This serves as a letter of support for the FY 2023 NOFO Consolidated Application from HI 501 Partners In Care- O'ahu Continuum of Care (PIC).

As a representative for people with lived experience, I would like to share our partnership with the CoC.

We are represented in numerous ways throughout PIC- holding various positions on the advisory board, involvement in strategic planning sessions in both the general strategic planning, as well as a lived experience focus group on strategic planning. This year, the CoC has an evaluator with lived experience on the committee for NOFO project applications. Additionally, the O'ahu Youth Action Board (an all youth lived-experience board) will be reviewing this years YHDP applications to provide input for the following years competition.

The CoC ensures that we are aware and involved in all aspects of the Continuum in various ways: by inviting us to speak at the annual Homelessness Awareness Conference, newsletters, general feedback opportunities.

The collaboration between the CoC and people with lived experience is critical to improving systems by the people who utilize them. Partners In Care is committed to continuing and enhancing opportunities that involved people with lived experience.

Signed,



Lindsay Ann Pacheco  
O'ahu Lived Experience Council – Co-Founder  
PIC CoC Lived Experience Committee - Member  
[pachecol@hawaii.edu](mailto:pachecol@hawaii.edu)  
(808) 232-6977

**1D-2a. Housing First Evaluation**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

During the CoC's Annual Monitoring and Evaluation of HUD funded projects, each agency is screened through review of Policy and Procedures and oral interview to ensure that the project is adhering to Housing First principals. The following are questions the CoC looks for during the annual evaluations.

List of factors and performance indicators regarding Housing First:

- a. Are applicants allowed to enter a program without income?
- b. Are applicants allowed to enter the program even if they are not "clean and sober" or "treatment compliant"?
- c. Are applicants allowed to enter the program even if they have criminal justice system involvement?
- d. Are service and treatment plans voluntary, such that tenants cannot be evicted for not following through?

The CoC uses Google Sheets at the Monitoring and Evaluation in-person meetings to track.

1	Date of Evaluation	Agency Name	Project Name	Contract Number	Funding for Project	P
2						
3						
4						
5	<b>POLICY AND PROCEDURE / CoC Requirements</b>					
6	Does the Project reflect the HF model documented in P & Ps?					
7	Does the grantee have a grievance policy within the P&Ps?					
8	What Committees are this organization part of?					
9	Does a representative from the organization attend CoC committee meetings?					
10	Does the grantee participate in other coordination with partner agencies?					
11	Has the grantee developed and distributed a customer satisfaction survey?					
12	If a survey is used, is the overall feedback positive?					
13	Do other methods of feedback indicate positive customer sat					
14	Is the grantee in compliance with Title VI requirements including a non-discrimination policy and written grievance procedure that are posted?					
15	Does the grantee maintain a written code of conduct for employees?					
16	Does the project reflect the CoC standard of operation?					
17	Does the grantee have a copy of the CoC standards?					
18	Was a staff person familiar with the program details present at the site-visit?					
19	Comments:					
20						
21	<b>HIPPA COMPLIANCE</b>					
22	Are all workstations set up in accordance with standards to protect the personal information of all clients?					
23	Are there statements regarding HIPPA in appropriate areas as the project site?					
24	Notes:					
25						
26	<b>HMS COMPLIANCE</b>					

**1E-1: Web Posting of Your CoC's Local Competition Deadline- Advance Public Notice.**

**Web Posting | Email Notification | Request for Proposals**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

PIC Executive Director Performa... x Grantium™ - 4B. Attachments S... x https://hudgov-my.sharepoint.c... x JungleMail 365 x +

appjunglemail365.com/app/templates?SiteId=59c84b3b-c86f-416c-8fa2-a45843c5d99c

Communication site v Newsletter in progress x Templates Analytics History & Monitoring

**Title:** What's ahead for the week of August 14th  
**Email subject:** Partners In Care Newsletter

[July Minutes](#)  
[August Agenda](#)

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### Community News

The Maui Food Bank is in urgent need of baby formula. If you or someone you know is on Maui and has baby formula to donate, please drop off at 760 Kolu Street, Wailuku, HI 96763.

You can also call or email the Maui Food Bank at 808-243-9500/info@mauifoodbank.org for more information on how you may be able to assist.

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### Provider Highlights

Notice of Funding Opportunity (NOFO): Please go to the [2023 NOFO page](#) on the Partners In Care website for helpful resources. **Proposals are due to the PIC office on Tuesday, August 15th, 2023 at 12pm.**

Save the Date! Hawaii's Homelessness and Housing Conference will be on November 3 & 4, 2023. Early registration for the event opens Tuesday, August 15th - register early to receive a 10% discount! See [website](#) for details.

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### Job Openings

<a href="#">Access to Independence</a> - Independent Living Services Coordinator	<a href="#">Hawaii Medical Services Association (HMSA)</a> - Case Manager - Health Coordinator
<a href="#">Big Brothers Big Sisters</a> - Human Resources Specialist	<a href="#">Hawaii Pacific Health</a>

Created on 8/7/2023 9:38 AM by Jillian Canova  
Modified on 8/13/2023 2:10 PM by Jillian Canova

This Week's Meetings  
This Week's Meetings  
This Week's Meetings  
This Week's Meetings

Type here to search 80°F 8:57 AM 9/26/2023



SAVE CANCEL

Editing 'FY 2023 NOFO'



## HI-501 FY '23 Program Competition Project Listing

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### NOFO RESOURCES:

- [REQUEST FOR PROPOSALS](#)
- [TIMELINE](#)

### NOFO SCORECARDS:

- [RENEWAL PROJECT SCORECARD](#)
- [RENEWAL-NEW PROJECT SCORECARD](#)
- [NEW/EXPANSION PROJECT SCORECARD](#)
- [SSO-CE PROJECT SCORECARD](#)
- [SSO PROJECT SCORECARD](#)
- [HMIS PROJECT SCORECARD](#)

QUESTIONS? CONTACT SARA IRONHILL AT [SARAI@PARTNERSINCAREOAHU.ORG](mailto:SARAI@PARTNERSINCAREOAHU.ORG)

Guide on how to pull an APR from HMIS:





HI - 501 FY '23 RFP Release and | x +

groups.google.com/g/oahu-pic/c/mXgbcCKXTU/m/Q3z9-CkeAgAJ

Conversations Search conversations within oahu-pic@goog...

New conversation

My groups

Recent groups

Favorite groups

Starred conversations

Oahu Continuum of Care

Conversations 99+

Approved 99+

Pending

People

Members

Pending members

Banned users

About

My membership settings

Group settings

Privacy · Terms

Sara Ironhill <saral@partnersincareoahu.org>  
to oahu-pic@googlegroups.com Jul 19, 2023, 2:30:52 PM ☆ ↶ ⋮

Aloha Partners!

We are pleased to announce the release of the HI- 501 FY '23 RFP (attached). Please note that the Annual Renewal Demand (ARD) still has not been released from HUD. As such, the dollar amounts within the RFP are highlighted and subject to change via amendment once this occurs. PIC will make announcements on any amendments to the RFP. Updates will be sent to the PIC Listserv and will also be updated on the PIC website ([www.partnersincareoahu.org](http://www.partnersincareoahu.org)) under NOFO 2023. The full NOFO can be accessed here: [https://www.hud.gov/sites/dfiles/SPM/documents/FR-6700-N-25\\_NOFO.pdf](https://www.hud.gov/sites/dfiles/SPM/documents/FR-6700-N-25_NOFO.pdf).

Should your agency have the intention of applying for funding this year, your attendance at **one of the two** informational sessions is **MANDATORY**. Partners In Care will not accept applications from any agency that does not attend. Attendance will be tracked at each meeting.

**THURSDAY, JULY 20<sup>th</sup> 3-4 pm**

Microsoft Teams meeting

Join on your computer, mobile app or room device

[Click here to join the meeting](#)

Type here to search

86°F 1:26 PM 9/25/2023

O'ahu CoC

FY 2023 NOFO

COMMITTEES

PARTNERS

PIT COUNT

FY 2022 NOFO

COC WRITTEN

STANDARDS

COC GOVERNANCE

CHARTER

## FY 2023 HUD CONTINUUM OF CARE PROGRAM COMPETITION

- TIMELINE**

- All other links will be made live as information becomes available

### HI-501 NOFO APPLICATION SUBMISSION:

HI-501 CoC Application FY 2023

HI-501 CoC Priority Listing FY 2023

HI-501 CoC Application FY 2023

HI-501 CoC Priority Listing FY 2023

HI-501 FY '23 Program Competition Project Listing

**1E-2: Local Competition Scoring Tool**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

<b>New/Expansion Project Scorecard</b>		
Project Name _____		
Agency: _____		
Project Type: _____		
Evaluator _____		
<b>CoC Threshold Requirements</b>		
Agency participates in CES.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project will utilize a Housing First and/or Low Barrier approach.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project has documented minimum match.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project provided a budget and budget narrative.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Agency has provided an acceptable organizational audit/financial review.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<i>If answered "yes" to all of the above, continue to the rating section below.</i>		
<b>Project Rating by CoC</b>		
Rating Criteria	Points Earned	Points Available
<b>I. Submission Requirements</b>		
1. Timely submission of project application packets in accordance with RFP requirements.	<input style="width: 50px; height: 20px;" type="text"/>	1
2. Timely submission of project application and all attachments in e-snaps.	<input style="width: 50px; height: 20px;" type="text"/>	1
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	2
<b>II. CoC Monitoring</b>		
1. Timely drawdown of most recent grant expenditures with time expense ratio is ≤10% (% of term expired minus % funds disbursed).	<input style="width: 50px; height: 20px;" type="text"/>	5
2. ≥90% of program entries and exits were entered into HMIS within 3 days.	<input style="width: 50px; height: 20px;" type="text"/>	3
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	8
<b>Project Rating by External Evaluator</b>		
Rating Criteria	Points Earned	Points Available
<b>III. Project Description</b>		
1. Provides description of proposed project, including target population, type of housing provided, and types of services offered.	<input style="width: 50px; height: 20px;" type="text"/>	4
2. Demonstrates understanding of the needs of the clients to be served and shows that the proposed housing (including the number and configuration of units) and services will fit those needs.	<input style="width: 50px; height: 20px;" type="text"/>	4

3. Explains how program will assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs. (For TH-PH-RRH projects: project will provide enough rapid rehousing assistance to ensure that at any given time a participant may move from transitional to permanent housing)	<input type="text"/>	4
4. Explains how program will help clients access mainstream benefits, increase employment and/or income, and maximize ability to live independently.	<input type="text"/>	4
5. The project will use evidenced-based and/or culturally-based practices.	<input type="text"/>	4
6. Project will work to reduce returns to homelessness, first time homelessness, and increase employment and income.	<input type="text"/>	4
7. Describes the plan for rapid implementation, with a reasonable and detailed schedule of proposed activities at 60, 120, and 180 days after grant award.	<input type="text"/>	4
Subtotal	<input type="text"/>	28
<b>IV. Project Alignment with Policy &amp; CoC Priorities</b>		
1. Degree to which program will implement a Housing First approach or philosophy.	<input type="text"/>	3
2. Program advances radical equity in homelessness service provision (including degree to which program racial demographics reflect overall homeless population racial breakdown.)	<input type="text"/>	3
3. Program will consider individuals with lived experience in program design, planning, implementation, evaluation, etc.	<input type="text"/>	3
4. Program has plan for improving assistance to LGBTQ+ individuals.	<input type="text"/>	3
5. Application demonstrates program will be cost-effective.	<input type="text"/>	3
6. Program works with stakeholders from health, housing, and social services to meet client needs.	<input type="text"/>	3
7. Project addresses HUD's six pillars--including three foundations (equity, data, collaboration) and will employ at least one solution (housing & supports, crisis response, and prevention).	<input type="text"/>	3
8. Degree to which program will address unsheltered homelessness.	<input type="text"/>	3
9. Describes how the agency will ensure project staff retention (e.g., paying a living wage, offering mental health supports, etc.)	<input type="text"/>	3
Subtotal	<input type="text"/>	27
<b>V. Project Performance &amp; Evaluation</b>		

1. Describes objective program outcomes and how the program will assess those outcomes.	<input type="text"/>	3
2. Program has a plan to review participant outcomes with an equity lens, including the disaggregation of outcome data by race, ethnicity, gender identity, age, etc.	<input type="text"/>	3
Subtotal	<input type="text"/>	6
<b>VI.Equity Factors</b>		
1.a. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions.	<input type="text"/>	1
1.b. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers on certain groups.	<input type="text"/>	1
2.a. Agency's Board of Directors includes representation from more than one person with lived experience.	<input type="text"/>	1
2.b. Agency has relational process for receiving and incorporating feedback from persons with lived experience.	<input type="text"/>	1
Subtotal	<input type="text"/>	4
<b>VII.CoC Participation and Contribution to System Performance</b>		
1. Degree to which agency participates in PIC--e.g., serving on the Board of Directors, committees, and workgroups--and collaborates with PIC members.	<input type="text"/>	4
2. Describes how the project fits system needs and fits with CoC and HUD policy priorities.	<input type="text"/>	3
3. Ensures that program will participate in HMIS and CES.	<input type="text"/>	2
Subtotal	<input type="text"/>	9
<b>VIII.Financial Performance</b>		
1. Average cost per household served is reasonable and consistent with the population to be served.	<input type="text"/>	3
2. Most recent agency financial audit found minimal exceptions or findings.	<input type="text"/>	3
Subtotal	<input type="text"/>	6
<b>IX.Agency Background &amp; Experience</b>		
1. Applicant and sub-recipients (if any) have experience working with proposed population and the proposed housing type.	<input type="text"/>	3
2. Applicant has experience in utilizing a Housing First approach.	<input type="text"/>	3

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3. Applicant has experience in effectively utilizing federal funds, including HUD grants and other public funding (e.g., regular drawdowns, timely reimbursement of subrecipients, timely resolution of monitoring findings, and timely submission of reports for existing grants).

4

Subtotal

10

**Total**

100



Renewal Project Scorecard		
Project Name _____		
Agency: _____		
Project Type: _____		
Evaluator _____		
CoC Threshold Requirements		
Program participates in CES.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project utilizes a Housing First and/or Low Barrier approach.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project has documented minimum match.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project provided a budget and budget narrative.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Agency has provided an organizational audit/financial review.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<i>If answered "yes" to all of the above, continue to the rating section below.</i>		
Project Rating by CoC		
	<b>Points Earned</b>	<b>Points Available</b>
I. Submission Requirements		
1. Timely submission of project application packets in accordance with RFP requirements.	<input style="width: 50px; height: 20px;" type="text"/>	1
2. Timely submission of project application and all attachments in e-snaps.	<input style="width: 50px; height: 20px;" type="text"/>	1
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	2
II. CoC Monitoring		
1. Timely drawdown of most recent grant expenditures with time expense ratio is ≤10% (% of term expired minus % funds disbursed).	<input style="width: 50px; height: 20px;" type="text"/>	5
2. ≥90% of program entries and exits were entered into HMIS within 3 days.	<input style="width: 50px; height: 20px;" type="text"/>	3
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	8
Project Rating by External Evaluator		
	<b>Points Earned</b>	<b>Points Available</b>
III. Project Description		
1. Describes program, including goals, services provided, and target population.	<input style="width: 50px; height: 20px;" type="text"/>	5
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	5
IV. Project Alignment with Policy & CoC Priorities		
1. Degree to which program implements a Housing First approach or philosophy.	<input style="width: 50px; height: 20px;" type="text"/>	3

2. Program advances racial equity in homelessness service provision (including degree to which program racial demographics reflect overall homeless population racial breakdown).	<input type="text"/>	3
3. Program considers individuals with lived experience in program design, planning, implementation, evaluation, etc.	<input type="text"/>	3
4. Program works to improve assistance to LGBTQ+ individuals.	<input type="text"/>	3
5. Program demonstrates cost-effectiveness.	<input type="text"/>	3
6. Program works with stakeholders from health, housing, and social services to meet client needs.	<input type="text"/>	3
7. Project addresses HUD's six pillars--including three foundations (equity, data, collaboration) and will employ at least one solution (housing & supports, crisis response, and prevention).	<input type="text"/>	3
8. Degree to which program addresses unsheltered homelessness.	<input type="text"/>	3
9. Describes how the agency will ensure project staff retention (e.g., paying a living wage, offering mental health supports, etc.)	<input type="text"/>	3
Subtotal	<input type="text"/>	27

**V. Performance Measures**

<b>Time to Placement</b>		
1. On average, time from project entry to residential placement is 15 days (RRH), 30 days (DV RRH), or 180 days (PSH & TH).	<input type="text"/>	8
<b>Exits to Permanent Housing</b>		
2. ≥90% of participants remain in or move to permanent housing.	<input type="text"/>	8
<b>Recidivism</b>		
3. ≤15% of participants who exited to permanent housing return to homelessness within 12 months of exit.	<input type="text"/>	5
<b>New or Increased Income</b>		
4.a. At least 8% of project leavers received new or increased income (from any source).	<input type="text"/>	1
4.b. At least 8 % of project stayers received new or increased income (from any source).	<input type="text"/>	1
<b>Project Cost-Effectiveness</b>		
5. Describes how the project has assessed and will assess project outcomes.	<input type="text"/>	4
6. Costs per positive housing exit (total budget with match/#persons exited to positive locations or still in program) is reasonable for program type.	<input type="text"/>	4
<b>Bed/Utilization Rate</b>		
7. Bed/utilization rate has been at or above 90% at each quarter.	<input type="text"/>	3

Subtotal		34
<b>VI. Equity Factors</b>		
<b>Agency Factors</b>		
1.a. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions.		1
1.b. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.		1
2.a. Agency's Board of Directors includes representation from at least one person with lived experience.		1
2.b. Agency has relational process for receiving and incorporating feedback from persons with lived experience.		1
<b>Program Factors</b>		
3.a. Program has reviewed participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, age, etc.		1
3.b. Program has identified programmatic changes need to make participant outcomes more equitable and developed a plan to make those changes.		1
Subtotal		6
<b>VII. HUD Monitoring</b>		
1. Any HUD monitoring findings and corrective action were minimal.		5
Subtotal		5
<b>VIII. CoC Participation and Contribution to System Performance</b>		
1. Agency participates in PIC--e.g., serving on the Board of Directors, committees, and /or workgroups--and collaborates with PIC members.		4
2. Describes how project fits system needs and fits with CoC and HUD policy priorities.		3
Subtotal		7
<b>IX. Financial Performance</b>		
1. Most recent agency financial audit found no exceptions or findings.		3
2. Budget costs are within local average for project type.		3
Subtotal		6
<b>Total</b>		100

Renewal YHDP SSO (Support Services Only) Project Scorecard		
Project Name _____		
Agency: _____		
Project Type: _____		
Evaluator _____		
CoC Threshold Requirements		
Program participates in CES.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project utilizes a Housing First and/or Low Barrier approach.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project has documented minimum match.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project provided a budget and budget narrative.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Agency has provided an organizational audit/financial review.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<i>If answered "yes" to all of the above, continue to the rating section below.</i>		
Project Rating by CoC		
Rating Criteria	Points Earned	Points Available
I. Submission Requirements		
1. Timely submission of project application packets in accordance with RFP requirements.	<input style="width: 50px; height: 20px;" type="text"/>	1
2. Timely submission of project application and all attachments in e-snaps.	<input style="width: 50px; height: 20px;" type="text"/>	1
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	2
II. CoC Monitoring		
1. Timely drawdown of most recent grant expenditures with time expense ratio is ≤10% (% of term expired minus % funds disbursed).	<input style="width: 50px; height: 20px;" type="text"/>	5
2. ≥90% of program entries and exits were entered into HMIS within 3 days.	<input style="width: 50px; height: 20px;" type="text"/>	3
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	8
Project Rating by External Evaluator		
Rating Criteria	Points Earned	Points Available
III. Project Description		
<b>Project Description</b>		
1. Describes program, including goals, services provided, and target population.	<input style="width: 50px; height: 20px;" type="text"/>	5
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	5
IV. Project Alignment with Policy & CoC Priorities		
1. Degree to which program implements a Housing First approach or philosophy.	<input style="width: 50px; height: 20px;" type="text"/>	3

2. Program advances racial equity in homelessness service provision (including degree to which program racial demographics reflect overall homeless population racial breakdown).	<input type="text"/>	3
3. Program considers individuals with lived experience in program design, planning, implementation, evaluation, etc.	<input type="text"/>	3
4. Program works to improve assistance to LGBTQ+ individuals.	<input type="text"/>	3
5. Program demonstrates cost-effectiveness.	<input type="text"/>	3
6. Program works with stakeholders from health, housing, and social services to meet client needs.	<input type="text"/>	3
7. Project addresses HUD's six pillars--including three foundations (equity, data, collaboration) and will employ at least one solution (housing & supports, crisis response, and prevention).	<input type="text"/>	3
8. Degree to which program addresses unsheltered homelessness.	<input type="text"/>	3
9. Describes how the agency will ensure project staff retention (e.g., paying a living wage, offering mental health supports, etc.)	<input type="text"/>	3
Subtotal	<input type="text"/>	27

**V. Performance Measures**

<b>Exits to Permanent Housing</b>		
1. ≥10% of participants moved into permanent housing.	<input type="text"/>	8
<b>Exits to Homelessness</b>		
2. ≤20% of participants who exited, exited to homelessness.	<input type="text"/>	6
<b>Connection to Services</b>		
3. >90% of participants were connected to needed services and/or mentor.	<input type="text"/>	10
<b>New or Increased Income</b>		
4.a. At least 8% of project leavers received new or increased income (from any source).	<input type="text"/>	1
4.b. At least 8 % of project stayers received new or increased income (from any source).	<input type="text"/>	1
<b>Project Cost-Effectiveness</b>		
5. Describes how the project has assessed and will assess project outcomes.	<input type="text"/>	4
6. Costs per person (total budget with match/total persons served) is reasonable for program type.	<input type="text"/>	4
Subtotal	<input type="text"/>	34

**VI. Equity Factors**

**Agency Factors**

1.a. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions.	<input type="text"/>	1
1.b. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.	<input type="text"/>	1
2.a. Agency's Board of Directors includes representation from at least one person with lived experience.	<input type="text"/>	1
2.b. Agency has relational process for receiving and incorporating feedback from persons with lived experience.	<input type="text"/>	1
<b>Program Factors</b>		
3.a. Program has reviewed participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, age, etc.	<input type="text"/>	1
3.b. Program has identified programmatic changes need to make participant outcomes more equitable and developed a plan to make those changes.	<input type="text"/>	1
Subtotal	<input type="text" value="6"/>	6
<b>VII. HUD Monitoring</b>		
1. Any HUD monitoring findings and corrective action were minimal.	<input type="text"/>	5
Subtotal	<input type="text" value="5"/>	5
<b>VIII. CoC Participation and Contribution to System Performance</b>		
1. Agency participates in PIC--e.g., serving on the Board of Directors, committees, and /or workgroups--and collaborates with PIC members.	<input type="text"/>	4
2. Describes how project fits system needs and fits with CoC and HUD policy priorities.	<input type="text"/>	3
Subtotal	<input type="text" value="7"/>	7
<b>IX. Financial Performance</b>		
1. Most recent agency financial audit found no exceptions or findings.	<input type="text"/>	3
2. Budget costs are within local average for project type.	<input type="text"/>	3
Subtotal	<input type="text" value="6"/>	6
<b>Total</b>	<input type="text" value="100"/>	100

Renewal SSO-CE Project Scorecard		
Project Name _____		
Agency: _____		
Project Type: _____		
Evaluator _____		
CoC Threshold Requirements		
Program participates in CES.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project utilizes a Housing First and/or Low Barrier approach.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project has documented minimum match.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project provided a budget and budget narrative.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Agency has provided an organizational audit/financial review.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<i>If answered "yes" to all of the above, continue to the rating section below.</i>		
Project Rating by CoC		
	<b>Points Earned</b>	<b>Points Available</b>
I. Submission Requirements		
1. Timely submission of project application packets in accordance with RFP requirements.	<input style="width: 100%; height: 20px;" type="text"/>	1
2. Timely submission of project application and all attachments in e-snaps.	<input style="width: 100%; height: 20px;" type="text"/>	1
Subtotal	<input style="width: 100%; height: 20px;" type="text"/>	2
II. CoC Monitoring		
1. Timely drawdown of most recent grant expenditures with time expense ratio is ≤10% (% of term expired minus % funds disbursed).	<input style="width: 100%; height: 20px;" type="text"/>	5
Subtotal	<input style="width: 100%; height: 20px;" type="text"/>	5
Project Rating by External Evaluator		
	<b>Points Earned</b>	<b>Points Available</b>
III. Project Description		
<b>Planning &amp; Access</b>		
1. CES ensures accessibility to all individuals and families seeking homeless services on Oahu.	<input style="width: 100%; height: 20px;" type="text"/>	3
2. CES has a plan to reach people who face certain barriers and are least likely to apply to programs in absence of special outreach.	<input style="width: 100%; height: 20px;" type="text"/>	3
3. CES ensures access points for sub-populations.	<input style="width: 100%; height: 20px;" type="text"/>	3
4. CES advertises effectively to individuals and families seeking services.	<input style="width: 100%; height: 20px;" type="text"/>	3

5. CES has policies and procedures to ensure equitable access to the CES process by all eligible persons regardless of race, color, nationality, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status.	<input type="text"/>	3
6. CES has policies and procedures for serving individuals fleeing domestic violence.	<input type="text"/>	3
7. Describes how CES collaborates with stakeholders within and across the CoC.	<input type="text"/>	3
<b>Assessment, Prioritization, &amp; Referrals</b>		
8. CES has a standardized assessment process to direct individuals and families to appropriate housing to meet their needs.	<input type="text"/>	3
9. CES has a process for prioritizing individuals and families who are most in need.	<input type="text"/>	3
10. CES has a process in place for serving clients who fall out of housing or who have unsuccessful referrals.	<input type="text"/>	3
<b>Data Management</b>		
11. CES has a robust data management system.	<input type="text"/>	3
Subtotal	<input type="text"/>	33
<b>IV. Evaluation and Performance</b>		
1. CES regularly evaluates its process at a systems and programmatic level.	<input type="text"/>	3
2. CES has a process in place to ensure that racial equity is achieved at all stages of the CES process.	<input type="text"/>	6
3. CES works with HMIS to ensure an overall high-quality system performance.	<input type="text"/>	3
Subtotal	<input type="text"/>	12
<b>V. Project Alignment with Policy and CoC Priorities</b>		
1. Explains how CES promotes a system-wide Housing First philosophy.	<input type="text"/>	3
2. Describes how CES works to advance racial equity in the CoC.	<input type="text"/>	3
3. Explains how CES considers individuals with lived experience.	<input type="text"/>	3
4. Explains how CES works to improve assistance to LGBTQ+ individuals across the CoC.	<input type="text"/>	3
5. Describes how CES works to promote cost-effectiveness in the CoC.	<input type="text"/>	3
6. CES works with healthcare, housing, government, and social services to coordinate access to appropriate services.	<input type="text"/>	3



7. CES promotes and supports HUD's six pillars--including three foundations (equity, data, collaboration) and solutions (housing & supports, crisis response, and prevention).	<input type="text"/>	3
8. Describes how CES assists the CoC in addressing unsheltered homelessness.	<input type="text"/>	3
9. Describes how the lead agency will ensure project staff retention (e.g., paying a living wage, offering mental health supports, etc.).	<input type="text"/>	3
Subtotal	<input type="text"/>	27
<b>VI. Equity Factors</b>		
1.a. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions.	<input type="text"/>	1
1.b. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.	<input type="text"/>	1
2.a. Agency's Board of Directors includes representation from at least one person with lived experience.	<input type="text"/>	1
2.b. Agency has relational process for receiving and incorporating feedback from persons with lived experience.	<input type="text"/>	1
Subtotal	<input type="text"/>	4
<b>VII. HUD Monitoring</b>		
1. Any HUD monitoring findings and corrective action were minimal.	<input type="text"/>	5
Subtotal	<input type="text"/>	5
<b>VIII. CoC Participation and Contribution to System Performance</b>		
1. Describes how project fits system needs and fits with CoC and HUD policy priorities.	<input type="text"/>	6
Subtotal	<input type="text"/>	6
<b>IX. Financial Performance</b>		
1. Most recent agency audit found no exceptions or findings.	<input type="text"/>	3
2. Budget costs are reasonable.	<input type="text"/>	3
Subtotal	<input type="text"/>	6
<b>Total</b>	<input type="text"/>	100

<b>Renewal HMIS Project Scorecard</b>		
Project Name _____		
Agency: _____		
Project Type: _____		
Evaluator _____		
CoC Threshold Requirements		
Program participates in CES.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project utilizes a Housing First and/or Low Barrier approach.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project has documented minimum match.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project provided a budget and budget narrative.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Agency has provided an organizational audit/financial review.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<i>If answered "yes" to all of the above, continue to the rating section below.</i>		
Project Rating by CoC		
Rating Criteria	Points Earned	Points Available
I. Submission Requirements		
1. Timely submission of project application packets in accordance with RFP requirements.	<input style="width: 100%; height: 20px;" type="text"/>	1
2. Timely submission of project application and all attachments in e-snaps.	<input style="width: 100%; height: 20px;" type="text"/>	1
Subtotal	<input style="width: 100%; height: 20px;" type="text"/>	2
II. CoC Monitoring		
1. Timely drawdown of most recent grant expenditures with time expense ratio is ≤10% (% of term expired minus % funds disbursed).	<input style="width: 100%; height: 20px;" type="text"/>	5
Subtotal	<input style="width: 100%; height: 20px;" type="text"/>	5
Project Rating by External Evaluator		
Rating Criteria	Points Earned	Points Available
III. Project Description		
1. Describes current HMIS activities within the CoC (e.g., training, monitoring and evaluation, data management, and reporting).	<input style="width: 100%; height: 20px;" type="text"/>	9
2. Describes HMIS current data standards and abilities, including ability to un-duplicate records and disaggregate race data.	<input style="width: 100%; height: 20px;" type="text"/>	9
3. Describes how HMIS works with the CoC's CES.	<input style="width: 100%; height: 20px;" type="text"/>	9
4. Describe how HMIS uses data to review performance for the entire CoC geographic area as well as to provide information to project subrecipients and applicants for needs analysis and funding priorities.	<input style="width: 100%; height: 20px;" type="text"/>	9

Subtotal		36
<b>IV. Project Alignment with Policy and CoC Priorities</b>		
1. Explains how HMIS promotes a system-wide Housing First philosophy.		4
2. Describes how HMIS uses data to advance racial equity in the CoC.		4
3. Explains how HMIS considers individuals with lived experience when designing reports and data collection.		4
4. Explains how HMIS works to improve assistance to LGBTQ+ individuals across the CoC.		4
5. Describes how HMIS works to promote cost-effectiveness in the CoC.		4
6. HMIS works with healthcare, housing, and social services to meet client and system needs.		4
7. HMIS promotes and supports HUD's six pillars--including three foundations (equity, data, collaboration) and solutions (housing & supports, crisis response, and prevention).		4
8. Describes how HMIS assists the CoC in addressing unsheltered homelessness.		4
9. Describes how the lead agency will ensure project staff retention (e.g., paying a living wage, offering mental health supports, etc.)		4
Subtotal		36
<b>V. Equity Factors</b>		
1.a. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions.		1
1.b. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.		1
2.a. Agency's Board of Directors includes representation from at least one person with lived experience.		1
2.b. Agency has relational process for receiving and incorporating feedback from persons with lived experience.		1
Subtotal		4
<b>VI. HUD Monitoring</b>		
1. Any HUD monitoring findings and corrective action were minimal.		5
Subtotal		5
<b>VII. CoC Participation and Contribution to System Performance</b>		

1. Describes how HMIS collaborates with stakeholders within and across the CoC.	<input type="text"/>	3
2. Describes how this project fits system needs and fits with CoC and HUD policy priorities.	<input type="text"/>	3
Subtotal	<input type="text"/>	6
<b>VIII. Financial Performance</b>		
1. Most recent agency financial audit found no exceptions or findings.	<input type="text"/>	3
2. Budget costs are reasonable.	<input type="text"/>	3
Subtotal	<input type="text"/>	6
<b>Total</b>	<input type="text"/>	100

Renewal-New Project Scorecard		
Project Name _____		
Agency: _____		
Project Type: _____		
Evaluator _____		
CoC Threshold Requirements		
Program participates in CES.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project utilizes a Housing First and/or Low Barrier approach.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project has documented minimum match.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Project provided a budget and budget narrative.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Agency has provided an organizational audit/financial review.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<i>If answered "yes" to all of the above, continue to the rating section below.</i>		
Project Rating by CoC		
Rating Criteria	Points Earned	Points Available
I.Submission Requirements		
1. Timely submission of project application packets in accordance with RFP requirements.	<input style="width: 50px; height: 20px;" type="text"/>	1
2. Timely submission of project application and all attachments in e-snaps.	<input style="width: 50px; height: 20px;" type="text"/>	1
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	2
II. CoC Monitoring		
1. Timely drawdown of most recent grant expenditures with time expense ratio is ≤10% (% of term expired minus % funds disbursed).	<input style="width: 50px; height: 20px;" type="text"/>	5
2. ≥90% of program entries and exits were entered into HMIS within 3 days.	<input style="width: 50px; height: 20px;" type="text"/>	2
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	7
Project Rating by by External Evaluator		
Rating Criteria	Points Earned	Points Available
III.Project Description		
1. Describes project, including goals, services provided, and target population.	<input style="width: 50px; height: 20px;" type="text"/>	5
Subtotal	<input style="width: 50px; height: 20px;" type="text"/>	5
IV. Project Alignment with Policy & CoC Priorities		
1. Degree to which program implements a Housing First approach or philosophy.	<input style="width: 50px; height: 20px;" type="text"/>	3

2. Program advances racial equity in homelessness service provision (including degree to which program racial demographics reflect overall homeless population racial breakdown).	<input type="text"/>	3
3. Program considers individuals with lived experience in program design, planning, implementation, evaluation, etc.	<input type="text"/>	3
4. Program works to improve assistance to LGBTQ+ individuals.	<input type="text"/>	3
5. Program demonstrates cost-effectiveness.	<input type="text"/>	3
6. Program works with stakeholders from health, housing, and social services to meet client needs.	<input type="text"/>	3
7. Project addresses HUD's six pillars--including three foundations (equity, data, collaboration) and will employ at least one solution (housing & supports, crisis response, and prevention).	<input type="text"/>	3
8. Degree to which program addresses unsheltered homelessness.	<input type="text"/>	3
9. Describes how the agency will ensure project staff retention (e.g., paying a living wage, offering mental health supports, etc.)	<input type="text"/>	3
Subtotal	<input type="text"/>	37

**V. Performance Measures**

**Time to Placement\***

1. On average, time from project entry to residential placement is 15 days (RRH), 30 days (DV RRH), or 180 days (PSH & TH). If program has not enrolled participants, applicant provides reasonable explanation for low or no enrollment	<input type="text"/>	8
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**Exits without Move-in\***

2. Less than 5% of clients exited without move-in.	<input type="text"/>	8
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*\*if program has not enrolled any participants, score the following two sections in lieu of Time to Placement and Exits without Move-in*

**Rationale for No or Low Enrollment**

1. Applicant provides reasonable explanation for low or no enrollment.	<input type="text"/>	8
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**Timeline**

2. Provides a detailed schedule of proposed activities at 60, 120, and 180 days after grant award.	<input type="text"/>	8
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**Project Cost-Effectiveness**

3. Describes how the project has assessed and will assess project outcomes.	<input type="text"/>	5
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4. Costs per household is reasonable for program type.	<input type="text"/>	5
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Subtotal	<input type="text"/>	26
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<b>VI. Equity Factors</b>		
<b>Agency Factors</b>		
1.a. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions.	<input type="text"/>	1
1.b. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.	<input type="text"/>	1
2.a. Agency's Board of Directors includes representation from at least one person with lived experience.	<input type="text"/>	1
2.b. Agency has relational process for receiving and incorporating feedback from persons with lived experience.	<input type="text"/>	1
<b>Program Factors</b>		
3.a. Program has reviewed participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, age, etc.	<input type="text"/>	1
3.b. Program has identified programmatic changes need to make participant outcomes more equitable and developed a plan to make those changes.	<input type="text"/>	1
Subtotal	<input type="text"/>	6
<b>VII. HUD Monitoring</b>		
1. Any HUD monitoring findings and corrective action were minimal.	<input type="text"/>	5
Subtotal	<input type="text"/>	5
<b>VIII. CoC Participation and Contribution to System Performance</b>		
1. Agency participates in PIC--e.g., serving on the Board of Directors, committees, and /or workgroups--and collaborates with PIC members.	<input type="text"/>	3
2. Describes how project fits system needs and fits with CoC and HUD policy priorities.	<input type="text"/>	3
Subtotal	<input type="text"/>	6
<b>IX. Financial Performance</b>		
1. Most recent agency financial audit found no exceptions or findings.	<input type="text"/>	3
2. Budget costs are within local average for project type.	<input type="text"/>	3
Subtotal	<input type="text"/>	6
<b>Total</b>	<input type="text"/>	100

**1E-2a: Scored Project Form for One Project**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**



## Renewal-New Project Scorecard

Project Name: ~~PH-RRH~~  
 Agency: ~~PH~~  
 Project Type: Joint TH & PH-RRH  
 Evaluator: ~~Emma G. Kennedy~~

- Program participates in CES.  No  Yes  
CES to confirm agency participates in CES and attends case conferencing
- Project utilizes a Housing First and/or Low Barrier approach.  No  Yes  
Project should indicate in e-snaps and that project narrative that it will use a HF approach.
- Project has documented minimum match.  No  Yes  
Project should indicate in e-snaps that it has secured a match.
- Project provided a budget and budget narrative.  No  Yes  
Requirement is met if projects have provided a budget that is balanced, provided a budget narrative, and the funding amount requested does not exceed available funds
- Agency has provided an organizational audit/financial review.  No  Yes  
Audit/financial review conducted by a licensed CPA/external body. If agency has not had an audit, its explanation is reasonable, and agency can demonstrate financial stability.

*If answered "yes" to all of the above, continue to the rating section below.*

Rating Criteria	Points Earned	Points Available
<b>I. Submission Requirements</b>		
1. Timely submission of project application packets in accordance with RFP requirements.	1	1
<small>0-Missing some portion of the application packet (electronic or hardcopy)                      1-Application (electronic and hardcopy) complete</small>		
2. Timely submission of project application and all attachments in e-snaps.	1	1
<small>0-Missing some portion of the application in e-snaps                      1-Application complete in e-snaps</small>		
Subtotal	2	2
<b>II. CoC Monitoring</b>		
1. Timely drawdown of most recent grant expenditures with time expense ratio is ≤10% (% of term expired minus % funds disbursed).	5	5

0-Time expense ratio is >82% for most recent grant expenditure.		
1-Time expense ratio is 65-82% for most recent grant expenditure		
2-Time expense ratio is 47-64% for most recent grant expenditure		
3-Time expense ratio is 29-46% for most recent grant expenditure		
4-Time expense ratio is 11-28% for most recent grant expenditure		
5-Time expense ratio is ≤10% for most recent grant expenditure		
2. ≥90% of program entries and exits were entered into HMIS within 3 days.	1.5	2
0-Substantial missing data; <20% of entry & exits were entered within 3 days		
1-Between 20-59% of program entries and exits were entered within 3 days		
1.5-Between 60-89% of program entries and exits were entered within 3 days		
2-≥90% of program entries and exits were entered into HMIS within 3 days		
Subtotal	6.5	7

**III. Project Description**

Rating Criteria	Points Earned	Points Available
<b>III. Project Description</b>		
1. Describes project, including goals, services provided, and target population.	4.5	5
0-No response		
1-Some response but no specifics/Unclear what services provided and what program's goals and target population are		
2-At least one specific statement in response but significant gaps in description of project		
3-Specific response to some but not all parts of the question		
4-Specific response to most parts of the question with some lingering questions		
5-Full response with substantive detail and specifics about program goals, target population, and services provided		
Subtotal	4.5	5

**IV. Project Alignment with Policy & CoC Priorities**

1. Degree to which program implements a Housing First approach or philosophy.	3	3
0-No response/Does not use a HF approach		
1-Some response but no specifics/Unclear if uses HF approach or some aspects of the program do not adhere to HF philosophy		
2-Specific response but with some detail missing/Program mostly uses HF approach and philosophy		
3-Full response with substantive detail and uses HF approach		
See: <a href="https://endhomelessness.org/resource/housing-first/">https://endhomelessness.org/resource/housing-first/</a>		
2. Program advances racial equity in homelessness service provision (including degree to which program racial demographics reflect overall homeless population racial breakdown).	3	3

- 0-No response/Does not work to advance equity
- 1-Some response but no specifics/Unclear if works to advance equity
- 2-Specific response but with some detail missing/Mostly works to advance equity
- 3-Full response with substantive detail/Works to advance equity

For more information on racial equity in homelessness services:

[https://everyonehome.org/wp-](https://everyonehome.org/wp-content/uploads/2020/10/EveryoneHome_10.20_Summary_FINAL.pdf)

[content/uploads/2020/10/EveryoneHome\\_10.20\\_Summary\\_FINAL.pdf](https://everyonehome.org/wp-content/uploads/2020/10/EveryoneHome_10.20_Summary_FINAL.pdf)

3. Program considers individuals with lived experience in program design, planning, implementation, evaluation, etc. 2 3

- 0-No response/Does not consider perspectives from individuals with lived experience
- 1-Some response but no specifics/Unclear if or how individuals with lived experience are involved
- 2-Specific response but with some detail missing/Individuals with lived experience somewhat included or has plan for increased involvement
- 3-Full response with substantive detail and individuals with lived experience heavily involved in all aspects of program

4. Program works to improve assistance to LGBTQ+ individuals. 3 3

- 0-No response/Does not have a plan for improving assistance to LGBTQ+
- 1-Some response but no specifics/Unclear if has plan or what plan entails
- 2-Specific response but with some detail missing/Has plan but unclear what plan entails
- 3-Full response with substantive detail/Has a fully developed plan for improving assistance/Already implementing plan

5. Program demonstrates cost-effectiveness. 2 3

- 0-No response/Program is not be cost-effective
- 1-Some response but no specifics/Unable to determine cost-effectiveness
- 2-Specific response but with some detail missing/Program seems likely to be cost-effective
- 3-Full response with substantive detail/Program demonstrates cost-effectiveness

cost-effective--degree to which an intervention produces effective result relative to its cost; program costs do not outweigh potential individual and system impacts

6. Program works with stakeholders from health, housing, and social services to meet client needs. 3 3

- 0-No response/Does not work across multiple sectors
- 1-Some response but no specifics/Unclear if works across sectors
- 2-Specific response but with some detail missing/Works with stakeholders from at least one other sector but unclear how many or with what sectors
- 3-Full response with substantive detail/Will work with stakeholders across 3 or more sectors

<p>7. Project addresses HUD's six pillars--including three foundations (equity, data, collaboration) and will employ at least one solution (housing &amp; supports, crisis response, and prevention).</p>	<div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">3</div>	3
<p>0-No response/Does not address HUD's six pillars                  1-Some response but no specifics/Unclear how program addresses any of HUD's six pillars                  2-Specific response but with some detail missing/Addresses at least one of HUD's six pillars but unclear how                  3-Full response with substantive detail/Fully explains how addresses 1 or more of HUD's six pillars</p>		
<p>For more information: <a href="https://www.usich.gov/fsp/improve-effectiveness-of-homelessness-response-systems/">https://www.usich.gov/fsp/improve-effectiveness-of-homelessness-response-systems/</a></p>		
<p>8. Degree to which program addresses unsheltered homelessness.</p>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;">3</div>	3
<p>0-No response/Does not address unsheltered homelessness                  1-Some response but no specifics/Unclear if addresses unsheltered homelessness                  2-Specific response but with some detail missing/Addresses unsheltered homelessness but unclear how                  3-Full response with substantive detail/Fully describes how addresses unsheltered homelessness</p>		
<p>9. Describes how the agency will ensure project staff retention (e.g., paying a living wage, offering mental health supports, etc.)</p>	<div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">3</div>	3
<p>0-No response/Does not have a plan for ensuring staff retention                  1-Some response but no specifics/Unclear how program will ensure staff retention                  2-Specific response but with some detail missing/Has plan to ensure staff retention but unclear what the plan entails                  3-Full response with substantive detail/Fully describes how program will ensure staff retention</p>		
Subtotal <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;">25/35</div>		37

**V. Performance Measures**

**Time to Placement\***

I. On average, time from project entry to residential placement is 15 days (RRH), 30 days (DV RRH), or 180 days (PSH & TH). If program has not enrolled participants, applicant provides reasonable explanation for low or no enrollment

51 days

8

8

- 0-No response/Mising or incomplete data
- 1-More than 45 (RRH) / 60 (RRH) / 300 (PSH & TH) days
- 2-Between 41-45 (RRH) / 56-60 (DV RRH) / 281-300 (PSH &TH) days
- 3-Between 36-40 (RRH) / 51-55 (DV RRH) / 280 (PSH & TH) days
- 4-Between 31-35 (RRH) / 46-50 (DV RRH) / 241-260 (PSH & TH) days
- 5-Between 26-30 (RRH) / 41-45 (DV RRH) / 221-240 (PSH & TH) days
- 6-Between 21-25 (RRH) / 36-40 (DV RRH) / 201-220 (PSH & TH) days
- 7-Between 16-20 (RRH) / 31-35(DV RRH) / 181-200 (PSH & TH) days
- 8-Less than or equal to 15 (RRH) / 30 (DV RRH) / 180 (PSH & TH) days

**Exits without Move-in\***

2. Less than 5% of clients exited without move-in.

10

8

- 0-No response/No data
- 1-More than 95% of clients exited without move-in/Incomplete data
- 2- Between 81-95% of clients exited without move-in
- 3- Between 66-80% of clients exited without move-in
- 4- Between 51-65% of clients exited without move-in
- 5- Between 36-50% of clients exited without move-in
- 6- Between 21-35% of clients exited without move-in
- 7- Between 6-20% of clients exited without move-in
- 8-Less than 5% of clients exited without move-in

287

*\*If program has not enrolled any participants, score the following two sections in lieu of Time to Placement and Exits without Move-in*

**Rationale for No or Low Enrollment**

—

8

1. Applicant provides reasonable explanation for low or no enrollment.

- 0-No response
- 1-Some response but no specifics
- 2-General statement in response but significant details missing/Unable to determine reasonable explanation
- 3-At least one specific response but significant details missing/Unable to determine reasonable explanation
- 4-At least 2 specific statements in response but details missing/Unable to determine reasonable explanation
- 5-At least 3 specific statements in response but details missing/Provides explanations but unable to determine if it's reasonable
- 6-Multiple specific statements in response with details missing/Seems to be a reasonable explanation
- 7-Specific response to 90% of the questions with substansive detail/Able to determine reasonable explanation
- 8-Full response with substantive detail and specifics

**Timeline**

2. Provides a detailed schedule of proposed activities at 60, 120, and 180 days after grant award.

—

8

- 0-No response
- 1-Some response but no specifics
- 2-General statement in response but significant details missing/Unable to determine schedule and activities
- 3-At least one specific response but significant details missing/Unable to determine schedule and activities for each timepoint
- 4-At least 2 specific statements in response but details missing/Unable to determine schedule and activities addressing each timepoint
- 5-At least 3 specific statements in response but details missing/Able to determine general schedule and activities
- 6-Multiple specific statements in response with details missing/Able to determine clear schedule and activities addressing each timepoint
- 7-Specific response to 90% of the questions with substantive detail/Able to determine clear schedule and activities at each timepoint
- 8-Full response with substantive detail and specifics

**Project Cost-Effectiveness**

3. Describes how the project has assessed and will assess project outcomes. 4 5

- 0-No response/Does not and will not assess outcomes
- 1-Some response but no specifics on what the outcomes are and how they are or will be assessed
- 2-Specific response to some but not all parts of the question/Unclear if has defined and/or assessed outcomes
- 3. Specific response to most by not all parts of the question/Has not assessed outcomes, but defines outcomes and has plan for how to address them
- 4-Specific response to most by not all parts of the question/Defined outcomes and has begun to assess them and has plan for continued assessment of outcomes
- 5-Full response with substantive detail and specifics about program outcomes, how they are assessed and will be assessed. Program shows progress toward outcomes.

4. Costs per household is reasonable for program type. 4 5

- 0-No response/Unable to determine cost per household
- 1-Some response but no specifics/Unclear average cost per household is reasonable and consistent with population
- 2-At least one specific statement in response but details missing/Unclear if overall average cost is reasonable and consistent with population served.
- 3-Specific response/Overall average cost per household is high
- 4-Specific response/Overall average cost per household is somewhat high
- 5-Full response with specifics addressing reasonable average household cost and consistent with the population to be served

For consideration:

[https://www.huduser.gov/publications/pdf/costs\\_homeless.pdf](https://www.huduser.gov/publications/pdf/costs_homeless.pdf)

Subtotal 22 26

**VI. Equity Factors**

Agency Factors

1.a. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions.	1	1
0-No response/No under-represented individuals in managerial or leadership positions		
1-Under-represented individuals in managerial and leadership positions		
1.b. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.	1	1
0-No response/Has not reviewed and has no plan		
.5-Has reviewed but has no plan or plan is unclear		
1-Has reviewed and has fully developed plan		
2.a. Agency's Board of Directors includes representation from at least one person with lived experience.	1	1
0-No response/No representation from individuals with lived experience		
.5-Representation from at least one person with lived experience		
1-Representation from two or more persons with lived experience		
2.b. Agency has relational process for receiving and incorporating feedback from persons with lived experience.	1	1
0-No response/No process		
.5-Has process but parts are unclear or not developed fully		
1-Fully developed process		
<b>Program Factors</b>		
3.a. Program has reviewed participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, age, etc.	1	1
0-No response/Has no plan to review outcomes with equity lens		
.5-Has general plan to review outcomes with equity lens but unclear how		
1-Has a clear plan to review outcomes with equity lens		
3.b. Program has identified programmatic changes need to make participant outcomes more equitable and developed a plan to make those changes.	1	1
0-No response/Has not identified changes needed and has no plan		
.5-Has identified changes needed but has no plan or plan is unclear		
1-Has identified changes needed and has fully developed plan		
Subtotal	6	6
<b>VII. HUD Monitoring</b>		
1. Any HUD monitoring findings and corrective action were minimal.	3	5
0-No response		
1- Three or more findings with any corrective actions		
2- Two or more findings with significant corrective actions		
3-Two or more findings with minimal corrective action		
4-One finding with minimal corrective action		
5-No findings		
Subtotal	3	5
<b>VIII. CoC Participation and Contribution to System Performance</b>		

<p>1. Agency participates in PIC--e.g., serving on the Board of Directors, committees, and /or workgroups--and collaborates with PIC members.</p>	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;">3</div>	3
<p>0-No response/Does not participate or collaborate                  1-Serves on 1 committee or workgroup or collaborates with PIC members                  2-Serves on 2 committees or workgroups and collaborates with PIC members                  3-Serves on 3 or more committee, boards, and workgroups (full attendance) and collaborates substantially with PIC members</p>		
<p><i>**PIC will confirm narrative responses.</i></p>		
<p>2. Describes how project fits system needs and fits with CoC and HUD policy priorities.</p>	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;">3</div>	3
<p>0-No response/Does not fit any needs or priorities                  1-Some response but no specifics/Addresses at least 1 priority                  2- Some response but few specifics/Addresses at least 3 priorities/system needs                  3-Full response with substantive detail and addresses system needs and all priorities</p>		
<p>Subtotal</p>		6
<p><b>IX. Financial Performance</b></p>		
<p>1. Most recent agency financial audit found no exceptions or findings.</p>	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;">3</div>	3
<p>0-No response/2 or more findings with ongoing corrective action or 3+ findings                  1-Two findings with corrective action completed                  2-One finding with minimal corrective action needed                  3-No findings</p>		
<p>2. Budget costs are within local average for project type.</p>	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;">2</div>	3
<p>0-No response/data/Unclear                  1-Budget costs are &gt;10% of local average and do not serve a high needs population requiring additional resources                  2-Budget costs are within 10% of local average or serves a high needs population requiring additional resources                  3-Budget costs are within or below local average</p>		
<p><i>**PIC will provide local averages</i></p>		
<p>Subtotal</p>		6

Total 80/90 100



**1E-5. Notification of Projects Rejected-Reduced**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

# PARTNERS IN CARE

Oahu Continuum of Care

*Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.*

SENT VIA EMAIL

September 6, 2023

Kayla Keehu-Alexander  
Vice President, Community Impact  
Aloha United Way  
kkeeuh@auw.org

Dear Ms. Keehu-Alexander,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	Consolidated Permanent Supportive Housing 2023	23	1	\$4,408,134
Renewal	Consolidated Permanent Supportive Housing 2023	23	2	\$321,243

**Please note that \$905,982 of the amount requested has been reallocated.**

All proposals were reviewed by four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '22 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7th, 2023, delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

Please note that all funding decisions are tentative and subject to revision pending any appeals received and will not be final until Friday, September 8th, 2023. At this time, PIC will announce final funding awards to the continuum listserv.

PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director



Aloha United Way

September 7, 2023

O'ahu Continuum of Care Advisory Board  
200 North Vineyard Boulevard  
Suite A-210  
Honolulu, Hawaii 96817

Dear O'ahu CoC Advisory Board,

Please accept this letter of appeal to the FY23 Project Award of the Consolidated Permanent Supportive Housing 2023 proposal in the amounts of \$4,408,134 (Tier 1) and \$321,243 (Tier 2). The Consolidated PSH program has continuously served above the minimum required number of clients for no less than 5 years while under the administration of Aloha United Way. In FY21, a total of 372 households were served, 30% more than the proposed amount of 285.

In FY21, this project received an initial, and similarly reduced award, that resulted in the subrecipient agencies taking on additional work to offload dozens of clients onto EHV to ensure they would be kept housed and to support the priority to use EHV. This shift of course reduced the use of PSH and the crucial services that PSH offers, including a decrease in recidivism. This was done under CoC guidance with the understanding that it may generate a fund surplus on the PSH grant down the road. When the FY21 award was announced by HUD, A UW received the entire grant award, but then had to again work to quickly refill the emptied vouchers and locate housing for new clients, resulting in a decrease of spending during that process as the subrecipients worked to approve and house new clients to replace those removed.

The surplus in FY21 was brought to the attention of the CoC and HUD as early as November 2022. The CoC deferred to HUD's guidance that an additional subrecipient agency should be added to increase spend-down capacity and house more clients, even though the minimum required units had been filled by December 2022. This lengthy and intensive process was done with utmost care to ensure we onboarded an agency with enough experience, capacity, and proper financial controls to handle a grant of this magnitude, while also conforming to HUD's guidelines and remaining in good standing with the CoC. A UW fulfilled this request by incorporating a 4th subrecipient agency in April 2023.

In addition, by May 2023, the number of clients and rents have returned pre-EHV transition numbers, meaning that the subrecipients have successfully re-filled the PSH slots and we have estimated a minimum award of \$5,128,177 is needed to be able to continue to serve even just currently housed clients.

The implications of this reduced award will be detrimental to both the clients we are currently serving, as well as clients who remain on the by-name list waiting to be housed. The Consolidated subrecipients would have to exit no less than 18 formerly homeless and disabled households out of PSH and would be unable to accept any new clients while operating under the reduced funds that have been awarded. These exited households may face eviction and risk returning to homelessness. Additionally, this specific grant allows for housing non-chronically homeless individuals and families, which expands the reach of PSH to those who may not otherwise be eligible.



Aloha United Way

In summary, we are appealing this decision and ask for reconsideration based on the following negative impacts of this decision:

- 1) Based on currently reached service numbers, at least 18 clients would need to be exited from the program to stay within the reduced amount of PSH funding that would be available.
- 2) Few, if any, new clients could be accepted into housing from the waiting list from the start of the funding cycle; meaning any new clients could only be served if another client exited.
- 3) The reduction in this award reduces the available amount of valuable PSH funds for eligible clients.
- 4) The award reduction limits the benefits and significant work that went into bringing a 4<sup>th</sup> subrecipient onto the project to expand eligibility and remove homeless families from the wait list, and
- 5) The differential in spending in the last cycle was a result of AUW and its subrecipients agreeing to support moving clients to the EHV program under the guidance of COC and if that work had not been done, the last PSH funding cycle would have been spent down to a significantly greater level. The subrecipients again worked hard to rebuild the number of clients being served by PSH after this dramatic reduction in rent rolls from PSH to EHV and demonstrate the commitment to continuing to work to achieve full use of the requested award even when asked to also support the priorities of another program.

We humbly ask that this award amount be reconsidered to the requested amount of \$5,635,359, or to within 9% of the requested amount, which would be \$5,128,177, as this is the minimum amount needed to ensure we can continue to house the clients we have already committed to in the PSH program. Please let us know if there is any additional information we can provide, or questions we can answer.

With deepest aloha, and mahalo for your reconsideration,

Suzanne Skjold  
Chief Operating Officer



auw.org  
auw211.org



200 N Vineyard Blvd Suite 700  
Honolulu, HI 96817



(808) 536-1951  
Fax: (808) 543-2222

# PARTNERS IN CARE

Oahu Continuum of Care

*Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.*

SENT VIA EMAIL

September 8, 2023

Suzanne Skjold  
Chief Operating Officer  
200 North Vineyard Blvd  
Honolulu, HI 96817

Dear Ms. Skjold,

Mahalo nui for responding to the initial award letter and submitting your appeal request in a timely manner. The Advisory Board discussed your appeal and have made the final decision to submit the ranking order as it currently stands. The AUW Consolidated Grant will remain in straddling tier 1 and tier 2, with \$4,408,134 in tier 1 and \$321,243 in tier 2. An additional \$905,982 will not be considered for funding in either tier 1 or tier 2. AUW was ranked 23 of the priority listing. There is still a possibility that we could receive funding for tier 2 projects. We will notify you once the awards are made public by HUD.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-380-9466 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	AUW Consolidated	23	1	\$4,408,134
Renewal	AUW Consolidated		2	\$321,243
Not funded	AUW Consolidated			\$905,982

PIC has provided a spreadsheet, attached to this notification email of the final project listing for the 2023 HUD CoC Program Competition.

Sincerely,



Laura E. Thielen  
PIC Executive Director

**1E-5a. Notification of Projects Accepted**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

# PARTNERS IN CARE

Oahu Continuum of Care

*Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.*

SENT VIA EMAIL

September 6, 2023

Summer Pakele  
Housing Director  
Alternative Structures International  
spakele@asi-hawaii.org

Dear Ms. Pakele,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	Permanent Supportive Housing	25	2	\$ 357,769*

\*Please ensure that the amount requested on e-snaps matched the amount awarded (this is the same amount listed in the 2023 GIW).

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '22 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7, 2023, delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Kayla Keehu-Alexander  
Vice President, Community Impact  
Aloha United Way  
kkeeuh@auw.org

Dear Ms. Keehu-Alexander,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	Consolidated Permanent Supportive Housing 2023	23	1	\$4,408,134
Renewal	Consolidated Permanent Supportive Housing 2023	23	2	\$321,243

**Please note that \$905,982 of the amount requested has been reallocated.**

All proposals were reviewed by four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '22 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7th, 2023, delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director



# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Ms. Amanda Pump  
CPO  
Child and Family Services  
[apump@cfs-hawaii.org](mailto:apump@cfs-hawaii.org)

Dear Ms. Pump,

On behalf of Partners In Care (PIC) and the O'ahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-380-9466 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	DV Coordinated Entry System	13	1	\$228,852*

\*please ensure that the amount requested on e-snaps matched the amount awarded (this is the same amount listed in the 2023 GIW)

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '23 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7th, 2023 delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Ryan Catalani  
Executive Director  
Family Promise of Hawaii  
ryan@familypromisehawaii.org

Dear Mr. Catalani,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal-New	Family Promise DV Rapid Rehousing	18	1	\$976,786
New	Joint TH/PH-RRH	5	1	\$843,849

All proposals were reviewed by four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '22 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7th, 2023, delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Jonathan Berliner  
Executive Director  
Gregory House Programs  
jonb@gregoryhouse.org

Dear Mr. Berliner,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal-New	Anuenue Pathway to Housing	11	1	\$680,937
New	Anuenue Elua	7	1	\$581,962

All proposals were reviewed by four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '22 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7<sup>th</sup>, 2023, delivered to 200 North Vineyard Boulevard, Suite A-210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Heather Lusk  
Hawai'i Health and Harm Reduction Center  
677 Ala Moana Blvd, Suite 226  
Honolulu, HI 96813  
hlusk@hhrc

Dear Ms. Lusk,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-380-9466 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	YHDP GOTS	3	1	\$62,377

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Ms. Venus Rosete-Mederios  
Chief Executive Officer  
Hale Kipa, Inc.  
[venus@halekipa.org](mailto:venus@halekipa.org)

Dear Ms. Rosete-Mederios,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-380-9466 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal YHDP	Guide on the Side Collaborative	8	1	\$195,496

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '23 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7th, 2023 delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Greg Payton  
CEO  
Mental Health Kokoa  
[gpayton@mhkhawaii.org](mailto:gpayton@mhkhawaii.org)

Dear Mr. Payton,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-380-9466 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	Mahani Hale	12	1	\$273,665
Renewal	Safe Haven	17	1	\$864,197

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

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Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Ryan Kusumoto  
President and CEO  
Parents and Children Together  
rkutsumoto@pacthawaii.org

Dear Mr. Kutsumoto,

On behalf of Partners In Care (PIC) and the O'ahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-380-9466 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	Renewal Project	26	2	\$277,304*

\*please ensure that the amount requested on e-snaps matched the amount awarded (this is the same amount listed in the 2023 GIW)

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '23 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7th, 2023 delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Carla Houser  
Executive Director  
Residential Youth Services and Empowerment  
chouser@rysehawaii.org

Dear Ms. Houser,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-380-9466 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org)

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal YHDP	Diversion	16	1	\$235,884
Renewal YHDP	Guide on the Side	10	1	\$245,439
Renewal YHDP	Mobile Crisis Response Hui	20	1	\$275,000
Renewal YHDP	PSH	14	1	\$474,068
Renewal YHDP	TH/RRH	22	1	\$188,680
Renewal	FY 2023 Youth RRH	21	1	\$402,904
Renewal	FY 2023 Youth Permanent Housing	9	1	\$177,652

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

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PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director



# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Linda Ahue  
Executive Director  
Steadfast Housing Development Corporation  
lahue@steadfast-hawaii.org

Dear Ms. Ahue,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	2023 PH Ohana	19	1	\$628,209
Renewal	Ekolu Group Homes	15	1	\$136,086
Renewal	Headway House 2023	24	2	\$229,289

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '23 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7<sup>th</sup>, 2023, delivered to 200 North Vineyard Boulevard, Suite A-210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

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Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

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SENT VIA EMAIL

September 6, 2023

Mary Scott Lau  
Executive Director  
Women In Need  
winhi@hawaiiantel.net

Dear Ms. Scott Lau,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal	WIN Housing Domestic Violence Survivors with Comfort Pets	27	2	\$172,998

All proposals were reviewed by at least five (5) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '22 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7<sup>th</sup>, 2023, delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

Please note that all funding decisions are tentative and subject to revision pending any appeals received and will not be final until Friday, September 8<sup>th</sup>, 2023. At this time, PIC will announce final funding awards to the continuum listserv.

PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

*Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.*

SENT VIA EMAIL

September 6, 2023

Tanya Brown  
Executive Director  
United States Veterans Initiative  
tbrown@usvets.org

Dear Ms. Brown,

On behalf of Partners In Care (PIC) and the O'ahu Continuum of Care (CoC), this serves as notification that your project proposal has been reviewed and ranked for the 2023 Program Competition. I regret to inform you that based on the project ranking, we will not be funding your project this year.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
New	Outreach Services for Unsheltered...	28	Not Funded	N/A

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

Pursuant to Page 11 of the HI-501 FY '23 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm on Thursday, September 7th, 2023, delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

Please note that all funding decisions are tentative and subject to revision pending any appeals received and will not be final until Friday, September 8th, 2023. At this time, PIC will announce final funding awards to the continuum listserv.

PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Sincerely,



Laura E. Thielen  
PIC Executive Director

# PARTNERS IN CARE

Oahu Continuum of Care

*Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.*

SENT VIA EMAIL

September 6, 2023

Laura E. Thielen  
Executive Director  
Partners In Care  
laurat@partnersincareoahu.org

Dear Mrs. Thielen,

On behalf of Partners In Care (PIC) and the Oahu Continuum of Care (CoC), I am pleased to notify you that the following project proposal has been reviewed and ranked for the 2023 CoC Program Competition.

Should you have any questions or concerns please contact Sara Ironhill, Operations and Planning Manager at 808-436-2908 or [sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org).

Funding Type	Project Title	Rank	Tier	Amount Awarded
Renewal YHDP	HI-501 Youth HMIS FY2023	6	1	\$106,105
Renewal YHDP	HI-501 Youth CES FY2023	2	1	\$93,191
Renewal	HI-501 HMIS FY2023	1	1	\$491,187
Renewal	HI-501 CES FY2023	4	1	\$449,432

All proposals were reviewed by at least four (4) non-conflicted evaluators pursuant to 24 CFR 578.95(d).

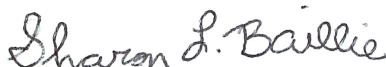
Pursuant to Page 7 of the HI-501 FY '23 CoC Competition RFP and Timeline, project applicants may appeal any funding decisions, including, but not limited to placement in Tier 1, Tier 2, reallocation, and/or complete defunding. Appeals must be submitted in writing to PIC by 5pm Thursday, September 7th, 2023, delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by an appeal panel made up of the non-conflicted members of the O'ahu CoC Advisory Board who did not serve on the initial Evaluation Committee. The decision of the appeal panel is final.

Please note that all funding decisions are tentative and subject to revision pending any appeals received and will not be final until Friday, September 8th, 2023. At this time, PIC will announce final funding awards to the continuum listserv.

PIC has provided a spreadsheet, attached to this notification email of how proposals scored and ranked against each other.

Again, we are pleased to include this project in the 2023 CoC Application to HUD.

Sincerely,



Sharon Baillie  
O'ahu CoC Planning and Housing Committee Chair

**1E-5b. Final Project Scores for All Projects**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

O'ahu CoC

- FY 2023 NOFO
- COMMITTEES
- PARTNERS
- PIT COUNT
- FY 2022 NOFO
- COC WRITTEN STANDARDS
- 2023 STATEWIDE HOMELESSNESS AND HOUSING SOLUTIONS CONFERENCE
- COC GOVERNANCE CHARTER

PLEASE BE AWARE THAT UPDATES TO THE RFP AND OTHER APPLICATION DOCUMENTS HAVE BEEN MADE. YOU MUST USE UPDATED FORMS FOR THIS COMPETITION.

FY 2023 HUD CONTINUUM OF CARE PROGRAM COMPETITION

NOFO RESOURCES:

- [HI- 501 COC FY23 PRIORITY LISTING \(FINAL 9/8/23\)](#)
- [REQUEST FOR PROPOSALS](#)
- [TIMELINE](#)
- [NOFO INFORMATION SESSION \(POWERPOINT\)](#)
- [2023 Q & A](#)
- [2023 RFP SUBMISSION TYPE](#)

◦ Check this for clarification on what narrative/scorecard should be used for your project.

NOFO SCORECARDS:

Delete Archive Report Reply Reply all Forward Read / Unread Categorize Flag / Unflag Print

HI 501 CoC FY23 NOFO Priority Listing now available

oahu-pic@googlegroups.com on behalf of Sara Ironhill  
To: oahu-pic@googlegroups.com

Fri 9/8/2023 2:44 PM

Aloha Partners,

We are pleased to announce the release of the HI-501 CoC NOFO Priority Listing for FY 23, now available on our website : <https://www.partnersincareoahu.org/fy-2023-nofo-copy>

Mahalo to the applicants and evaluators who submitted and reviewed this years project applications, we look forward to the continuation of many programs as well as the addition of new projects. We recognize the importance of the NOFO funding in support of our community, and your dedication to the people we serve.

Take good care,

**Sara Ironhill** | She/Her  
Operations and Planning Manager  
Partners In Care  
200 N. Vineyard Boulevard Ste. A-210  
Honolulu, HI 96817  
[sarai@partnersincareoahu.org](mailto:sarai@partnersincareoahu.org)  
C: (808) 436-2908

[www.partnersincareoahu.org](http://www.partnersincareoahu.org)  
[Partners In Care Facebook](#)



**25 Years of Bringing People Together to Address Homelessness!**

Score	Tier	Agency	Project Title	Funding Type	Project Type	Amount Requested	Amount Awarded	Reallocation	Reallocation Awarded	CoC Bonus
1	96.1 Tier 1	PIC	HMIS	Renewal	HMIS	\$ 491,187	\$ 491,187			
2	96.0 YHDP	PIC	YHDP CES	Renewal	CE	\$ 93,191	\$ 93,191			
3	94.75 YHDP	HHHRC	Guide on the Side Project	Renewal	SSO-YHDP	\$ 62,377	\$ 62,377			
4	94.5 Tier 1	PIC	CES	Renewal	SSO-CE	\$ 449,432	\$ 449,432			
5	93.9 Reallocation/CoC Bonus	Family Promise of Hawaii	Joint TH/PH-RRH	New	Joint TH & PH-RRH	\$ 843,839	\$ 843,839		\$455,680	\$388,159
6	93.8 YHDP	PIC	YHDP HMIS	Renewal	HMIS	\$ 106,105	\$ 106,105			
7	92.1 CoC Bonus	Gregory House/RYSE	Anuenue Elua	New	PH	\$ 581,962	\$ 581,962			\$581,962
8	90.8 YHDP	Hale Kipa	Guide on the Side Collaborative	Renewal	SSO-YHDP	\$ 195,496	\$ 195,496			
9	87.8 Tier 1	RYSE	Youth Permanant Housing	Renewal-New	PH	\$ 177,652	\$ 177,652			
10	86.375 YHDP	RYSE	GOTS	Renewal	SSO-YHDP	\$ 245,439	\$ 245,439			
11	84.9 Tier 1	Gregory House Programs	Anuenue Pathway to Housing	Renewal-New	Joint TH & PH-RRH	\$ 680,937	\$ 680,937			
12	84.375 Tier 1	MHK	Mahani Hale	Renewal	PH	\$ 273,665	\$ 273,665			
13	83.4 Tier 1	Child and Family Services	DV Coordinated Entry System	Renewal	SSO-CE	\$ 228,852	\$ 228,852			
14	82.7 YHDP	RYSE	Permanent Supportive Housing	Renewal	PSH	\$ 474,068	\$ 474,068			
15	82.4 Tier 1	Steadfast	Supportive Housing Program - Ekolu Group Homes 2023	Renewal	PH	\$ 136,086	\$ 136,086			
16	81.1 YHDP	RYSE	Diversion	Renewal	SSO-YHDP	\$ 235,884	\$ 235,884			
17	81 Tier 1	MHK	Safe Haven	Renewal	PH	\$ 864,197	\$ 864,197			
18	80.9 Tier 1	Family Promise of Hawaii	Domestic Violence Rapid Rehousing	Renewal-New	RRH	\$ 976,786	\$ 976,786			
19	80.8 Tier 1	Steadfast	Supportive Housing Program - PH Ohana 2023	Renewal	PH	\$ 628,209	\$ 628,209			
20	77.125 YHDP	RYSE	Mobile Crisis Outreach	Renewal	SSO-YHDP	\$ 275,000	\$ 275,000			
21	76.5 Tier 1	RYSE	Youth Rapid Rehousing	Renewal-New	RRH	\$ 402,904	\$ 402,904			
22	73.5 YHDP	RYSE	Transitional Housing-Rapid Rehousing	Renewal	TH-RRH	\$ 188,680	\$ 188,680			
23	78.0 Tier 1 and 2	Aloha United Way	Consolidated Permanent Supportive Housing FY2023	Renewal	PH	\$ 5,635,359	\$ 4,729,377			
24	77.6 Tier 2	Steadfast	Supportive Housing Program - Headway House 2023	Renewal	PH	\$ 229,289	\$ 229,289			
25	75.5 Tier 2	ASI	Permanent Supportive Housing	Renewal	PH	\$ 357,769	\$ 357,769			
26	70.1 Tier 2	PACT	Renewal Project	Renewal	Joint TH & PH-RRH	\$ 277,304	\$ 277,304			
27	63.6 Tier 2	WIN	WIN Housing DV Survivors w Comfort Pets	Renewal	Joint TH & PH-RRH	\$ 172,998	\$ 172,998			
28	71.8 Not Funded	US Vets	Outreach Services for Unsheltered...	New	SSO	\$ 464,931				
		PIC	Planning			\$ 692,943				
		AUW Tier 1				\$ 4,408,134				
		AUW Tier 2				\$ 321,243				



**2A-6. HUD's Homeless Data Exchange (HDX) Competition Report**

**HI-501**

**Partners In Care- O'ahu Continuum of Care**

# 2022 HDX Competition Report

## PIT Count Data for HI-501 - Honolulu City and County CoC

### Total Population PIT Count Data

	2019 PIT	2020 PIT	2021 PIT *	2022 PIT
Total Sheltered and Unsheltered Count	4417	4448	4200	3945
Emergency Shelter Total	1,114	1,297	1,186	963
Safe Haven Total	0	45	28	35
Transitional Housing Total	900	760	640	598
Total Sheltered Count	2014	2102	1854	1596
Total Unsheltered Count	2403	2346	2346	2349

### Chronically Homeless PIT Counts

	2019 PIT	2020 PIT	2021 PIT *	2022 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	1140	969	989	808
Sheltered Count of Chronically Homeless Persons	231	301	321	311
Unsheltered Count of Chronically Homeless Persons	909	668	668	497

# 2022 HDX Competition Report

## PIT Count Data for HI-501 - Honolulu City and County CoC

### Homeless Households with Children PIT Counts

	2019 PIT	2020 PIT	2021 PIT *	2022 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	325	315	298	225
Sheltered Count of Homeless Households with Children	254	263	246	186
Unsheltered Count of Homeless Households with Children	71	52	52	39

### Homeless Veteran PIT Counts

	2011 PIT	2019 PIT	2020 PIT	2021 PIT *	2022 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	332	384	353	275	198
Sheltered Count of Homeless Veterans	185	185	210	132	127
Unsheltered Count of Homeless Veterans	147	199	143	143	71

\*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

# 2022 HDX Competition Report

## HIC Data for HI-501 - Honolulu City and County CoC

### HMIS Bed Coverage Rate

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current VSP Beds	Total-Year Round, Current HMIS Beds	Total Year-Round, Current Non-VSP Beds	HMIS Bed Coverage Rate for Year-Round Beds
Emergency Shelter (ES) Beds	1500	90	1394	1410	98.87%
Safe Haven (SH) Beds	48	0	48	48	100.00%
Transitional Housing (TH) Beds	809	51	758	758	100.00%
Rapid Re-Housing (RRH) Beds	1374	61	1313	1313	100.00%
Permanent Supportive Housing (PSH) Beds	2052	0	1268	2052	61.79%
Other Permanent Housing (OPH) Beds	261	0	79	261	30.27%
Total Beds	6,044	202	4860	5842	83.19%

## 2022 HDX Competition Report

### HIC Data for HI-501 - Honolulu City and County CoC

#### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2019 HIC	2020 HIC	2021 HIC	2022 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	97	948	722	769

#### Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2019 HIC	2020 HIC	2021 HIC	2022 HIC
RRH units available to serve families on the HIC	118	159	212	261

#### Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2019 HIC	2020 HIC	2021 HIC	2022 HIC
RRH beds available to serve all populations on the HIC	832	895	1049	1374

# 2022 HDX Competition Report

## FY2021 - Performance Measurement Module (Sys PM)

### Summary Report for HI-501 - Honolulu City and County CoC

#### Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

**Metric 1.1:** Change in the average and median length of time persons are homeless in ES and SH projects.  
**Metric 1.2:** Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2020	FY 2021	Submitted FY 2020	FY 2021	Difference	Submitted FY 2020	FY 2021	Difference
1.1 Persons in ES and SH	4122	4184	148	132	-16	87	67	-20
1.2 Persons in ES, SH, and TH	5035	4922	209	185	-24	122	94	-28

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

2022 HDX Competition Report  
**FY2021 - Performance Measurement Module (Sys PM)**

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2020	FY 2021	Submitted FY 2020	FY 2021	Difference	Submitted FY 2020	FY 2021	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	5001	5197	753	780	27	373	377	4
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	5834	5851	765	787	22	431	423	-8

# 2022 HDX Competition Report

## FY2021 - Performance Measurement Module (Sys PM)

### Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2021	% of Returns	FY 2021	% of Returns	FY 2021	% of Returns	FY 2021	% of Returns
Exit was from SO	175	14	8%	15	9%	8	5%	37	21%
Exit was from ES	986	76	8%	46	5%	69	7%	191	19%
Exit was from TH	513	46	9%	17	3%	39	8%	102	20%
Exit was from SH	17	3	18%	1	6%	1	6%	5	29%
Exit was from PH	1886	73	4%	36	2%	69	4%	178	9%
TOTAL Returns to Homelessness	3577	212	6%	115	3%	186	5%	513	14%

### Measure 3: Number of Homeless Persons

#### Metric 3.1 – Change in PIT Counts



## 2022 HDX Competition Report

### FY2021 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2020 PIT Count	January 2021 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	4448		
Emergency Shelter Total	1297	1186	-111
Safe Haven Total	45	28	-17
Transitional Housing Total	760	640	-120
Total Sheltered Count	2102	1854	-248
Unsheltered Count	2346		

### Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2020	FY 2021	Difference
Universe: Unduplicated Total sheltered homeless persons	5035	4922	-113
Emergency Shelter Total	4031	4121	90
Safe Haven Total	114	83	-31
Transitional Housing Total	1253	1114	-139

# 2022 HDX Competition Report

## FY2021 - Performance Measurement Module (Sys PM)

### Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2020	FY 2021	Difference
Universe: Number of adults (system stayers)	418	419	1
Number of adults with increased earned income	6	5	-1
Percentage of adults who increased earned income	1%	1%	0%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2020	FY 2021	Difference
Universe: Number of adults (system stayers)	418	419	1
Number of adults with increased non-employment cash income	81	83	2
Percentage of adults who increased non-employment cash income	19%	20%	1%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2020	FY 2021	Difference
Universe: Number of adults (system stayers)	418	419	1
Number of adults with increased total income	84	86	2
Percentage of adults who increased total income	20%	21%	1%

# 2022 HDX Competition Report

## FY2021 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2020	FY 2021	Difference
Universe: Number of adults who exited (system leavers)	530	554	24
Number of adults who exited with increased earned income	108	60	-48
Percentage of adults who increased earned income	20%	11%	-9%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2020	FY 2021	Difference
Universe: Number of adults who exited (system leavers)	530	554	24
Number of adults who exited with increased non-employment cash income	82	109	27
Percentage of adults who increased non-employment cash income	15%	20%	5%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2020	FY 2021	Difference
Universe: Number of adults who exited (system leavers)	530	554	24
Number of adults who exited with increased total income	169	153	-16
Percentage of adults who increased total income	32%	28%	-4%

## 2022 HDX Competition Report

### FY2021 - Performance Measurement Module (Sys PM)

#### Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2020	FY 2021	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	3539	3690	151
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1278	1334	56
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	2261	2356	95

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2020	FY 2021	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	4828	5009	181
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	2059	2225	166
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	2769	2784	15

## 2022 HDX Competition Report

### FY2021 - Performance Measurement Module (Sys PM)

#### Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2021 (Oct 1, 2020 - Sept 30, 2021) reporting period.

#### Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2020	FY 2021	Difference
Universe: Persons who exit Street Outreach	300	149	-151
Of persons above, those who exited to temporary & some institutional destinations	90	37	-53
Of the persons above, those who exited to permanent housing destinations	126	33	-93
% Successful exits	72%	47%	-25%

Metric 7b.1 – Change in exits to permanent housing destinations

# 2022 HDX Competition Report

## FY2021 - Performance Measurement Module (Sys PM)

	Submitted FY 2020	FY 2021	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	3084	2630	-454
Of the persons above, those who exited to permanent housing destinations	1649	1435	-214
% Successful exits	53%	55%	2%

### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2020	FY 2021	Difference
Universe: Persons in all PH projects except PH-RRH	827	1137	310
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	784	1116	332
% Successful exits/retention	95%	98%	3%

# 2022 HDX Competition Report

## FY2021 - SysPM Data Quality

### HI-501 - Honolulu City and County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2019	Submitted FY2020	FY2021	Submitted FY2019	Submitted FY2020	FY2021	Submitted FY2019	Submitted FY2020	FY2021	Submitted FY2019	Submitted FY2020	FY2021	Submitted FY2019	Submitted FY2020	FY2021
1. Number of non-DV Beds on HIC	1209	1543	1492	1009	825	755	2520	1887	1867	832	895	1049			
2. Number of HMIS Beds	1189	1543	1492	985	825	755	1769	1887	1867	791	845	1049			
3. HMIS Participation Rate from HIC ( % )	98.35	100.00	100.00	97.62	100.00	100.00	70.20	100.00	100.00	95.07	94.41	100.00			
4. Unduplicated Persons Served (HMIS)	4225	5452	3800	1838	1358	1232	1410	1588	1761	2584	2162	2629	1099	3976	3555
5. Total Leavers (HMIS)	2351	4382	3169	1088	708	685	318	248	339	1659	1390	1448	763	2847	2037
6. Destination of Don't Know, Refused, or Missing (HMIS)	385	383	316	123	32	57	26	5	18	173	33	56	10	140	817
7. Destination Error Rate (%)	16.38	8.74	9.97	11.31	4.52	8.32	8.18	2.02	5.31	10.43	2.37	3.87	1.31	4.92	40.11

2022 HDX Competition Report  
**FY2021 - SysPM Data Quality**



# 2022 HDX Competition Report

## Submission and Count Dates for HI-501 - Honolulu City and County CoC

### Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2022 PIT Count	3/9/2022	Yes

### Report Submission Date in HDX

	Submitted On	Met Deadline
2022 PIT Count Submittal Date	4/14/2022	Yes
2022 HIC Count Submittal Date	4/14/2022	Yes
2021 System PM Submittal Date	2/23/2022	Yes

# 2023 HDX Competition Report

## PIT Count Data for HI-501 - Honolulu City and County CoC

### Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	4448	4200	3945	4028
Emergency Shelter Total	1,297	1,186	963	1116
Safe Haven Total	45	28	35	42
Transitional Housing Total	760	640	598	505
Total Sheltered Count	2102	1854	1596	1663
Total Unsheltered Count	2346	2346	2349	2365

### Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	969	989	808	917
Sheltered Count of Chronically Homeless Persons	301	321	311	269
Unsheltered Count of Chronically Homeless Persons	668	668	497	648

# 2023 HDX Competition Report

## PIT Count Data for HI-501 - Honolulu City and County CoC

### Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	315	298	225	236
Sheltered Count of Homeless Households with Children	263	246	186	192
Unsheltered Count of Homeless Households with Children	52	52	39	44

### Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	332	353	275	198	226
Sheltered Count of Homeless Veterans	185	210	132	127	153
Unsheltered Count of Homeless Veterans	147	143	143	71	73

\*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

# 2023 HDX Competition Report

## HIC Data for HI-501 - Honolulu City and County CoC

### HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	1,476	1,357	1,382	98.19%	94	94	100.00%	1,451	98.31%
SH Beds	48	48	48	100.00%	0	0	NA	48	100.00%
TH Beds	1,005	975	975	100.00%	30	30	100.00%	1,005	100.00%
RRH Beds	438	432	432	100.00%	6	6	100.00%	438	100.00%
PSH Beds	2,092	1,188	2,092	56.79%	0	0	NA	1,188	56.79%
OPH Beds	938	80	80	100.00%	0	0	NA	80	8.53%
Total Beds	5,997	4,080	5,009	81.45%	130	130	100.00%	4,210	70.20%

2023 HDX Competition Report  
HIC Data for HI-501 - Honolulu City and County CoC

# 2023 HDX Competition Report

## HIC Data for HI-501 - Honolulu City and County CoC

**Notes**

\*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

\*\*For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	948	722	769	625

### Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	159	212	261	136

### Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	895	1049	1374	438

2023 HDX Competition Report  
HIC Data for HI-501 - Honolulu City and County CoC

# 2023 HDX Competition Report

## FY2022 - Performance Measurement Module (Sys PM)

### Summary Report for HI-501 - Honolulu City and County CoC

#### Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

**Metric 1.1:** Change in the average and median length of time persons are homeless in ES and SH projects.  
**Metric 1.2:** Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	4184	3444	132	141	9	67	73	6
1.2 Persons in ES, SH, and TH	4922	4138	185	184	-1	94	95	1

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.



2023 HDX Competition Report  
**FY2022 - Performance Measurement Module (Sys PM)**

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	5197	3986	780	807	27	377	320	-57
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	5851	4634	787	789	2	423	365	-58

# 2023 HDX Competition Report

## FY2022 - Performance Measurement Module (Sys PM)

### Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	198	13	7%	8	4%	15	8%	36	18%
Exit was from ES	921	73	8%	57	6%	73	8%	203	22%
Exit was from TH	335	25	7%	27	8%	44	13%	96	29%
Exit was from SH	27	2	7%	0	0%	3	11%	5	19%
Exit was from PH	1352	28	2%	38	3%	70	5%	136	10%
TOTAL Returns to Homelessness	2833	141	5%	130	5%	205	7%	476	17%

### Measure 3: Number of Homeless Persons

#### Metric 3.1 – Change in PIT Counts

## 2023 HDX Competition Report

### FY2022 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		3945	
Emergency Shelter Total	1186	963	-223
Safe Haven Total	28	35	7
Transitional Housing Total	640	598	-42
Total Sheltered Count	1854	1596	-258
Unsheltered Count		2349	

### Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	4922	4150	-772
Emergency Shelter Total	4121	3376	-745
Safe Haven Total	83	98	15
Transitional Housing Total	1114	973	-141

# 2023 HDX Competition Report

## FY2022 - Performance Measurement Module (Sys PM)

### Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	419	405	-14
Number of adults with increased earned income	5	4	-1
Percentage of adults who increased earned income	1%	1%	0%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	419	405	-14
Number of adults with increased non-employment cash income	83	69	-14
Percentage of adults who increased non-employment cash income	20%	17%	-3%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	419	405	-14
Number of adults with increased total income	86	69	-17
Percentage of adults who increased total income	21%	17%	-4%

# 2023 HDX Competition Report

## FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	554	378	-176
Number of adults who exited with increased earned income	60	67	7
Percentage of adults who increased earned income	11%	18%	7%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	554	378	-176
Number of adults who exited with increased non-employment cash income	109	112	3
Percentage of adults who increased non-employment cash income	20%	30%	10%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	554	378	-176
Number of adults who exited with increased total income	153	158	5
Percentage of adults who increased total income	28%	42%	14%

# 2023 HDX Competition Report

## FY2022 - Performance Measurement Module (Sys PM)

### Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	3690	3185	-505
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1334	1271	-63
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	2356	1914	-442

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	5009	3894	-1115
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	2225	1747	-478
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	2784	2147	-637

2023 HDX Competition Report  
**FY2022 - Performance Measurement Module (Sys PM)**

**Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD’s Homeless Definition in CoC Program-funded Projects**

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

**Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing**

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	149	581	432
Of persons above, those who exited to temporary & some institutional destinations	37	321	284
Of the persons above, those who exited to permanent housing destinations	33	121	88
% Successful exits	47%	76%	29%

Metric 7b.1 – Change in exits to permanent housing destinations

# 2023 HDX Competition Report

## FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	2630	3888	1258
Of the persons above, those who exited to permanent housing destinations	1435	1619	184
% Successful exits	55%	42%	-13%

### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	1137	1338	201
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1116	1260	144
% Successful exits/retention	98%	94%	-4%



2023 HDX Competition Report  
**FY2022 - SysPM Data Quality**  
**HI-501 - Honolulu City and County CoC**

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	1543	1492	1458	825	755	758	1887	1867	2313	895	1049	1313			
2. Number of HMIS Beds	1543	1492	1442	825	755	758	1887	1867	1347	845	1049	1313			
3. HMIS Participation Rate from HIC ( % )	100.00	100.00	98.90	100.00	100.00	100.00	100.00	100.00	58.24	94.41	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	5452	3800	4953	1358	1232	1200	1588	1761	1618	2162	2629	1986	3976	3555	3834
5. Total Leavers (HMIS)	4382	3169	3857	708	685	651	248	339	352	1390	1448	1208	2847	2037	2839
6. Destination of Don't Know, Refused, or Missing (HMIS)	383	316	369	32	57	24	5	18	15	33	56	65	140	817	166
7. Destination Error Rate (%)	8.74	9.97	9.57	4.52	8.32	3.69	2.02	5.31	4.26	2.37	3.87	5.38	4.92	40.11	5.85

2023 HDX Competition Report  
**FY2022 - SysPM Data Quality**

# 2023 HDX Competition Report

## Submission and Count Dates for HI-501 - Honolulu City and County CoC

### Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/23/2023	

### Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/29/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	10/7/2022	Yes

**Other Attachments: Letters of Support**

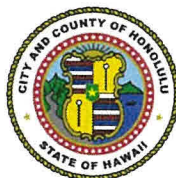
**HI-501**

**Partners In Care- O'ahu Continuum of Care**

**OFFICE OF HOUSING  
KE KE'ENA HO'OLĀLĀ KŪKULA HALE  
CITY AND COUNTY OF HONOLULU**

530 SOUTH KING STREET, ROOM 306 • HONOLULU, HAWAII 96813  
PHONE: (808) 768-4675 • FAX: (808) 768-7792 • WEB: [www.honolulu.gov/housing](http://www.honolulu.gov/housing)

RICK BLANGIARDI  
MAYOR  
MEI'A



DENISE ISERI-MATSUBARA  
EXECUTIVE DIRECTOR  
PO'O HO'OKO

September 12, 2023

Ms. Laura Thielen  
Partners In Care  
200 N. Vineyard Boulevard Ste. A-210  
Honolulu, Hawaii 96817

Dear Ms. Thielen:

The City and County of Honolulu's Office of Housing is pleased to provide this letter of support to Partners In Care for their application to the Department of Housing and Urban Development's (HUD) annual solicitation for proposals related to its Continuum of Care (COC) program for 2023. The coalition of homeless service providers and interested community members represented by Partners In Care continues to be an important planning and coordinating entity for programs to ending homelessness on Oahu.

Homelessness and Affordable Housing are top priorities for the Blangiardi Administration. We have been working diligently over the past several years to partner with organizations like Partners In Care to combat homelessness and further the development of affordable housing for our community. Partners In Care has been able to successfully leverage HUD funding through various organizations to ensure funds are spent efficiently and effectively. The City has been a member of PIC for many years and has participated in the planning, policy-making, and selection of service providers that implement critical programs that serve the community through the Partners In Care coalition.

The City and County of Honolulu continues to be a proud partner of Partners In Care and we fully support PIC in its grant application to HUD so they can continue to promote access to mainstream programs that serve those fleeing from domestic violence, as well as those experiencing homelessness. The work that PIC does has meaningful and sustainable impact on communities throughout the City and County of Honolulu.

Sincerely,

A handwritten signature in black ink, appearing to read "Denise", with a long horizontal line extending to the right.

Denise Iseri-Matsubara  
Executive Director



September 1, 2023

RE: Support for Partners In Care- O'ahu Continuum of Care

To Whom It May Concern:

This serves as a letter of support for the FY 2023 NOFO Consolidated Application from HI-501 Partners In Care - O'ahu Continuum of Care (PIC).

Kalihi-Palama Health Center (KPHC) has been collaborating with PIC for almost 25 years. PIC holds monthly meetings for the general CoC as well as various committee meetings. KPHC participates in the General meetings and Data Committee meetings, and appreciate the chance to listen to and share ideas with our partnering agencies across the island.

KPHC has attended the CoC Lunch and Learn sessions. These sessions are valuable opportunities for us to educate providers on the services provided by our program; they give us the ability to reach a broader target audience and make new connections. Additionally, PIC publishes a weekly newsletter in which we can promote and remind providers of our upcoming events for the week. The newsletter also contains a section for job vacancies where we can benefit from listing our employment opportunities.

PIC recently underwent a transition in the vendor for the HMIS system (from Bitfocus to Clarity), and the impact of this transition on health care providers has been wonderful. This new system allows for a care team to be created for each individual - when viewing a client profile, it's easy to see which homeless service provider, health plan, etc. is working with the client, ensuring that wraparound services and communication between providers is streamlined.

Additionally, this year Medicaid is more involved in servicing people experiencing homelessness by working to educate the Continuum on Medicaid reimbursables. Feel free to contact me at (808) 791-6376 if I can be of further assistance.

Sincerely,

Leslie Uyehara  
Director, Health Care for the Homeless Project





# QUEEN'S CARE COALITION

Super Utilizer ■ Ke Ku'una Na'au  
1301 Punchbowl Street ■ Honolulu, Hawaii 96813 ■ Phone: (808) 691-1000 ■ Fax: (808) 691-4016

August 30, 2023

RE: Support for Partners In Care- O'ahu Continuum of Care

To Whom It May Concern,

This serves as a letter of support for the FY 2023 NOFO Consolidated Application from HI-501 Partners In Care - O'ahu Continuum of Care (PIC).

We have been collaborating with PIC for 5 years. PIC holds monthly meetings for the general CoC as well as various committee meetings. We participate in the general meetings and CES Oversight Committee and appreciate the chance to listen to and share ideas with our partnering agencies across the island.

Queen's Care Coalition has attended the CoC Lunch and Learn sessions and has presented to the CoC during sponsored Lunch and Learn sessions. These sessions are valuable opportunities for us to educate providers on the services provided by our program; they give us the ability to reach a broader target audience and make new connections. Additionally, PIC publishes a weekly newsletter in which we can keep updated on various opportunities for training and community resources. The newsletter also contains a section for job vacancies where we can benefit from listing our employment opportunities.

PIC recently underwent a transition in the vendor for the HMIS system (from Bitfocus to Clarity), and the impact of this transition has been significant for our team. This new system allows for a care team to be created for each individual - when viewing a client profile, it's easy to see which homeless service provider, health plan, etc. is working with the client, ensuring that wraparound services and communication between providers is streamlined.

PIC serves as a valuable partner for our organization to meet the needs of our patients and serve the community.

Sincerely,

Tiffany Mukai, LCSW  
Queen's Care Coalition  
The Queen's Medical Center  
(808) 691-4522

**RE: Support for Partners In Care- O'ahu Continuum of Care**

This serves as a letter of support for the FY 2023 NOFO Consolidated Application from HI-501 Partners In Care - O'ahu Continuum of Care (PIC).

We have been collaborating with PIC for 6 years. PIC holds monthly meetings for the general CoC as well as various committee meetings. We participate in the general meetings, data & CES oversight committees and appreciate the chance to listen to and share ideas with our partnering agencies across the island.

Our agency has attended the CoC Lunch and Learn sessions/has presented to the CoC during sponsored Lunch and Learn sessions. These sessions are valuable opportunities for us to educate providers on the services provided by our program; they give us the ability to reach a broader target audience and make new connections. Additionally, PIC publishes a weekly newsletter in which we can promote and remind providers of our upcoming events for the week. The newsletter also contains a section for job vacancies where we can benefit from listing our employment opportunities.

PIC recently underwent a transition in the vendor for the HMIS system (from Bitfocus to Clarity), and the impact of this transition on health plans has been wonderful. This new system allows for a care team to be created for each individual - when viewing a client profile, it's easy to see which homeless service provider, health plan, etc. is working with the client, ensuring that wraparound services and communication between providers is streamlined.

Additionally, this year Medicaid is more involved in servicing people experiencing homelessness by working to educate the Continuum on Medicaid reimbursables.

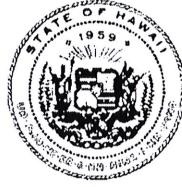
Signed,



**Richard Kaai**  
Director of Homeless Services  
Waikiki Health  
Keauhou Emergency Shelter  
Email: [rkaai@waikikihealth.org](mailto:rkaai@waikikihealth.org)



**JOSH GREEN, M.D.**  
GOVERNOR  
KE KIA'ĀINA



**HAKIM OUANSAFI**  
EXECUTIVE DIRECTOR

**BARBARA E. ARASHIRO**  
EXECUTIVE ASSISTANT

STATE OF HAWAII  
KA MOKU'ĀINA O HAWAI'I  
**HAWAII PUBLIC HOUSING AUTHORITY**

1002 NORTH SCHOOL STREET  
POST OFFICE BOX 17907  
HONOLULU, HAWAII 96817

IN REPLY PLEASE REFER TO:

23:OED/66

September 22, 2023

Laura E. Thielen, Executive Director  
Partners In Care  
200 N. Vineyard Boulevard, Suite A-210  
Honolulu, Hawaii 96817

Subject: 2023 Continuum of Care Application


Dear Director Thielen,

Homelessness and Affordable Housing are the top issues that the Hawaii Public Housing Authority (HPHA) has been working on over the last several years. With more than 4,000 individuals experiencing homelessness on the island of Oahu, we must work with all partners in our community, including those with lived experience. Partners In Care – Oahu Continuum of Care (PIC) has been instrumental in addressing homelessness on the island of Oahu.

Through the Statewide Office of Homelessness and Housing Solutions, we work side by side with Partners In Care to advance legislation and create funding sources to end homelessness in our state.

This letter serves as a letter of support for the Partners In Care – Oahu Continuum of Care to continue their work towards ending homelessness in Hawaii.

Sincerely,



Hakim Ouansafi,  
Executive Director