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: IL-514 - DuPage County CoC

1A-2. Collaborative Applicant Name: Du Page, County Of

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Du Page, County Of

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1B. Coordination and Engagement–Inclusive Structure and Participation

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24 CFR part 578;
FY 2023 CoC Application Navigational Guide;
Section 3 Resources;

- PHA Crosswalk; and

- Frequently Asked Questions

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.
	In the chart below for the period from May 1, 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	No
4.	Disability Service Organizations	Yes	Yes	No
5.	EMS/Crisis Response Team(s)	Yes	No	No
6.	Homeless or Formerly Homeless Persons	Yes	Yes	No
7.	Hospital(s)	Yes	No	No
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
9.	Law Enforcement	Yes	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)	Yes	No	No
14.	Mental Health Service Organizations	Yes	Yes	No
15.	Mental Illness Advocates	Yes	Yes	No

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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	No
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	No
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	No
24.	Substance Abuse Service Organizations	Yes	Yes	No
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	No
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	No
29.	State Domestic Violence Coalition	No	No	No
30.	State Sexual Assault Coalition	No	No	No
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.	Organizations led by & serving Veterans	Yes	Yes	Yes
35.	Organizations led by & serving age 65 + persons	Yes	Yes	No

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;
	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).

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 The CoC conducts and communicates an annual, transparent process with an open invitation posted on its website https://dupagehomeless.org/. Under "Helping the Homeless" in the section "Continuum Overview" there are tabs "To Join the Continuum," "Membership Process," and "Membership." CoC membership consists of both Individual and Organizational memberships. Members may choose to be a part of the CoC General membership or be active on one or more of the CoC's eight standing committees or subcommittees. Application for membership is inclusive and open year-round. New members are encouraged to complete a CoC interest form and return it by mail, email, or fax. A phone number is provided in the "Contact Us" section of the CoC website if prospective members have further questions. An annual CoC meeting calendar is publicly posted on the website and also distributed to all members. Invitations to attend the bi-annual Full Continuum meetings are sent CoC-wide through accessible electronic communication and a notice is published under the CoC Membership Process that anyone may attend. The CoC ensures effective communication with individuals with disabilities to join the CoC by including the availability and use of fillable PDF interest forms, virtual/remote committee meeting access with closed caption as needed, and in person meetings of Full Continuum members in facilities which are fully ADA compliant. If there is difficulty accessing, completing, or submitting the CoC application, additional language on the website encourages prospective members to contact a member of the CoC for assistance.

3) The CoC invites organizations leading and serving culturally specific communities to address equity, which include Black, Latino (360 Youth Services, People's Resource Center, WeGo Together for Kids West Chicago), Asian (Hamdard, Islamic Circle of North America), LGBTQ+ (360 Youth Services, Youth Outlook), and persons with disabilities (Ray Graham, Seguin).

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.	

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1) The CoC solicited and considered opinion and feedback from persons with experience of homelessness through a series of focus groups held at different times throughout the year. Responses were used to identify gaps within our current homeless response system and how to address these needs. The CoC also solicits and considers opinions from a broad array of organizations and individuals with knowledge of homelessness through the hosting of regularly scheduled public meetings of eight CoC directed committees focused on the intent to prevent and end homelessness within the community. Included in this broad cohort of community stakeholders are representatives from Street Outreach/Emergency Shelter, Homelessness Prevention, Veterans, Behavioral Health, Victim Service Providers, Senior Services, and organizations dedicated to Human Trafficking, Homeless Youth and LGBTQ+ members. Both CoC Leadership and Public Awareness and Community Engagement (PACE) Committees included individuals with former lived experience of homelessness who demonstrate active participation and voting at each meeting. Opinion and input are also considered from additional CoC members and organizations, including law enforcement, healthcare, school districts, and the DuPage Housing Authority.

3) All meeting notifications are regularly communicated to the public via the CoC website and through email communication to the Full Continuum membership. The CoC ensures effective communication and access for persons with disabilities, including the availability of accessible electronic formats through virtual meeting access with closed caption as needed, with in person solicitation for public input available at the CoC Full Continuum meetings and through accessible electronic communication.

4) The CoC took into consideration information gathered during public meetings to address new approaches to preventing and ending homelessness (i.e., the formation of a CoC Lived Experience Council for persons experiencing homelessness and exploring creation of housing not currently available within the CoC for chronically homeless individuals with acute mental health needs).

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.	

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1) The CoC notified the public with an open proposal announcement to the community through a posting on the CoC's website and through a CoC-wide electronic communication that the CoC is considering applications from organizations that had not previously received CoC program funding. Also made public was an informational document with instructions and a link to the internet-based, online application.

2) The CoC notified the public through a posting on the CoC's website and through a CoC-wide electronic communication that all applicants must submit a project eligibility pre-application for review and approval before the internetbased business plan project application and cost forms could be completed for consideration. Deadline dates, renewal and new project information with eligible program components and eligible funded activities meeting HUD eligibility criteria were provided along with contact information for local technical assistance.

3) The CoC used a scoring process based on objective criteria and system performance measures to determine whether a project will be included in the FY2023 CoC Program Competition process. This scoring process included alignment with HUD priorities, local priorities, community gaps and needs, and for renewal projects, HUD compliance thresholds. All projects are initially evaluated by the CoC Gaps & Needs Committee, and later by the Rank & Review Committee, who then makes recommendations to the Leadership Committee. This allows for fair and equitable consideration of each project. A member with former lived experience of homelessness takes part in this process as a member of the Leadership Committee.

4) The CoC ensures effective communication with individuals with disabilities who have not previously applied wherever possible, including the use of an online posting of the application process, providing an online application, creating accessible electronic formats through virtual meeting access with closed caption as needed, and through accessible electronic communication.

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1C. Coordination and Engagement

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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:
	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;

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)	Nonexistent
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Nonexistent
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)	

1C-2. CoC Consultation with ESG Program Recipients.

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

(limit 2,500 characters)

1) The CoC consulted with both ESG Program recipients – DuPage County and State of Illinois – in the planning and allocating of ESG funds and ESG-CV funds, particularly as the federal COVID-19 Public Health Emergency (PHE) Declaration came to an end and ESG-CV funding expenditures faced spend down deadlines. This consultation allowed for strategic allocation of resources to best provide for the shelter and housing needs of individuals and families during the public health emergency phase of the pandemic.

2) The CoC participated with the state and county on the evaluation and performance of their subrecipients to determine whether subrecipients met program requirements and to improve program subrecipient performance by providing guidance and making recommendations. This information is used by the CoC in future planning and allocation of ESG funds. The CoC consults with both ESG program recipients to offer funding recommendations which are based on demonstrated subrecipient performance, an assessment of the community's homeless assistance and housing needs as addressed in the County's Consolidated Planning process, and the development of the annual Action Plan. Evaluation of ESG performance of County subrecipients is done through a variety of measures consisting of desk top review, which includes evaluation of requests for payment; and on-site visits with program and file review. The CoC has developed written performance standards which are updated annually, reviewed and approved by the Service and Program Coordination Committee, and measured through quarterly performance reporting set forth in subrecipient agreements for both DuPage County and the state and evaluated through the ESG monitoring process.

3) The CoC provided Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan, most notably in the Strategy for Developing a System to Address Homelessness section of the ConPlan.

4) Each year CoC staff provide information into the ConPlan, ensuring local homeless information is communicated and addressed in annual ConPlan and Action Plan updates. Information on homeless populations, subpopulations, housing, health and the social services needs of households experiencing homelessness and those at risk, and CoC System Performance Measures are updated annually.

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18.

1C-3.

Ensuring Families are not Separated.

NOFO Section V.B.1.c.

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
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.	No
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	No

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

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

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

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

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

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The CoC has established a formal partnership with the county-level Local Education Agency (LEA), the DuPage County Regional Office of Education (ROE). This partnership addresses the entire Continuum of Care and all definitions of homelessness. It is the goal of this collaborative partnership to provide services for eligible children that will assist in removing barriers to identification, enrollment, and ultimately the success of students. As part of this collaboration, the ROE Homeless Student Advocate is an active member of the CoC Leadership Board and represents the homeless student liaisons within the DuPage County school districts as identified in the CoC Governance Charter. An MOU is executed annually between the CoC and the ROE. The ROE agrees to be an active member of the CoC with appropriate committee participation, to refer families experiencing homelessness to the CoC Coordinated Entry System for housing information and services to assist them in finding fixed, regular and adequate housing, and to provide training to assist CoC agencies to understand the educational rights of eligible students. The CoC agrees to collaborate with the ROE and school district homeless liaisons to assist in the identification of families that lack a fixed, regular and adequate housing, inform their clients of the educational rights of their children and refer them to the Homeless Student Advocate if they need assistance removing barriers at their schools, and encourage CoC agencies to participate in ROE trainings to inform the LEAs of available community resources and inform LEA staff of the challenges homeless students experience. It is mutually agreed that each party will distribute the others' information about programs and services that apply to their respective clients. The CoC collaborates with local school district homeless student liaisons by conducting a quarterly Community Partners for Homeless Students Roundtable. This event invites school districts and homeless housing partners together to discuss housing and homeless resources to assist students and families in need. The CoC Planner also participates in the DuPage Early Childhood Collaboration (DECC), a county wide collaboration which helps eliminate disparities and barriers that can hinder access to early childhood education and care.

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.

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The DuPage CoC adopted a policy on October 13, 2010 requiring all CoC and ESG providers serving homeless families with children to submit a written, board approved policy that follows all provisions of the McKinney-Vento education laws. This policy is part of the annual project Ranking Criteria scoring. Included in this policy: Assist in the identification of homeless families for local liaisons: distribute information and inform homeless families and youth of their eligibility for early childhood and education services; consider the educational needs of children when families are placed in emergency or transitional shelter, place families with children as close as possible to their school of origin; conduct training for staff regarding the student rights of students; coordinate closely with local school homeless advocates and early childhood providers; and identify a staff person whose responsibility it is to ensure that homeless children are enrolled in school or preschool and connected to appropriate services within the community. The policy also requires that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, or gender when entering shelter or housing. All front-line case management staff are trained and aware of homeless student rights regarding education. This training takes place annually and training materials are made available to participants. At intake, providers give full information about education rights, including the right for education at all levels to continue to attend the prior school they had been attending, with transportation provided by the school district or to enroll in the local school. The provider ensures that preschool and school-aged children are referred to the local liaison immediately so that as little time as possible lapses in their school attendance. The children's educational needs are included as part of each case record.

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

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

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

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

NOFO Section V.B.1.e.

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

	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	No
3.	other organizations that help this population	No

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

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

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 The CoC regularly collaborates with both its local victim services provider, Metropolitan Services/Family Shelter Service DuPage (MFS/FSS DuPage) and its largest ESG and CoC Domestic Violence (DV) funded Rapid Rehousing provider, DuPagePads, to update CoC-wide policies regarding housing protections for survivors of domestic abuse, dating violence, sexual assault, and stalking. MFS/FSS DuPage is a coalition member of the Illinois Coalition Against Domestic Violence (ICADV). The IACDV is the Statewide Domestic Violence Coalition, providing advocacy, training, technical assistance, best practices, and federal pass through funding from the Office for Victims of Crime (Victim of Crime Act/VOCA) through the Illinois Criminal Justice Information Authority (ICJIA). Following the Violence Against Women Act (VAWA) Final Rule, CoC-wide policies were updated to identify the protections and rights outlined in the rule including the protections from refusal of assistance. termination of assistance, or eviction based on being a survivor. VAWA protections are not only available to women but are available equally to all individuals regardless of sex, gender identity, or sexual orientation. A survivor has the right to an emergency transfer when there is a safe and available unit and the option to bifurcate a lease to help keep the survivor safely housed. An Emergency Transfer Plan was developed in collaboration with the CoC victim services provider partner, approved and adopted by CoC Leadership, and a VAWA addendum for rental units was incorporated into lease agreements. The CoC ensures that all housing and services provided in the CoC adhere to trauma-informed best practices by acknowledging the need to understand a survivor's life experiences in order to provide effective care. This is done by educating all members of the CoC through training by the victim service provider of the guiding principles of trauma-informed care: safety, choice, collaboration, trustworthiness, empowerment and cultural, historical and gender issues. These elements are reviewed during training and education, case conferencing discussions, during partner conversations between staff providing housing services and our victim services provider offering services and supports, and through client choice as we expand to meet the housing needs of survivors through a domestic violence rapid rehousing response.

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:	l
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).	

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1) The CoC coordinates with our local victim service provider, Metropolitan Services/Family Shelter Service DuPage (MFS/FSS DuPage), to provide annual training to CoC project staff that addresses trauma informed, victim centered best practices on safety and planning protocols in serving survivors of domestic violence, dating violence, sexual assault, or stalking. This annual training includes confidentiality, the effects of DV on children, safety planning, and survivor behavior. Virtual trainings are recorded and hosted on the CoC website under CoC training resources. MFS/FSS DuPage also provides DV education and trainings throughout the DuPage County community both virtually and inperson at the organizational level on a monthly basis. MFS/FSS DuPage offers Illinois Coalition against Domestic Violence (ICADV) approved 40-hour domestic violence trainings and certifications, which are open to professionals and community members. From July 1, 2022 through June 30, 2023, MFS/FSS provided 32 in-person and virtual educational presentations and trainings to 1,761 CoC and community members which included healthcare systems, legal services, social workers, universities, faith-based organizations, homeless prevention providers, early childhood educators, townships, head start agencies, substance use disorder treatment providers, and youth serving organizations working with young fathers. Training involved trauma-informed. victim centered best practices with topics including DV101, DV Advocacy, Safety Planning, DV & Social Justice, DV & Financial Abuse, DV and Sexual Assault, DV and Cultural Competency, Teen Dating Violence, LGBTQ+ Issues. The DuPage CoC currently does not have a dedicated Coordinated Entry project with its own staff. However, those trained staff within the DuPage CoC Coordinated Entry Access Points who are providing assessment, referral, and prioritization also attend annual DV training or trainings throughout the year that address trauma informed, victim centered best practices on safety and planning protocols in serving survivors of domestic violence, dating violence, sexual assault, or stalking.

	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.

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 The CoC Coordinated Entry (CE) process has protocols in place to prioritize the safety of individuals seeking assistance. Metropolitan Family Services/Family Shelter Services DuPage (MFS/FSS DuPage) is an access point in the Coordinated Entry System for persons fleeing or attempting to flee domestic violence. Access to Coordinated Entry is available to survivors via consumer choice through a referral process where the client may choose to remain anonymous within HMIS. These protocols ensure that people experiencing domestic violence have confidential access to the coordinated entry process which incorporates victim-centered services and addresses their trauma-informed care needs. CE staff are trained on the dynamics and the impact of interpersonal violence, as well as the need for safety and privacy. The CoC CE has planning protocols in place to address the unique housing and service needs of survivors of domestic violence through its partnership with housing providers Catholic Charities, DuPagePads, and 360 youth Services. Those needs may include services that take into account physical health. mental health, and safety concerns resulting from abuse by an intimate partner, a safe connection to permanent housing, assistance regaining economic independence and maintaining housing while fleeing, and increased confidentiality and information sharing protections. As the primary access point, the victim service provider makes the housing referral, typically to Catholic Charities, for a confidential housing assessment. The housing assessment and planning process is aligned with a trauma-informed care approach and seeks to actively resist re-traumatization.

2) The confidentiality and privacy of domestic violence clients is ensured with written confidentiality protocols within Coordinated Entry and ESG policies through an alternate database. An agency cannot require a survivor to provide a release of information in order to receive services. Coordinated housing and homeless services require written releases of information authorizations and informed consent by the client. Care is taken that the assessment tool and process does not retraumatize the individual or family and informs the person up-front about how the information will be used and allows the option to refuse to answer questions or choose not to disclose personal information.

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:
the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and
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.

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1) The CoC analyzes statistics and data on the scope and prevalence of domestic violence and homeless individuals and families when coordinating our planning processes and collects this de-identified aggregate data from HMIS, Coordinated Entry, Impact DuPage (Illinois Criminal Justice Authority) and other non-personally identifiable aggregate data provided by our local victim services partner Metropolitan Family Services/Family Shelter Services DuPage (MFS/FSS DuPage) from their alternate data base.

2) Our CoC uses the de-identified aggregate data to assist its victim service provider partner, MFS/FSS DuPage, and all general homeless service providers to assess the unmet needs and gaps of survivors of domestic violence in our CoC's geographic area. Additional data is used to provide the person or household with appropriate services to prevent further abuse if fleeing, and to address physical and psychological injuries from any prior abuse. Also, data collected from a person experiencing domestic violence may be important for the safety of project staff and other clients. At the aggregate level, knowing the size of the population of persons experiencing homelessness who have also experienced domestic violence is critical for determining the resources needed to address the problem.

Data the CoC uses to assess special needs related to domestic violence, dating violence, sexual assault, and stalking include: DV Survivors by Project Type, DV Survivors by Homeless Project Where Permanent Housing Has Not Been Obtained, and DV Survivors by Last Occurrence. Data from the Point in Time count includes the domestic violence subpopulation count for both sheltered and unsheltered persons. Additionally, DuPage County is part of a shared HMIS implementation with the Alliance to End Homelessness in Suburban Cook County, Illinois. The Alliance to End Homelessness worked with the HMIS vendor WellSky to develop a Domestic Violence Comparable Database to collect client-level data over time and to generate aggregate reports based on the data. The Alliance CoC and their victim service providers worked together with HUD TA and their HMIS lead to determine that this Comparable Database meets all HUD system requirements. While there are no DuPage County CoC funded victim services providers within the CoC's geography required to use this comparable database, this comparable database is available to our CoC.

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.

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 The CoC communicates the emergency transfer plan policies to all individuals and families through its written standards which are publicly available through its website, and emergency transfer plan policies and procedures are communicated to all households seeking or receiving CoC program rental assistance as a part of the Continuum of Care program with federal funding received from the U.S. Department of Housing and Urban Development. The CoC agencies ensure that the notice of occupancy rights under the Violence Against Women Act (VAWA) is provided to each individual or family applying for housing and each housed CoC program participant at the following times: a) When an individual or family is denied permanent housing or transitional housing b) When a CoC program participant is admitted to permanent housing or transitional housing c) When a CoC program participant receives notification of eviction; d) When a CoC program participant is notified of termination of assistance, e) With any of termination of rental assistance; and f) Immediately, for any existing tenant either during annual recertification or lease renewal, whichever is applicable, or, if there will be no recertification or lease renewal for a tenant.

2) The process for an individual or family to request an emergency transfer is to notify their case manager. If the household qualifies for an emergency transfer and wishes to make a request for an external emergency transfer, they shall have priority over all other applicants for rental assistance, transitional housing, and permanent supportive housing projects funded with CoC resources provided that the individual or family meets all eligibility criteria required by Federal law or regulation or HUD NOFA. The individual or family shall not be required to meet any other eligibility criteria or preferences for the project. The individual or family shall retain their original homeless or chronically homeless status for the purposes of the transfer.

3) Following the request for the emergency transfer, transfers due to fleeing/experiencing violence are prioritized above all other transfers and will have the fastest resolution possible. Housing providers have the autonomy to make internal transfers between projects at the same agency within the same program model type, as well as between TH, RRH and PSH models at the same agency. External emergency transfers are given a "Priority 1" Transfer Priority Level and a 48 hour or less approval time.

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.	

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 The CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area through partnership and collaboration with housing partners Catholic Charities, DuPagePads, and 360 Youth Services for shelter, transitional housing, rapid rehousing, permanent supportive housing, and our victim service provider, Metropolitan Family Services/Family Shelter Services DuPage (MFS/FSS DuPage) for advocacy and supportive services. Within our Coordinated Entry System (CES), MFS/FSS DuPage is considered a primary access point for this population, but access is not limited to MFS/FSS DuPage. Regardless of where an individual or family presents for assistance, they are able to access housing and services tailored to their unique circumstances and needs. Just as our system can refer households from one housing provider to another housing provider so as to provide access to all housing and services available within the CoC geography, the same can be accomplished with our victim service provider to a housing provider across the system to ensure equitable access and housing resources for domestic violence survivors in need of housing assistance. During this process, the CoC has representation from the domestic violence survivor community on its CoC Leadership, Coordinated Entry System Oversight, CoC Gaps & Needs committees, monthly case conferencing committee, and other workgroups and subcommittees who can help provide trauma-informed, housing solution strategies.

2) The CoC proactively identified a systemic barrier within our homeless response system - MFS/FSS DuPage client Releases of Information (ROIs) which expire within two weeks following client signature. These very brief ROIs created obstacles to safely house and provide services to survivors of domestic violence as oftentimes client releases would expire in the middle of housing search and placement efforts, and the ability to communicate with them in a timely manner would be lost. The CoC worked with our victim service provider partner to mitigate this issue and identified a solution that created a path to communication that allowed for an ROI extension of an additional two weeks for clients who were seeking housing and related services. This provided additional time for our housing provider partners to maintain communication and successfully work with survivors of DV to become stably housed.

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.]
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 The DuPage CoC engages survivors with a wide range of lived expertise, including homelessness and domestic violence, in the development of both program and CoC-wide policy. a) At the program level, survivor's roles include staff, subject matter experts, advocates, volunteers, and peer support. Their expertise involves sharing their narrative to provide public awareness and internally offering perspective on how to provide critical housing services for survivors in our community, which informs CoC-wide policy and strategy for housing assistance. b) The CoC safely engaged and recruited survivors to do this work by requesting only that personal experiences be shared at their own level of comfort, respecting all confidentiality protocols along with the proper releases, and providing a safe space to provide feedback. Survivors are provided accessible, culturally responsive, trauma-Informed training and are compensated for their time, depending on their role and responsibilities. To formalize the engagement with persons served, agencies are adopting an "Input from Persons Served" policy. This policy is being created with input from survivors and will formalize the process for obtaining their involvement in the development, implementation and evaluation of housing policies and procedures. c) Survivor feedback is obtained from participation with staff to address program procedures and policy. Client satisfaction surveys are sent every six months to encourage participation and identify issues and offer problem solving opportunities. Direct input is obtained from conversations between survivors and their case managers, documented in case notes, and with appropriate permissions and releases shared to offer corrective actions. An example of this are discussions currently underway between clients and staff on rent portion assistance policy and payment timeframes. The CoC accounts for the unique and complex needs of survivors with cultural humility, by offering inclusive language and name and gender preferences starting at intake and continuing throughout the care process.

Agencies have moved from intimate partner language to include survivors of caregiver and family abuse and have adapted the traditional Power and Control Wheel to be gender neutral. Survivors are informed of what data is being collected and who will have access to that information, ensuring survivors to decide when, what information, and to whom their information is shared.

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

	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)?	No

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

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

(limit 2,500 characters)

1) The CoC regularly collaborates with members of the LGBTQ+ community and agencies serving the LGBTQ+ population when updating its antidiscrimination policies to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families. This takes place through as needed discussions within its Leadership Committee which meets six times each year.

2) All CoC and ESG funded agencies have anti-discrimination policies in place, including the Fair Housing Act and those under HUD's Equal Access to Housing Rule and Gender Identity Final Rule, that are consistent with the CoC-wide antidiscrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination. Agencies have refined policies and procedures to ensure equal access to HUD housing program is available to all eligible households regardless of their actual or perceived sexual orientation and gender identity. The HUD Equal Access to Housing Rule and Gender Identity Final Rule is contained in the updated ESG program plan and written standards. Each provider offers housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability; as well as provide program applicants and participants with information of their rights under federal, state, and local fair housing and civil rights laws.

3) The process for evaluating compliance with the CoC's anti-discrimination policies includes an annual evaluation of each agency's anti-discrimination policies. Each agency is required to provide, in writing, their policy which addresses affirmatively furthering fair housing, anti-discrimination, and equal access in accordance with an individual's gender identity.

4) The CoC process for addressing noncompliance with CoC anti-discrimination policies begins with the annual evaluation of the agency's anti-discrimination policies and practices. Any agency anti-discrimination policy which does not align with the CoC anti-discrimination policy is required to verbally present before a CoC committee as to why the policy is noncompliant and be given the opportunity for compliance. If the agency chooses not to affirm a commitment to serving all eligible clients by adhering to the CoC anti-discrimination policies and procedures, the CoC will bring the non-compliance to CoC Leadership for future funding determination.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area-New Admissions-General/Limited Preference-Moving On Strategy.		neral/Limited
	NOFO Section V.B.1.g.		
	You must upload the PHA Homeless Preferer 4B. Attachments Screen.	ce\PHA Moving On Preference attach	ment(s) to the
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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?
DuPage Housing Authority	1%	Yes-HCV	No

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

 Describe in the field below:
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
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 DuPage CoC has a long term working relationship with the DuPage Housing Authority (its only PHA within its jurisdiction) which has resulted in a homeless preference that has been in effect for several years. Together the DuPage Housing Authority and the DuPage CoC meet regularly to discuss and evaluate the effectiveness of referrals received, vouchers issued, units leased, homeless persons housed, transitions made, services provided, and overall utilization of vouchers using the homeless preference. The DuPage Housing Authority uses a two tiered single waiting list system. The system gives applicants that qualify for a preference the chance to receive a Housing Choice Voucher ahead of applicants that do not have a qualifying preference. Preferences give the DuPage Housing Authority a way to address local housing issues, including that of homelessness. Qualifying for an immediate preference when vouchers are available are participants in any HUD funded DuPage CoC housing program that, as a component of their service, has an MOU with the DuPage Housing Authority. Qualifying under General preferences (1 point each) are: Category 1 - DuPage County Resident/Employed in DuPage Service Area; Category 2 – Family; Category 3 – Veteran; Category 4 – Domestic Violence under VAWA; Category 5 – HUD Family Self Sufficiency (FSS) program; Category 6 - Involuntary Displacement and Category 7 - Homeless household admission (i.e., transitioning from an ES,TH, PSH, etc. N/A – there is a homeless admission preference

1C-7b.	Moving On Strategy with Affordable Housing	Providers.	
	Not Scored–For Information Only		
	Select yes or no in the chart below to indicate jurisdiction that your recipients use to move p	affordable housing providers in your (program participants to other subsidize	CoC's d 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.		

1C-7c. Inc	nclude Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
NC	IOFO 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)	No
3.	Housing Choice Voucher (HCV)	No
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessne	ss.
	NOFO Section V.B.1.g.	
	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	IL-101 CARES Act Mainstream Voucher Program

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

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Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Ch Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	
		-
	your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the Program?	Yes
lf you PHA	select yes to question 1C-7e.1., you must use the list feature below to enter the name of every your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		•
DuPage Housing Au		

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

Name of PHA: DuPage Housing Authority IL-101

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1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	17
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.	17
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.

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

(limit 2,500 characters)

1) The CoC evaluates each project applicant that checks "Housing First" on their Project Application through the annual scoring and review of its CoC Business Plan project application to ensure a commitment to Housing First that does not exclude individuals with little or no income, criminal record, active or history of substance abuse, domestic violence, or any other qualification not covered in a typical lease agreement. Each applicant must describe in a comprehensive narrative response how their program uses a Housing First model. Each applicant must describe how these practices will be strengthened in the coming year and how barriers to Housing First are addressed. 2) The list of factors and performance indicators used by the CoC during the evaluation include participants must enter without preconditions or service participation requirements in order to receive agency assistance. They may not be terminated for failure to participate in support services or make progress on a service plan, loss of income, domestic violence, or any other activity not found in a typical lease agreement. Services are directed toward improving selfsufficiency, quality of life, and obtaining and maintaining permanent housing. Consideration is given to projects that address severe barriers to housing including high utilization of crisis or emergency services to meet basic needs, including but not limited to emergency rooms, jails, and psychiatric facilities, history of victimization/abuse including domestic abuse, sexual assault, trafficking and childhood abuse, length of time homeless, only project of its kind in their CoC's geographic area serving a special homeless population or a population that has significant challenges or functional impairments, including physical, mental, developmental or behavioral health disabilities; and vulnerability to illness and death. All project applications accepted by the CoC must adhere to Housing First principles.

3) Projects are regularly evaluated outside of our local CoC competition through the Coordinated Entry referral process to ensure the projects are using a committed Housing First approach. The monthly Coordinated Entry System Oversight Committee routinely monitors outcomes of referrals made through the CES each month. Referrals which are repeatedly returned back to the prioritization list by any one agency are reviewed to confirm that all Housing First principals were followed at the time the referral was returned.

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.	

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(limit 2,500 characters)

1) The CoC's street outreach efforts are coordinated among a variety of stakeholders but is centered in collaboration with the DuPagePads Street Outreach team. Methods used to ensure all persons experiencing unsheltered homelessness are identified and engaged is to quickly identify and engage individuals through ongoing, consistent relationship building to help persons access supports needed to move from unsheltered homelessness into shelter and housing quickly. Basic needs are addressed and provided for through hygiene kits, gift cards, blankets, and Narcan if needed. Persons are connected to Coordinated Entry and are assessed, referred, and prioritized for assistance. Street Outreach staff target areas known to be frequented by unhoused persons including local parks, train stations, emergency departments, libraries, and other places not meant for human habitation. Unsheltered persons are also identified through a well-publicized 24-hour Street Outreach Hotline which can be accessed by member of the community to notify the Street Outreach Team of persons who might need assistance or for persons needing assistance themselves.

2) Our CoC's street outreach efforts cover 100% of our CoC's geographic area. 83% of our CoC's geographic area is accessible to our street outreach workers, while 17% is inaccessible to them because 8% is located in protected wetlands, prairie, and woodlands and 9% percent is located in industrial parcels or office spaces.

3) Two full-time Street Outreach staff rotate shifts for coverage and provide outreach to unsheltered persons seven days each week at different times of day and nighttime hours.

4) There is special outreach tailored for those with high barriers and who are least likely to request assistance by applying consistent and repeated attempts at engagement, establishing trust, and attempting to overcome negative relationships or perceptions that may exist between the public and the unsheltered homeless population. Additional information is publicized on the DuPage Homeless website, at libraries with TTY relay service access, police departments, health departments, and throughout the faith-based community. This includes information on how to access services, how to qualify, and the availability of multiple language translation services, including sign language. Those with cognitive or physical disabilities are assisted using accessibility services coordinated by the Street Outreach team

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

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4.	Implemented community wide plans	Yes	No
5.	5. Other:(limit 500 characters)		

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	101	130

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)	
	CoC Partners provided the above annual training and the CoC made these recorded trainings available on its website	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.

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(limit 2,500 characters)

1) The CoC systemically provides up-to-date information on mainstream resources available for program participants with regular training and the provision of educational materials through collaboration with its community partners. The DuPage Federation on Human Services Reform hosts trainings on SNAP, Medicare, Medicaid, TANF and SSI. Participants learn benefits eligibility, how to navigate the application process, troubleshoot challenges, and program changes that can affect homeless clients. Through HOPE DuPage, the Recovery Oriented System of Care (ROSC) partnership offers NARCAN training, substance use disorder (SUD) awareness education, and a networking exchange for program participants; the monthly Community Connections provides CoC education and resources available for program participants which include food pantry, healthcare resources, transportation, and access to childcare.

2) As a representative of the DuPage County Behavioral Health Collaborative (BHC), the CoC works with project staff to coordinate resources and information. The BHC is a cross-sector partnership of DuPage County leaders working collaboratively to identify and implement data-driven strategies that improve access and quality of mental health and substance use disorder treatment and to assist program participants with receiving healthcare services. The CoC partners with the DuPage Health Coalition to ensure homeless individuals not eligible for Medicaid or the ACA have access to health care enrollment through locally funded safety net health programs such as Access DuPage, Silver Access, and Dispensary of Hope (prescription assistance). The CoC works with agencies to ensure that designated staff at each CoC funded agency complete SOAR training every 24 months, allowing case managers to assist program participants with serious mental illness, medical impairment, and/or a co-occurring substance use disorder in applying for Social Security Administration's (SSA) disability programs. The CoC encourages project staff to utilize the SOAR Online course tools and complete the Practice Case SSI/SSDI Application Packet. The course trains case workers to assist adults (age 18+) who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder to apply for the Social Security Administration's (SSA) disability programs, Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI).

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.

On March 21, 2020 out of concern for the health and safety of clients, staff, volunteers, and the faith congregations and agency sites in which clients were being served, both DuPage County emergency shelters temporarily closed their overnight shelters amid ongoing public health concerns. This closure of congregate shelter affected emergency sites in thirteen communities providing shelter to over 200 individuals and families. The largest of these shelters raised funds to purchase a local hotel to convert it into a non-congregate emergency shelter and resource center for those in need, providing non-congregate shelter as an alternative to congregate shelter options, which had no indication of returning to the community. DuPage County provided \$5 million in federal COVID relief funds (\$3M in CDBG-CV and \$2M in DuPage County ARPA funds) for DuPagePads to buy and remodel the hotel. DuPage County received a National Achievement award from the National Association of Counties (NACo) for their partnership with DuPagePads in this effort. DuPagePads received public and private funding assistance to help meet emergency response expenses and repurpose the hotel without reducing existing services and support available for clients. This includes state and federal ESG funds, Emergency Rental Assistance funds and ESG-CV and CDBG-CV funds. The new, non-congregate shelter model has increased shelter capacity with a total of 130 rooms available serving up to 300 individuals and families experiencing homelessness and victims of domestic violence. Individuals and families receiving emergency shelter are connected to a case manager from the Client Service Center. Case management assists with developing a rehousing plan to help clients leave the emergency shelter to permanent housing; support is also provided to help clients access employment, financial resources, and healthcare services. Clients also have access to meals and other basic necessities including showers, toiletries, and mail service. This new approach to shelter has not only responded to public health priorities and other infectious disease but has also resulted in positive health and social outcomes when compared to prior night-by-night congregate shelter settings. Initial data indicates an 80% decrease in reported mental health conditions and a 75% decrease in healthrelated illnesses. CoC System Performance Measures for increased exits to permanent housing have also increased.

	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.	

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1)Through a coordinated partnership with local mainstream healthcare partners which include the DuPage County Health Department (DCHD) and the DuPage Health Coalition, the CoC equipped homeless housing and service providers to respond to infectious disease outbreaks among program participants by sharing information during weekly sharing sessions, homeless provider updates. exchange of updated information and education, information, formal directives for homeless service providers on increased safety measures, and dissemination of updated health advisories. This information included procedures and recommended policies on the proper use of masks and proper hand hygiene, the need for social distancing, and the importance of preventing infectious disease outbreaks among program participants and in places where persons remained unsheltered, and in the workplace. 2) The CoC facilitated communications between DuPage County Health Department (DCHD) staff and agencies providing emergency shelter, housing, and Street Outreach services to ensure that health and safety protocols designed to prevent infectious disease outbreaks among people experiencing homelessness were implemented. These included screening tools consisting of a series of simple questions to help identify persons who might need additional medical care or isolation, education on how crowded service locations may increase risk of disease transmission; basic infection control measures, and knowledge of basic communicable disease transmission among agency staff and clients and highly mobile populations. During the transition from congregate to non-congregate shelters, staff from the DuPage County Health Department Communicable Disease and Epidemiology (ČDE) Service Unit advised CoC shelter providers on reporting disease outbreaks, isolation procedures, and setting up routine communication within the congregate shelter system. The CDE Service Unit provided a Safety Officer responsible for working with non-congregate shelter staff to coordinate testing and onsite vaccination clinics. The Safety Officer continues to provide information, education, supplies, 1:1 support and consultation. There remains a CDE Service Unit incident command structure for additional communicable disease outbreaks and the Safety Officer is available to provide updates and vaccination information to CoC community partners and shelter staff.

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	
	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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Through a coordinated partnership with local mainstream healthcare partners which included the DuPage County Health Department (DCHD) and the DuPage Health Coalition, the CoC equipped homeless housing and service providers to prevent or limit infectious disease outbreaks among program participants by 1) sharing information during weekly sharing sessions, homeless provider updates, exchange of updated information and education, information, formal directives for homeless service providers on increased safety measures, and dissemination of updated health advisories. This information included proper use of masks and proper hand hygiene, the need for social distancing, and the importance of prevent or limit infectious disease outbreaks among program participants and in places where persons remained unsheltered, and in the workplace.

2) The CoC facilitated communications between DuPage County Health Department (DCHD) staff and agencies providing emergency shelter, housing, and Street Outreach services to ensure that health and safety protocols designed to limit infectious disease outbreaks among program participants were implemented. These included screening tools consisting of a series of simple questions to help identify persons who might need additional medical care or isolation, education on how crowded service locations may increase risk of disease transmission; basic infection control measures, and knowledge of basic communicable disease transmission among agency staff and clients and highly mobile populations.

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.	

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1) In compliance with CPD-17-01, the DuPage County CoC Coordinated Entry System offers a coordinated process of assessment, intake and response for persons experiencing a housing crisis within 100% of the DuPage County geographic area. Access points and services cover the entire geographic area of the CoC and are available to individuals and families, including people experiencing chronic homelessness, Veterans, families with children, youth, and survivors of domestic violence.

2) the CoC Coordinated Entry System uses a standardized assessment process of documenting a participant's housing needs, preferences, and vulnerability. The information sources the CoC uses to inform its assessment determination currently include the Housing Pre-Screen Tool, the VI-SPDAT, HMIS, and case conferencing. The assessment process gathers information about a person presenting within the Coordinated Entry System and uses that information to understand what factors contributed to the housing crisis and what types of interventions might help resolve the crisis. Structuring assessment processes in a standardized way ensures clients are not subject to inordinately long and intrusive interviews that get repeated by different providers at each stage of engagement and ensures determinations of service priority order and referral are consistently applied. The assessment tools are intended to be progressive. capturing different information in different stages. During the assessment process, trained staff gather only enough information to determine the severity of need and potential eligibility for housing and related services. Information disclosed is used for determining specific program eligibility, making appropriate referrals, providing a reasonable accommodation, notes associated with caseconferencing decisions, and to ensure households are prioritized in a timely manner for housing and assistance.

3) The Coordinated Entry System is updated regularly by the Coordinated Entry Oversight Committee which meets monthly and uses feedback received from participating projects and households that participate in coordinated entry. Updates which are recommended by participating projects and participants to the Committee are reviewed and approved by the CoC Leadership Committee and adopted into the CoC Coordinated Entry Written Standards and Policy.

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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 The DuPage County Coordinated Entry System (CES) requires all access points have the capacity to engage and serve persons who are least likely to access homeless assistance. Our CES and primary Coordinated Entry (CE) access points are actively marketed via printed materials and the CoC homeless website throughout the CoC geography to all persons, including those least likely to apply for homelessness assistance in the absence of special outreach. An example is the creation of a business card containing the CoC CE access point information which is distributed via Street Outreach teams, provider partners, and persons with experience of homelessness.
 Prioritization is based on a combination of specific assessment data and the severity of need rather than a specific diagnosis or disability type and is not

based on factors that would result in violation of any non-discrimination and equal opportunity requirements per 24 CFR § 5.105(a).

3) To expedite assistance in a timely manner, all persons seeking housing, rental assistance, utility assistance, or shelter, may start the CE process at any access point where a simple, standardized assessment and response is provided, based on the needs and strengths of the individual. The assessment tools are intended to be progressive, capturing different information in different stages. Staff gather only enough information to determine the severity of need and potential eligibility for housing and related services. Information disclosed is used for purposes of notes associated with case-conferencing decisions, determining specific program eligibility, making appropriate referrals, providing a reasonable accommodation, and to ensure households are prioritized in a timely manner for housing and assistance.

4) As part of the CES review and evaluation process, feedback received from projects and households that participated in coordinated entry resulted in steps being taken to re-design the assessment and prioritization process, reduce unnecessary complexities, remove barriers to access housing, and eliminate existing system "side doors". An example of reducing unnecessary complexities to CE involved the CES Committee determining the score adjustment process was burdensome for case management staff which resulted in fewer requests for needed client score redeterminations which may allow for housing intervention alignment. A revised process is currently being developed.

NOFO Section V.B.1.p.	
Describe in the field below how your CoC through its centralized or coordinated entry:	
affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
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.	
1.	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

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1) Through its Coordinated Entry System (CES), the CoC affirmatively markets housing and services to ensure it reaches all persons experiencing homelessness through both bi-lingual printed materials and through its homeless website. On both its printed material and the website is the statement "The Coordinated Entry process is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. All persons experiencing homelessness, Veterans, families with children, youth, and survivors of domestic violence, will have fair and equal access to the Coordinated Entry system."

2) Through its CES, the CoC informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws in a document which references our partnership with the fair housing and civil rights subject matter experts at HOPE Fair Housing and the Illinois Department of Human Rights Fair Housing Division. Each participant who is assessed within the DuPage CES receives this document and is provided with contact information for both organizations.

3) Through its CES, the CoC can report any conditions or actions that impede fair housing choice for current or prospective program participants to DuPage County Community Services, the jurisdiction responsible for certifying consistency with the Consolidated Plan.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	06/12/2023

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.	

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Following the release of the updated HUD CoC Racial Equity Analysis Tool 3.0 in March, 2022, 1) the CoC began its annual assessment which included analyzing whether any racial disparities were present in the provision or outcomes of CoC program funded homeless assistance. Also used for analysis is Stella P data to examine those differences between racial groups for how long households remained homeless in the system, what percentage exited to permanent destinations, and what percentage returned to the homeless system. Data in the current HUD CoC Racial Equity Analysis Tool indicates that Black individuals experienced homelessness (47%) at a slightly higher percentage than White individuals (46%), with the balance being comprised of Other/Multi-Racial individuals (5%) and those identifying as Asian (1%). In families with children, those households identifying as Black (59%) experienced homelessness at a higher percentage than households identifying as White (33%), with Other/Multi-Racial households at 8% showing a slight increase. This is believed to be due to a larger percentage of Black families with children being served in TH projects, not necessarily in ES. Data indicate White Youth (unaccompanied under the age of 25) experiencing homelessness is higher (59%) than Black youth (33%) and significantly higher in White Parenting Youth (under the age of 25) at 65% than Black Parenting Youth (under the age of 25) at 30%. Within the Stella P data during the 10/01/2021 - 09/30/2022 time frame, of persons served in ES, SH, TH the race and ethnicity of HoH and Adults was 49% White, 46% Black, 4% Multiple Races, and 1% Asian. Within those races, 18% identified as Hispanic/Latin (a)(o)(x), The race and ethnicity of persons served in RRH was 50% White, 46% Black, 2% Multiple Races, 1% Asian, and 1% American Indian. Within those races, 10% identified as Hispanic/Latin (a)(o)(x). Further examination by the CoC of the percent and number of households in each race and ethnicity group that exited to permanent, temporary, and unknown destinations indicate that 45% Black HHs exited to PH destinations (21% rent/own with subsidy;12% rent/own without subsidy: 11% family or friends, 1% misc. PH subsidy) while 48% White HHs exited to PH destinations (19% rent/own with subsidy 15% rent own without subsidy; 12% family or friends, 2% misc. PH subsidy).

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.	No
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.	No
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes

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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 continues to take short and long term steps towards addressing racial disparities and addressing any disparities identified in the provision or outcomes of homeless assistance. These include adding race/ethnicity data to CoC and CES data reports for monthly tracking and to analyze the data to determine if people from disproportionately represented racial or ethnic groups have different entry points into the homeless system and how persons move though different pathways to permanent housing. Data on who is accessing services, entering emergency shelter, transitional housing programs and exiting into permanent housing is being examined to determine if programs are having a disparate impact based on race and ethnicity. The CoC also analyzes other characteristics of disproportionately represented persons including poverty, access to health care, disabling conditions, history of homelessness, and immigration status to identify improvements in outcomes for homeless assistance. The CoC continuously examines the Coordinated Entry System processes, including receiving technical assistance to re-design areas around assessment and prioritization to assist in identifying any inequities. Providers of homeless housing and services within the CoC have created and adopted Diversity and Social Justice Policies and formed Equity Committees to create a culture that values self-assessment and continual improvement with a commitment to inclusion as its core vision. Equity in staff and board composition has broadened at many organizations, grievance process policies for reporting racial inequity complaints or criticisms have a direct path to leadership, recognition of cultural holiday celebrations has been expanded, agency-wide surveys have been created to assess staff experiences and ideas for improvement, and training is being conducted to assist clients and staff in expression of equity issues. Long term planning for the CoC includes CoC membership within the DuPage Health Equity and Access Response Team (HEART). HEART is a local, leadership driven workgroup that leverages diversity to create solutions addressing optimal community health, so no one is disadvantaged including those who are experiencing homelessness. The workgroup focuses on social determinants of health and disparities, and consists of healthcare leadership, providers of homeless shelter and housing, and immigrant serving organizations.

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

(limit 2,500 characters)

The CoC will 1) continue to track its progress on preventing or eliminating disparities in the provision or outcomes of homeless through education, training, ongoing data analysis and reporting, and inviting equity-centered organizations to contribute to a racially equitable community participation process within the CoC. The CoC will continue to make available through its CoC collaborations with local community partners educational and training opportunities on Fair Housing, impacts of Source of Income Discrimination in Housing, Housing First, Homelessness and Racial Disparities, and Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity. 2) Through its Data and Performance Committee, the CoC will continue to track and analyze racial disparities using tools available within HMIS and LSA data to determine if people from disproportionately represented racial or ethnic groups have different entry points into the homeless system and how persons move though different pathways to access permanent housing. This data will also be made available in a community dashboard and through CoC-wide reporting at all levels. CoC leadership will continue to engage with CoC agency leaders of organizations and persons of color across its geography that represent experience of homelessness who share its goal to prevent and eliminate disparities in the provision or outcomes of homeless assistance. The CoC will also use Stella P as a tool to look at differences between race and ethnicity groups and how long households experience homelessness in the system, what percentage exit to permanent destinations, and what percentage return to the homeless system.

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

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

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The CoC offers targeted outreach to persons with lived experience by working with CoC partner agencies to identify and recruit clients who have been served by housing programs and are interested in engaging with the CoC. This engagement has resulted in the CoC developing an Advisory Council of persons with experience of homelessness, using existing agency lived experience councils and resident's councils as its model. Marketing materials and a compensation plan have been developed and new members will be joined by existing CoC members with lived experience who currently serve on the CoC Leadership Committee.

One individual currently on the CoC Leadership Committee co-founded an emergency shelter and transitional housing program for local area Veterans and assists with the annual CoC Point in Time Count efforts. Additional opportunities have been created for several different roles for persons with lived experience, including CoC committee participation where leadership and decision making, public testimony, and focus groups have also been a part of an individual's contribution. Members with lived experience serve as advisors, often through groups or committees, as well as having positions on our CoC Leadership Committee, the Governing board of the Continuum. Individuals with lived experience have helped create communications tailored to the DuPage County Community through our annual CoC Snapshot, a publication on homelessness within DuPage County, and what it will take to make homelessness rare, brief and one-time within our community. CoC member partners actively engage persons with lived experience in leadership roles and decisions making processes through Resident Advisory Councils and Program Committees which in which a person with lived experience sits on the committee and reviews policy, procedures and relevant issues at hand. providing feedback via Youth Advisory Council and Resident Council committees to the Agency Board of Directors.

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.	42	22
2.	Participate on CoC committees, subcommittees, or workgroups.	24	4
3.	Included in the development or revision of your CoC's local competition rating factors.	0	1
4.	Included in the development or revision of your CoC's coordinated entry process.	0	1

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 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)

CoC member organizations provide professional development and employment opportunities to individuals with lived experience of homelessness through internships, volunteer opportunities, and AmeriCorps Vista positions. CoC member organizations have employment staff who work with all clients towards gaining and maintaining either agency or external employment. Any client with prior lived experience can meet with an agency employment counselor for additional internal job opportunities. CoC member organizations also provide a continuum of services and workshops to create sustainable futures for individuals who are experiencing homelessness and seeking to become academically engaged and/or job-qualified through computer GED preparation programs, literacy classes, resume assistance and improved interview skills. Employment specialists assess strengths, interests, skills and experience to assist participants in obtaining a career instead of a short-term solution. Member organizations partner with more than 150 local employers to match clients with positions in their respective fields of interest and incorporate soft skills supports, financial literacy and budgetary training to promote and sustain progress. Clients are provided with access to computers, job and social coaching from volunteer field professionals, career aptitude testing and matching tools, resume assistance, interview preparation and assistance accessing appropriate attire to dress for success. Programs also engage participants in self-empowerment workshops designed to increase participants' positive outlooks for the future and maintain motivation to advance toward their employment goals and housing plans. Several CoC member agencies provide workshops geared towards professional development. These workshops, often lasting between 8 – 10 weeks, offer a step-by-step process within a group context which creates and fosters an environment in which change can and does occur. These programs also include an employment component and explores both potential personal and professional growth. Additionally, the CoC partners with the workNet DuPage Career Center to empower individuals with lived experience through Adult Basic Skills programs, Employment Services for Persons with Disabilities, Training & Services, and for eligible young adults ages 17 to 24, free career and employment services to help them start a career with a future.

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;	
	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and	

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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 routinely gathers input and feedback from people experiencing homelessness through the use of focus groups which are conducted at least annually, and the responses documented and shared with CoC members through its committee structure. Items of concern that are specific to a particular agency or agency policy are addressed with agency leadership; other items concerning housing and services are brought to the CoC Gaps & Needs Committee for further review and discussion.

The CoC routinely gathers input and feedback from people who have received assistance through the CoC or ESG program through online satisfaction surveys which allows more options for survey completion and translation into Spanish, making it easier for clients to complete and ensures anonymity of responses and feedback. Participants are able to complete surveys by scanning a QR code, clicking on a link via email, or on paper. Surveys are completed twice each year and upon program exit. 3) Staff are trained to address a variety of challenges clients encounter on their journey to housing stability. Many case managers are certified substance abuse counselors and trained in the field of mental health. With many clients being challenged by chronic diseases, a few case managers have been trained on how to facilitate Chronic-Disease Self-Management workshops. These six-week sessions assist participants in improving their quality of life and managing their own care. In addition, as a result of the high percentage of clients who have experienced trauma in their lives, agencies are become "trauma-responsive" organizations. Employees at all levels now have an understanding of trauma to improve services and interactions with program participants. CoC partner members also review survey results each quarter and takes steps to address any challenges that are raised by people with lived experience. As part of a Program Quality Improvement Process, survey feedback results are reviewed and combined into a report. If the amount of "disagree" answers for any particular question falls below a threshold of 70%, a quality improvement plan is created to address the issue. Additionally, narrative, qualitative answers are reviewed and shared with leadership to address program or process improvements.

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.	

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As a result of engaging with state government and meeting with local and state elected officials, State of Illinois FY24 budget appropriations were made available to CoCs through the new "Home Illinois" Anti-Homelessness Initiative. These funds expand affordable housing options by creating new scattered site permanent supportive housing units and rapid rehousing units statewide, including in DuPage County. DuPage County has also created an Affordable Housing Solutions Task Force, a committee which the CoC Planner attends routinely. This group addresses reforming zoning and land use policies to permit more housing development and reducing regulatory barriers to affordable housing development. The CoC has also engaged DuPage County Community Development, its county government partner that represents its CoC's geographic area, to discuss increasing its affordable housing supply through the availability of HOME ARP funds. Through the American Rescue Plan (ARP), \$6.5M in funds have been appropriated locally in funds to be administered through the HOME Investment Partnership Program (HOME). DuPage County Community Development requested CoC input to determine unmet housing and service needs of qualifying populations as part of the HOME ARP plan strategy. These populations included homeless and at-risk persons including those fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking; LGBTQ+, elderly, disabled, and persons with substance use disorder or mental health conditions with the provision of affordable rental housing. 1) Community Development staff and CoC members attend local planning and zoning board meetings and make recommendations for affordable housing actions involving zoning changes, variations, and land use policies. Staff meet with elected officials within DuPage County to further address affordable housing issues and concerns, which are routinely addressed during County Board meetings.

2) Through relationship and partnership between municipalities, area zoning and planning officials, and local affordable housing developer, New Directions Housing Corporation (NDHC), regulatory barriers have been reduced and affordable housing development has been accomplished. Both statewide and in parts of DuPage County, NDHC has built and rehabilitated hundreds of multifamily units for very low and low income individuals.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;

- PHA Crosswalk; and

- Frequently Asked Questions

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

1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC-meaning the date your CoC published the deadline.	05/01/2023	
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition-meaning the date your CoC published the deadline.	05/01/2023	

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

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

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

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5.	Used data from comparable databases to score projects submitted by victim service providers.	No
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

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?	13	
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.

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1) As a CoC system, data is collected and analyzed from each project's most recent APR data to assist in determining how successful the project was in critical performance measures such as successful exits to permanent housing destinations in Q23c, Exit Destination.

2) The CoC also analyzed APR data to identify the Length of Time between Project Start Date and Housing Move-in Date using data from Q22c to identify how long it took to house people in permanent housing within the project.
3) The specific severity of needs and vulnerabilities are considered through the CoC application process when ranking and selecting projects. Within each Business Plan submitted for each project, the applicant specifically identifies which vulnerable populations it serves. These populations include chronically homeless, low or no income, those with substance use disorder, significant health or behavioral health challenges or functional impairments, persons coming from the streets, those with a criminal record, and special populations including Domestic Violence, LGBTQ+ populations, Youth, and Veterans. This criteria was applied during the scoring of the 2023 project applications and ranking process in order to encourage projects to serve persons with the highest service needs and vulnerability.

4) The 2023 DuPage CoC Ranking Criteria increased the points for the severity of needs criteria from 5 points to 10 points, with 1 point for each vulnerable population served. The Ranking Criteria for performance measures and mainstream benefits are scored with an understanding that these are affected by the severity or uniqueness of the populations served. During the CoC ranking process, special consideration was given to projects such as 360 Youth Services' housing projects. This TH and Joint TH-RRH projects are the only projects of its kind in the CoC's geographic area serving literally homeless youth, many who identify as LGBTQ+, with low or no income, current or past substance use, often with history of childhood abuse, sexual assault, and a history of victimization. Given the uniqueness of this project, and the needs and vulnerabilities of the subpopulation it serves, the CoC has consistently tiered this project higher in Tier One, though it may have a lower overall score.

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.	

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1) The CoC obtained input and approval from persons of different race and ethnicity (White, Black, Mixed Race, and Hispanic/Latin (a)(o)(x) as well as members with lived experience of homelessness and those representing the LGBTQ+ population through the CoC committee structure when determining the rating factors used to review the CoC project applications. According to the most recent (10/01/2021 - 09/30/2022) data collected within the Demographics Overview in Stella P, of the persons served in ES, SH, TH the race and ethnicity of HoH and Adults was 49% White, 46% Black, 4% Multiple Races, and 1% Asian. Within those races, 18% identified as Hispanic/Latin (a)(o)(x). Input from those who were over-represented within the DuPage CoC homeless population was considered but most importantly, input from all members was given equitable and fair consideration.

2) Input from persons of all races and ethnicities resulted in actions taken to develop more fully the rating factors involving the Business Plan project evaluation. Applicants are now asked to describe their efforts and strategies to broaden the inclusivity of the organization and ensure equal access to persons regardless of race, culture, ethnicity, gender identity, sexual orientation, disability, or language.

3) The CoC application process is open, transparent, and inclusive. Communication is sent to all members of the CoC throughout the process via email and the CoC website. Persons of all races and ethnicity, including those who are over-represented in the local homeless population, are included in the review, selection, and ranking process of CoC new and renewal projects at different stages of the application competition through the CoC committee process. 4) The CoC rated and ranked project based on the degree to which projects identified barriers to participation faced by persons of all races and ethnicities. These included individual-level barriers (i.e., persons identified economic resource issues - lack of income, or employment, health factors) and community-level barriers: persons described issues such as limited housing options based on their life histories – credit history, criminal justice system involvement, prior eviction) as barriers to participation in housing. The CoC rated and ranked projects on actions taken which identified and removed these barriers for all persons.

1E-4.	Reallocation–Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	
	Describe in the field below:	
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year;	
	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.	

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 The DuPage CoC annually reviews the option of reallocation of HUD funded resources for the CoC competition. Reallocation discussions and recommendations take place within different levels of the CoC committee structure, and final decisions must be approved by the CoC Leadership Committee. The reallocation process is transparent, equitable and data-driven, with an emphasis on local needs. Underperforming projects are defined as those which are found during the review process to be deficient in project capacity, financial management, performance outcomes (including system performance measures), lack of compliance with regulations. or not meeting/addressing identified local need. The DuPage CoC maintains full authority to reallocate funding to maximize services and to address underperforming projects. The CoC may choose reallocation from any CoC project to meet its responsibility to ensure the CoC Consolidated Application best aligns with HUD and local priorities and contributes to a competitive application. Each renewal project is carefully reviewed during the process of preparing an application for funds, and all decisions made in accordance with the CoC Collaborative Application Process and the CoC Governance Charter. 2) In 2023, there were no projects identified as underperforming during the local competition process by the CoC. One project partner anticipated future performance problems and requested a partial reallocation. There was a voluntary reallocation of one renewal project – Partners In Housing. Catholic Charities, Diocese of Joliet, requested to reduce their project from 32 units to 18 PSH units in order to reduce administrative and staffing burdens. The CoC agreed to this request and reallocated these funds to a new PSH project with DuPage PADS so that PSH capacity did not decrease. 4) Since no other low performing projects were identified, only Partners In Housing was subject to reallocation this year. Although there were limited renewal projects in their first operating year which experienced unit or fund utilization challenges emerging from the close of the Public Health Emergency, each of those projects is on track to recover in the year ahead. The CoC Rank & Review Committee and the CoC Leadership Committee does not necessarily equate challenges encountered during a project's first year in operation with underperformance.

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

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.	

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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
	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/29/2023

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.	

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.	

 Project Names; Project Scores; Project accepted or rejected status; Project Rank–if accepted; 	Yes
5. Requested Funding Amounts; and 6. Reallocated funds.	

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	09/21/2023
partner's website-which included:	
1. the CoC Application; and	
2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	

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

Enter the date your CoC notified community members and key stakeholders that the CoC- approved Consolidated Application was posted on your CoC's website or partner's website.	09/21/2023
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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	

E	Enter the name of the HMIS Vendor your CoC is currently using.	WellSky		l
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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.	Multiple CoCs
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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.	04/10/2023
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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:
	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

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

(limit 2,500 characters)

 The DuPage CoC participates in the Northeast Illinois HMIS (NIL HMIS), a shared, regional HMIS managed by a single Lead Agency, the Alliance to End Homelessness in Suburban Cook County. In 2022, the Alliance, working with its HMIS software vendor WellSky, developed an HMIS comparable database that is compliant with federal HMIS standards. Federally funded victim service providers (VSPs) use this HMIS comparable database and participate in the Coordinated Entry process with anonymized client data, using the VSP Coordinated Entry participation protocol and workflow. However, DuPage CoC does not have a VSP receiving Federal Funding or participating in HMIS. The VSP partner in DuPage County is Metropolitan Family Services/Family Shelter Services (MFS/FSS). The agency offers private and state funded emergency shelter, 24 hour hotline services, counseling, court/victim advocacy (orders of protection), prevention/education services, community based groups, and a resale shop. All Illinois VSPs are mandated to use InfoNet, a web-based data collection and reporting system. InfoNet is a collaborative effort between the Illinois Criminal Justice Information Authority (ICJIA), the Illinois Coalition Against Sexual Assault (ICASA), and the Illinois Coalition Against Domestic Violence (ICADV). All Illinois VSP funding is contingent upon their InfoNet participation. VSPs not receiving federal funding (i.e., MFS/FSS) are encouraged to use the available HMIS comparable database that is compliant with the HMIS data standards and the CoC and the HMIS Lead has been working with MFS/FSS to engage them further into supporting their clients in the comparable data base. We conduct annual Point-in-Time and Housing Inventory Count via a survey with our VSP who does not enter data into any HMIS, capturing aggregate client data. All of their project required data is recorded in our CoC's HMIS. Our CoC funded project that is dedicated to persons experiencing domestic violence (DV) is housed under a non VSP organization who actively participates in HMIS for several projects that are not dedicated to persons experiencing DV. Staff are trained to lock down client records where there is a safety risk for anyone in HMIS.

2) Our single CoC funded project dedicated to persons experiencing DV is entered into the CoC's HMIS that meets all HMIS requirements, including the FY22 HMIS Data Standards.

3) The DuPage County CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

2A-5. Bed Coverage Rate-Using HIC, HMIS Data-CoC Merger Bonus Points.

NOFO Section V.B.3.c. and V.B.7.

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	388	40	348	100.00%
2. Safe Haven (SH) beds	0	0	0	

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Applicant: Dupage County CoC Project: IL-514 CoC Registration FY2023

3. Transitional Housing (TH) beds	144	0	144	100.00%
4. Rapid Re-Housing (RRH) beds	130	0	130	100.00%
5. Permanent Supportive Housing (PSH) beds	442	0	442	100.00%
6. Other Permanent Housing (OPH) beds	68	0	68	100.00%

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

	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

Not applicable.

	al System Analysis (LSA) Submission in HDX 2.0.	
NOFO Sect	ion V.B.3.d.	
You must u	pload 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	Yes
p.m. EST?	

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Enter the data view Or Or conducted its 2022 DIT count
Enter the date your CoC conducted its 2023 PIT count.

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

E	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/10/2023	
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2B-3. P	PIT Count-Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
N	NOFO Section V.B.4.b.	

Describe in the field below how your CoC:	
engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
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	
included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

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1) The CoC engaged unaccompanied youth and youth serving organizations during its most recent 2023 Point in Time (PIT) count planning process by personally engaging staff, leadership, and young adult stakeholder representation at two of the largest homeless youth providers within its geography. Both youth serving providers are active within the DuPage CoC, having served on the PIT Count Planning Committee representing homeless and runaway youth in DuPage County to conduct previous PIT Counts with youth and young adults experiencing homelessness and those at risk. During the PIT Count planning process, unaccompanied, non-parenting homeless youth ages 18-24 were represented by 360 Youth Services, a Joint Transitional and Rapid Rehousing program with specialized services for LGBTQ+ youth as well as Wheaton Youth Outreach, which serves pregnant and parenting young females.

2) Based on feedback and input provided from focus groups involving homeless youth and youth with former lived experience of homelessness within the 360 Youth Services program, known locations were identified as "hot spots" where youth and young adults experiencing homelessness were most likely to be found the night of the Count. These "hot spots" included area train stations, parking garages, and hotel parking lots. Additionally, the 360 Youth Services Transitional Housing program is listed on the National Runaway Switchboard, so calls coming in that night would also be used to identify homeless youth locations.

3) Homeless youth and young adults with former lived experience worked with the CoC in both the planning process and volunteering the night of the unsheltered PIT Count. As the result of specific outreach and youth centered engagement, 8% of the volunteers for the 2023 unsheltered PIT count were between the ages of 18 - 24.

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.

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 There was no change in the 2023 sheltered PIT Count implementation, neither to methodology nor data quality. The CoC continued to use HMIS reporting and provider surveys for its Domestic Violence (DV) programs, along with follow up. The CoC worked to improve its data quality through quarterly Agency Data Administrator trainings. 100% of Emergency Shelter and Transitional Housing CoC funded providers contribute data to the PIT count. Client level data in HMIS was the primary data source for the sheltered PIT count for Emergency Shelter and Transitional Housing projects along with supplemental data provided by our DV partner. Data collected on survivors of domestic violence was limited to reporting on those who are currently experiencing homelessness because they were fleeing domestic violence, dating violence, sexual assault, or stalking, as opposed to reporting on survivors who have ever experienced these circumstances in their lifetime. Follow up was conducted with individual housing providers to check the HMIS data against their records for that night and corrections in HMIS were made as necessary. 2) There were no changes in the unsheltered PIT methodology. Both the 2022 and 2023 PIT counts were a complete coverage census count. Trained volunteers conducted surveys among persons encountered. The surveys included demographics, household type, members, specific location of where persons were sleeping, identifying characteristics, history of homelessness (to determine chronic homeless status), and disability. One person, the Continuum Planner, reviewed all surveys which aided in de-duplication. The CoC continued the use of GIS technology; each trained volunteer used their own mobile device to appropriately track and identify unsheltered persons via GIS technology and collect/input survey data directly for completeness and analysis. There was increased reliability of data collected and data input into HMIS. resulting in improved timeliness, accuracy, and completeness. The newer GIS technology positively affected the unsheltered count results by reducing the potential for error which could come from using handwritten forms. Utilizing a

mobile device with GIS technology allowed for data to be immediately captured and the volunteer's contact information readily available if there were questions or a need for follow up.

4) Not applicable.

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2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	In the field below:
	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

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1) The process the CoC developed to identify risk factors used to identify persons becoming homeless for the first time involves individual assessments performed during intake at food pantries, shelter locations, initial assessment in the Coordinated Entry System process, and through engagement with mainstream and homeless prevention providers. These risk factors include households experiencing eviction or foreclosure, those undergoing severe economic crisis, and those with poor credit and/or a lack of savings. Additional risk factors include joblessness and lack of steady income, discharge from a public institution, and fleeing domestic violence.

Strategies the CoC has explored to address households at risk of homelessness include incorporating diversion practices and coordination with prevention partners at shelter intake, and Eviction Court referrals. The DuPage CoC has a coordinated system for distribution of state and federal homeless prevention and rehousing funds to reduce first time homelessness. Funds are available for rent assistance, security deposits, utility payments, moving costs, case management, landlord mediation and credit repair. Funds include Emergency Food and Shelter Program (EFSP), ESG, ESG-CV, Community Shelter Block Grant (CSBG), CSBG-CV, Community Development Block Grant (CDBG), CDBG-CV, IL Dept. Human Services, and discretionary funds through private donations. Last year 1,640 households were served with these funds and were prevented from entering homelessness. DuPagePads has a Housing NOW project, designed for shelter residents and persons at imminent risk of homelessness due to poor credit and little savings when they lose a lease. Housing NOW provides the first month's rent and security deposit for homeless persons who have a steady income. Referrals for persons to DuPage County Eviction Mediation Court are also made if the household meets eligibility guidelines. The program seeks to avoid exposing DuPage County families to homelessness during a health crisis, while also helping landlords mitigate losses during the circumstances that precipitated the need for this program. This is done through mediation, rental and housing assistance, and legal assistance to help both tenant and landlord understand their rights. 3) The Chair of the Service and Program Coordination Committee is responsible for overseeing the CoC's strategy to reduce the number of households experiencing homelessness for the first time.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	
		-
	Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:	
1.	natural disasters?	Yes
2	having recently arrived in your CoCs' geographic area?	Yes

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 The DuPage CoC's Number of First Time Homeless (792 in 2022 vs. 453 in 2021; an increase of 339 persons) continued to be affected by the number of persons seeking short-term shelter or housing assistance displaced due to the ongoing effects of the COVID-19 pandemic. While not a "natural" disaster, the CoC identified higher eviction rates post- eviction moratorium due to pandemic related issues (i.e., lack of affordable unit availability within the CoC's jurisdiction, increased rental costs, availability of emergency rental assistance relief programs declining or ending, rising costs of food, transportation, and utilities, etc.) that were similar to issues faced by those experiencing the devastating EF3 tornado which displaced hundreds of DuPage County households in 2021 (i.e., lack of affordable unit availability within the CoC's jurisdiction, increased rental costs, availability of emergency rental assistance relief programs declining or ending, rising costs of food, transportation, and utilities, etc.) which resulted in homelessness or housing instability. Although the DuPage CoC was not as significantly impacted by persons seeking asylum or by the arrival of immigrants during the past year as were larger, more urban areas statewide we welcomed approximately a dozen asylum-seeking households into our homeless response system and are working to identify housing and other appropriate resources to accommodate these families with an inclusive, culturally sensitive, and trauma-informed approach.

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

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 The CoC's strategy to further reduce the length of time individuals and persons in families remain homeless include enhancing our Coordinated Entry practices by streamlining the access, assessment, and referral processes, lowering barriers, and prioritizing vulnerable households who have been homeless the longest and have the most severe service needs. The CoC has established a Coordinated Entry process which is housing focused and Housing First oriented; people are housed without preconditions or service participation requirements, allowing for a reduction in the length of time persons and families remain homeless upon entering the system. There are established access points which utilize the same standardized process for assessment and referral and is intended to quickly identify people who need assistance and reduce the length of time they remain homeless. The CoC also identified opportunities to move persons quickly into housing using new resources such as the HUD Emergency Housing Voucher (EHV) program and other emergency rental assistance. 2) The Coordinated Entry System (CES) process identifies and prioritizes individuals and persons in families who have been homeless the longest and have the highest service needs across all housing interventions. They have first priority for housing. The Coordinated Entry team hosts formal monthly case conferencing and encourages informal, ongoing agency discussions to identify housing needs for those prioritized and for the dedication of PSH units to people who are chronically homeless, following the orders of priority set out in HUD's Notice CPD-16-11. For those who are reluctant to enter housing, ongoing outreach efforts are applied. The Coordinated Entry System provides direct referrals to homeless prevention services, domestic violence housing, and supportive housing for youth to reduce the length of time individuals and families experience homelessness.

3) The Chronically Homeless Assessment Team (CHAT), working in coordination with the Chair of the Coordinated Entry Oversight Committee, is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.

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.
(1) 1/ 0 = 0	

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 The CoC's strategy to successfully increase the rate at which individuals and persons in families in emergency shelter, transitional housing, and rapid rehousing exit to permanent housing destinations is to review performance by project type to determine if there is an area requiring additional focus, such as improving Housing First implementation, increased case management support, improved landlord engagement, or removal of barriers to accessing stable housing. An analysis of CoC data indicated the housing needs of persons in its Coordinated Entry system remain primarily for Rapid Rehousing interventions. However, many individuals in emergency shelter and transitional housing have been housed in partnership with the DuPage Housing Authority and the Emergency Housing Voucher (EHV) program funded through the American Rescue Plan (ARP), which to date has provided permanent housing for 82 households experiencing homelessness or were at risk of homelessness. In some instances, the EHV program was utilized to bridge households in RRH programs who needed long-term rental assistance, but not intensive long-term services, that were most likely to return to homelessness or experience a high degree of housing instability when their RRH assistance ended. Mainstream Housing Vouchers were used to target persons living in permanent supportive housing (PSH) who no longer needed intensive services and increased exits to permanent housing.

 2) The CoC's strategy to increase the rate at which all persons in permanent housing projects retain their permanent housing or exit to permanent housing destinations includes maintaining a Housing First approach and providing voluntary services which assist with housing stability. These include helping individuals and persons in families increase employment opportunities, address physical and behavioral health needs, assist with applying for mainstream and other benefits, and develop and maintain landlord relationships. Voluntary services and supports are offered through CoC providers and include workforce development and career support as well as budget and financial counseling.
 3) The Chronically Homeless Assessment Team (CHAT), working in coordination with the Chair of the Coordinated Entry Oversight Committee, is responsible for overseeing the CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

2C-4.	Returns to Homelessness–CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	
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 The strategy the CoC has implemented to identify common factors of individuals and families who return to homelessness is by requesting homeless service providers conduct a 90-day follow up for all exits and assess participant needs in order to identify housing stability issues. Factors most often noted include a loss or significant decrease in income, tenant/landlord issues or domestic or partner violence, many of which contribute to a return to homelessness. Shelter and street outreach also ask universal intake questions that identify whether a household had previous episodes of homelessness. identifying if the household has returned to a state of homelessness. The CoC's strategy to reduce the rate of additional returns to homelessness is to assist persons to maximize employment income and mainstream benefits to build up their income support base along with budgeting and developing landlord networks that are flexible in dealing with and resolving tenant issues. Individuals who return to homelessness are captured in the HMIS system through a standard data entry workflow, as well as in the Coordinated Entry System. Using System Performance Measure reports, HMIS staff review which project interventions experience higher returns and shorter amounts of time between events. This data is presented to homeless housing and service providers and CoC Leadership with the goal to educate and aid in system planning. Other strategies to reduce returns to homelessness may include reviewing the method used to identify the housing intervention, and the level of services and supports provided during and after program participation and using available data, at what stage were there significant rates of returns. 3) The Chair of the Service and Program Coordination Committee, working in coordination with the Chair of the System Performance Measurement 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

provide the organization name or position title that is responsible for overseeing your CoC's

(limit 2,500 characters)

strategy to increase income from employment.

3.

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1) The CoC's strategy to access employment income involves developing new and maintaining existing partnerships to achieve success through workforce development services and local employer referrals. These partnerships include collaboration with the WorkNet DuPage Career Center, the local Workforce Innovation and Opportunity Act (WIOA) agency, and DuPage County Workforce Innovation Board to increase access to employment referrals and WIOA grants for job training or certification in information technology, manufacturing, office/clerical, trucking/logistics, and accounting.

The CoC works with mainstream employment organizations to help individuals and families increase their cash income with free services offered by Worknet DuPage for employment search resources, employment fairs, computer workshops, resume writing, interviewing skills, local job postings, and through assistance with working with a criminal background, disability, and a specialized program for Veterans. The MYWay (Make Your Way) initiative is a program for youth ages 18-24 which provides paid incentives to complete training followed by a paid internship. Use of Community Service Block Grant (CSBG) funds for job coaching and Community Development Block Grant (CDBG) offers funds to support the DuPagePads Career/Employment Solutions Center which works with employment organizations including Cisco, JelSert, JD Norman, Northwestern Medicine, Embassy Suites, IBEW 701, Edward Elmhurst Health, and UPS. The CoC collaborated with PRIDE Industries as a workforce partner member to offer personalized employment coaching, training, and job placement. As a social enterprise, PRIDE Industries and their local employer partner, Ingram Micro, provide facilities operations and maintenance services, contract manufacturing, supply chain management, packaging and fulfillment services, and staffing and recruitment to private and public organizations both locally and nationwide. Their mission is to create jobs for people with employment instability, lived experienced of homelessness, disabilities, veterans, former foster youth, and trafficking survivors. This workforce collaboration offers great opportunity for local employment to assist help individuals and families increase their cash income.

3) The Chair of the CoC Rank & Review Committee is responsible for overseeing the CoC's strategy to increase income growth from employment as part of the annual project evaluation process.

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.	

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 The CoC's strategy is to ensure all CoC funded agencies are provided with a resource for training and education on public benefits which could increase nonemployment cash income for their clients. A Public Benefits Training series is offered biannually from the DuPage Federation for Human Service Reform for organizations serving DuPage County. The trainings cover the essentials of state benefits, navigating Social Security and Medicare, and the essentials of Medicaid. Training participants learn to understand the basic rules of who gualifies for a specific benefit, how to complete applications, navigate the application process, and troubleshoot when issues arise. Also available is a video training created by Legal Aid Chicago's pro bono project which is published on the CoC's website training resource page. The video course explains and guides participants through the process of applying online for public benefits using the Application for Benefits Eligibility (ABE). It describes various types of public benefits, such as SNAP food assistance, Medicaid, cash assistance for families with children (TANF), and the aged, blind or disabled (AABD Cash), and who is eligible to receive them. It explains the process of applying for benefits on behalf of someone else as well as how to follow up with the Illinois Department of Human Services after the application has been submitted. The CoC works to ensure that 100% of CoC projects work with participants at intake to assess their eligibility for cash benefits such as Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Women, Infants, Children (WIC), Earned Income Tax Credit (EITC) where eligible, Social Security Income (SSI), Social Security Disability Income (SSDI), Medicaid and Medicare and provide advocacy and transportation assistance to the state benefits office. CoC agencies have SSI/SSDI Outreach, Access, and Recovery (SOAR) trained staff available to work with participants. Illinois utilizes the SOAR Online Course as its preferred training method. Case managers are expected to register in Online Application Tracking (OAT) to track outcomes.

2) The Illinois SOAR State Team Lead, working in coordination with the Chair of the Gaps and Needs Committee and the DuPage Federation, are responsible for overseeing the CoC's strategy to increase non-employment cash income.

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3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

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

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

Project Name	Project Type	Rank Number	Leverage Type
Haven of Hope Exp	PH-RRH	18	Both

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3A-3. List of Projects.

1. What is the name of the new project? Haven of Hope Expansion

2. Enter the Unique Entity Identifier (UEI): Z9NKLMAGKD17

3. Select the new project type: PH-RRH

- 4. Enter the rank number of the project on your 18 CoC's Priority Listing:
 - 5. Select the type of leverage: Both

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3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

3 B-2 .	Rehabilitation/New Construction Costs-New Projects.
	NOFO Section V.B.1.s.
	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and

2. HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

Not applicable.

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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	No
projects to serve families with children or youth experiencing homelessness as defined by other	
Federal statutes?	

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

(limit 2,500 characters)

Not applicable.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

4A-1a. DV Bonus Project Types.

NOFO Section I.B.3.I.

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

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

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

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

1.	Enter the number of survivors that need housing or services:	1,204
2.	Enter the number of survivors your CoC is currently serving:	802
3.	Unmet Need:	402

4A-3a. How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects. NOFO Section I.B.3.I.(1)(c)	
NOFO Section I.B.3.I.(1)(c)	
Describe in the field below:	
 how your CoC calculated the number of DV survivors needing housing or services in question 4A- 3 element 1 and element 2; and 	
2. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
3. if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

(limit 2,500 characters)

1) The number of survivors needing housing or services was calculated using Coordinated Entry and the internal data from CoC domestic violence partner, Metropolitan Family Services/Family Shelter Services (MFS/FSS). Coordinated Entry as of 7/31/23 indicates 92 households where at least one member is a survivor of domestic violence. From the Metropolitan Family Services/Family Shelter Services (MFS/FSS) external data source InfoNet it was reported that 1,112 persons were turned away from DV shelter in the last fiscal year due to lack of available beds. 92 + 1,112 = 1,204 survivors that need housing or services. The number of survivors currently being served was calculated using Family Shelter administrative data and HMIS. There were 208 households that were provided shelter and services by Family Shelter in FY23. HMIS identified 494 households currently being served within the CoC that have at least one household member reporting as a survivor of domestic violence. This number includes those that have been housed. 208 + 494 = 802 households receiving services.

2) The data source was DuPage HMIS system for non-DV projects and the InfoNet external DV database used by MFS/FSS which will be referred to as Family Shelter. Family Shelter is mandated in the state of IL to use InfoNet. 3) The DuPage CoC is unable to meet the needs of all DV survivors. There is no DV or CoC funded permanent supportive housing available for DV survivors in the DuPage CoC at this time. There is one DV Rapid Rehousing project for which an expansion is being requested. The current project is based on 17 households and the expansion adds another 7 households. There were 880 persons experiencing DV in CoC funded ES, SO, HP, and TH from 2020-2022. There is one DV emergency shelter provider, Family Shelter, that provides emergency shelter and hotel voucher shelter. In the last year, 1,112 persons experiencing DV were turned away from Family Shelter due to lack of available beds. Approximately 20% of these persons were served in DuPagePads shelter due to inadequate DV shelter capacity. In order to provide permanent housing for DV survivors, a partnership between Family Shelter and DuPagePads has been implemented. DuPagePads will provide housing and case management with Family Shelter providing expertise in safety planning and victim centered services.

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4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)	
		-
	Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.	
Applicant Name		
DuPage PADS		

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

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

NOFO Section II.B.11.e.(1)(d)

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

1.	Applicant Name	DuPage PADS
2.	Project Name	Haven of Hope Expansion
3.	Project Rank on the Priority Listing	18
4.	Unique Entity Identifier (UEI)	Z9NKLMAGKD17
5.	Amount Requested	\$366,103
6.	Rate of Housing Placement of DV Survivors-Percentage	37%
7.	Rate of Housing Retention of DV Survivors-Percentage	88%

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

	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:
1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

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1)The rate of housing placement was calculated by using the data from Family Shelter (MFS/FSS) InfoNet external database indicating their destination upon leaving DV shelter. There were 208 persons/households served in DV shelter with 43 departures. Of the 43 departures, there were 16 to safe permanent housing. 16/43 = 37% housing placement rate. The rate of housing retention was calculated by the number of safe exits (16) compared to the number who returned for further services. There were only 2 returns. 14/16=87.5 % safe housing retention. 2) The rates do account for exits to safe housing destinations. Family Shelter had 43 departures in FY23. Of these, there were 16 to safe housing destinations of permanent housing. 16/43 = 37% safe housing placement rate. 3) The data source was INFONET which is the database used by Illinois Domestic Violence Service providers to track client participation, services and completion so as to measure project outcomes. A summary statistical report for FY2023 for Shelter Service determined the number of Shelter Exits within FY2023; and the number of placements after shelter exit. The same data source was used to determine the number of clients who exited the program in FY2023 and returned for service.

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

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

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 DuPagePads encounters DV survivors in their homeless Interim Housing Center (shelter) and street outreach. When someone discloses a history of DV or fleeing DV, staff records it in their initial assessment. All staff are trained to screen for those whose safety is at imminent risk, and those households are prioritized and connected to services through the partnering DV agency of Family Shelter. 2) Clients identified through these sources are screened to determine homeless status, safety, and readiness for placement into Coordinated Entry. Once in shelter, locating housing guickly is a priority, as access to housing maximizes survivors' options and minimizes the risk of survivors ending up in unsafe housing. The agency will also participate in the Emergency Transfer Plan, which takes precedence to align and comply with VAWA when necessary. 3) Within the Haven of Hope DV RRH, DuPagePads has an additional services assessment around safety, counseling and specialized DV services. These are available through the partnership with Family Shelter, the key community provider of domestic violence services and with whom DuPagePads is collaborating. 4) While in shelter, clients receive extensive supportive services including legal support, employment support, financial education, and rental and utility assistance to reduce barriers to permanent housing. 5) To ensure a quick move into housing options. DuPagePads will utilize the current Rapid Rehousing Navigator to find units with the same proven process that we use with Rapid Rehousing and Tenant Based Rent Assistance. The goal is to move them into housing they can sustain when their assistance ends. Potential candidates meet with the housing navigator regarding their housing needs (with particular attention to both geographic needs for the safety of the client with regard to distance from the abuse, and also with regard to children's school needs), and staff will search for units with them. DuPagePads already has partnerships with landlords who are willing to take this population, which assists with the process. Specifically to support the housing needs of those fleeing domestic violence, DuPagePads case managers work together with Family Shelter, which has served individuals fleeing violence in our area since 1976. There is a collaboration in which Family Shelter Services (MFS/FSS) leads safety planning while DuPagePads provide housing and case management.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
		1
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentially policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

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 The intake space is a private room with closed doors and a noise machine to ensure private conversation. This may be a staff office, onsite at Family Shelter, or a separate hotel room. All Family Shelter office locations are located behind a locked door where persons must check-in and access is monitored. Each member of the couple would be interviewed separately in different spaces. 2) When developing safety plans for apartment searches, DuPagePads staff goes over client preferences in a checklist by offering rent assistance in scattered site or single site housing, taking into account the resources available. This checklist will include safety-related needs. Safety planning protocols include not publicizing housing addresses, giving clients choice of location and assistance with obtaining Orders of Protection and court advocacy. Staff regularly connect with survivors to revisit their safety and action plans as appropriate, especially when moving. Staff may not disclose where a DV survivor is living and strongly encourage the DV survivor to not disclose their location. The goal will be to separate them from the abuser but make accommodations around work and school as needed. 3) At intake, staff give instructions on not disclosing location and check where the abuser is to ensure there is distance. Staff get as much info about the abuser as possible including the name of the abuser. There is a safety plan put in place. Staff assess the risk for the abuser seeking the survivor out. Staff check if there is a current order of protection or restraining order, and check if the survivor needs help to get one. 4) The staff persons in this project will be 40-hour trained in DV by Metropolitan Family Services/Family Shelter Service. This training includes initial safety planning and confidentiality as part of client services. DuPagePads staff will be trained on best practices to ensure safety such as trauma-informed care, recognizing the signs of substance use/abuse, de-escalation techniques, active shooter protocols, and mandated reporting. DuPagePads has a strict confidentiality policy that follows all state and federal laws in the Personnel Policy manual and staff must sign a statement of adherence to the policy upon employment. 5) A safety/security checklist will be used to ensure the unit is safe. Measures such as installing additional locks and ensuring the landlord keeps all lights updated in hallways will be taken.

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

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

(limit 2,500 characters)

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The project will measure its ability to ensure the safety of DV survivors that the project serves through quarterly program evaluation which will evaluate all incident reports, prepare quarterly risk management reports, recommend additional actions to improve safety, and coordinate additional educational programs for clients and staff. DuPagePads will keep performance indicators for program success both around client safety and also the number of days in stable housing. A client outcomes survey is used to determine the client's overall feeling of safety after receiving services with the % of clients who report feeling safer and having more resources in order to remain safe. In the FY23 survey, the results were as follows for adults: I am more familiar with Community resources = 75%, I feel safer from abuse = 81%, I feel more hopeful for my future = 85%, I understand how abuse effects my life = 85%I understand how abuse effects my children = 86%, I am aware of my legal rights as a DV victim = 83%, I know how to report an Order of Protection violation = 90%. For children, the survey results were: I know the abuse is not my fault = 92%, I can name two ways to keep myself safe = 99%. As DuPagePads began the implementation of Haven of Hope, an area of improvement was to have all staff complete the 40-hour domestic violence certification from a local victim service provider (Family Shelter Service) and recognized by the Illinois Coalition Against Domestic Violence. DuPagePads now has 15 staff that completed the 40-hour certification, representing each department across the agency. There is also a team member who is a Certified Domestic Violence Professional (CDVP) in the state of Illinois. This person with their CDVP was a former 40-hour training program manager and has 15+ years of professional experience in the field working with survivors of domestic and sexual violence. Staff and colleagues with 40-hour DV certification and CDVP credentials are engaged in the development of policies and procedures, staffing unique client needs, and informing various aspects of this program. Another area for improvement is becoming more sophisticated and informed regarding safety needs for clients and what is allowable when working with a private landlord. Examples of this are requests to private landlord regarding lighting, security measures within the property, ring doorbells, etc.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	

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7. offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

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DuPagePads uses trauma-informed practices at intake for all clients who are welcomed into their programs. This practice is named in the agency Philosophy of Care, which is reviewed with all staff and board, and in the Policy for a Trauma-Informed Approach (Policy AP-03). All employees and volunteers are grounded in an understanding of the impact of trauma and respond by offering programs and services that support healing, increase resilience, and reduce retraumatization. 1) DuPagePads has been successfully developing and operating CoC funded supportive housing since 2004. In 2021 and 2022, DuPagePads was awarded a DV rapid rehousing project which now has 17 units. It also operates a privately funded Housing Now rapid rehousing project. These projects have successfully rehoused over 80 households. 95% of residents in the housing programs have remained housed for a year or longer. Recognizing that domestic and sexual violence are the leading causes of homelessness among women, DuPagePads provides trauma-informed case management, coordinated care and year-round access to basic needs. At present, about 20% of clients in the shelter (95 adults and children) report experiencing homelessness due to fleeing domestic violence, and this statistic does not account for those served by other agencies. DuPagePads has a history of prioritizing participant choice and rapid placement and stabilization within the current Rapid Rehousing Program model. 2) DuPagePads established a Philosophy of Care over 10 years ago that stresses maintaining an environment of agency and mutual respect and utilizes a resident council to ensure that clients feel empowered. The agency established an Equity Committee in 2020 that works toward minimizing power differentials. DuPagePads staff, volunteers and clients are required to create a safe, supportive, and inclusive environment. Participants can provide feedback regarding their experience and service delivery. Best practices include avoiding language which reduces an individual to a single defining attribute and fails to respect the entire individual. 3) DuPagePads has used trauma-informed practices at intake for all participants who are welcomed into their programs since 2017. This practice is named in the agency Philosophy of Care, which is reviewed with all staff and board, and in the Policy for a Trauma-Informed Approach (Policy AP-03). All employees and volunteers are trained in the impact of trauma and respond by offering information to participants in services that support healing, increase resilience, and reduce re-traumatization. 4) DuPagePads has an inventory of intake and assessment and case plan formats that use a strength-based approach to care. Program practices include screening for trauma exposure or traumatic events at program intake. Screening results that indicate risk of traumatic stress can be used to inform goal setting, planning and service delivery necessary to meet participants needs. 5) DuPagePads complies with HUD's Fair Housing and Equal Access Rule. Staff are trained on the principles of both rules to ensure understanding and proper implementation. In addition, clients review and sign an acknowledgment of policies to document communication of Fair Housing and Equal Opportunity as well as Equal Access. DuPagePads provides Cultural Competence training to enhance staff understanding of racial, ethnic, gender identity and sexual orientation at time of hire and at least once per year through its Relias Computerized Training Program. The Linguistic and Cultural Competency Plan was initially adopted by the Board of Directors on 6/22/2012 and is updated annually. An Equity Committee was created at DuPagePads in 2020. Self-advocacy Training is also being conducted to assist clients and staff in expression of equity issues; the last training was in May 2023. 6) DuPagePads has Family Shelter doing a group once per month due to the number of DV survivors in their shelter. Program participants are always

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encouraged to support and learn from one another. DuPagePads has offered group counseling for many years that offer opportunities for connection and peer-to-peer support. Family Shelter also has provided counselor and advocate led groups where survivors and their children can share experiences, find support, and break the isolation that many undergo when experiencing domestic violence for many years. 7) For parent supports, DupagePads currently has a partnership with the YWCA to refer clients to its Strong Families program, which is a home-based parenting education program. Family Shelter Services offers a variety of education services and group supports for parents. These trauma-informed and evidence-based services include parenting fundamentals, economic stability, emotional wellness, linkages to legal, financial aid and food pantries, and family counseling services for both adults and children.

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

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

(limit 5,000 characters)

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Households will be moved from the streets and shelters to stable housing that meets their specific needs for safety and includes trauma informed and victim centered case management approaches. Supportive services offered include coordinating medical and behavioral health care; building the income base with cash and non-cash resources; helping to problem-solve relationships with landlords and neighbors; and connecting people to community resources. Appropriate units that meet the DV survivor housing needs will be located within the agency's network of cooperating landlords. Staff is trained in harm reduction, trauma informed and victim centered approaches; housing first, financial management and safety planning to ensure tenants remain in permanent housing. To meet the legal needs of survivors, DuPagePads connects clients with Prairie State legal services regarding child custody. For clients struggling with a criminal history, we refer to the DuPage Legal Bar Association. Prairie State does expungement clinics. HOME DuPage has collaborated with the agency to provide budgeting and credit workshops for survivors with bad credit history and provides free one-on-one financial coaching These services increase the success of survivors' housing applications. With client authorization, staff work directly with potential and current landlords on housing search, educating them on the myths and realities of DV. Crisis DV services are provided by the DuPagePads Central Intake department. For those fleeing domestic violence, intake staff facilitate an immediate connection to the local DV Family shelter to ensure safety. The survivor contact includes a lethality assessment and safety plan, and as the domestic violence shelter is routinely at capacity, the safety plan is useful in admitting the client into the DuPagePads emergency shelter program. In FY23, The number of survivors gaining safety from abuse/violence was 95 out of 405 total persons served in shelter. Long term housing stability safety planning is done utilizing the Family Shelter safety planning document. Staff regularly connect with survivors to revisit their safety and action plans as appropriate, especially when moving. The goal is to make accommodations around work and school as needed to ensure safety. To overcome economic abuse and ensure financial sustainability of safe permanent housing, DuPagePads provides transportation to educational, employment and job training opportunities. They provide participants with application and security deposits so that a lack of savings/assets at the beginning of the program will not prevent survivors from being able to access housing. Case managers provide linkage to employment and education services to build up the income support base and will meet with participants at least monthly to focus on eviction prevention planning, community resource connections, and positive community integration Participants can obtain part time or full time employment. DuPagePads Employment Counselor offers comprehensive Career/Employment Services. This includes individual assessments, employment readiness services, job seeking and job retention strategies, and computer resources for job searches. Career goals are established in collaboration with participants and their respective case manager. There is on-going support to retain employment as well as soft skills mentoring including workplace behavior, communication, and problem solving. Partnerships with Worknet DuPage, the Department of Rehabilitation Services, and National Able 55+ are in place to assist clients with vocational training and additional employment opportunities. Career/Employment Solutions staff network with businesses to develop partnerships. As a result, DuPagePads currently has relationships with over 100 businesses. Educational opportunities for GED and higher education are available through College of DuPage and Peoples Resource Center. Education for children is coordinated by the DuPagePads McKinney Vento liaison.

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Community partnerships are established with all mainstream benefit providers to facilitate enrollment. DuPagePads assists all participants in obtaining all entitled benefits including Medicaid, Food Stamps, TANF, LIHEAP, Unemployment and or Workman's Compensation. Last year 64 persons obtained a new benefit. There is a health care navigator staff position at DuPagePads. Community partnerships are established that provide access to needed healthcare, dental and vision services, medication management, and behavioral health services. Partnerships Include Healthcare Alternative Systems, DuPage County Health Dept, Visiting Nurse Associations, and Hamdard FHQ Health Care Center. For childcare needs, YWCA childcare subsidy program is used. All of these services are via a victim-centered approach that encourages the survivor to work with the advocate to best plan for their safety and maintain confidentiality, minimizing risk to the client.

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

bribe in the field below examples of how the new project(s) will:
itize placement and stabilization in permanent housing consistent with the program
cipants' wishes and stated needs;
blish and maintaining an environment of agency and mutual respect, e.g., the project does use punitive interventions, ensures program participant staff interactions are based on equality minimize power differentials;
ide program participants access to information on trauma, e.g., training staff on providing ram participants with information on the effects of trauma;
hasize program participants' strengths–for example, strength-based coaching, questionnaires assessment tools include strength-based measures, case plans work towards survivor- led goals and aspirations;
er on cultural responsiveness and inclusivity, e.g., training on equal access, cultural petence, nondiscrimination, language access, improving services to be culturally responsive, ssible, and trauma-informed;
ide a variety of opportunities for connection for program participants, e.g., groups, torships, peer-to-peer, spiritual needs; and
support for survivor parenting, e.g., trauma-informed parenting classes, childcare, ections to legal services.

(limit 5,000 characters)

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 A minimum of 7 additional DV survivor households will receive rapid rehousing assistance. There are currently 2.5 fte case managers in rapid rehousing. This project will add 1 FTE case manager and 1 FTE supervisor with a .6 FTE housing navigator. DuPagePads prioritizes participant choice and rapid placement and stabilization within the current Rapid Rehousing Program model, and will utilize the same procedures for participant choice in the expansion of the Haven of Hope program. DuPagePads gives participants access to information, education, and resources to make informed decisions that best reflect their interests and needs, including their choice of housing model and location. Identifying a place that the household feels safe is a top priority. The Housing Navigator will increase the network of cooperating landlords which gives participants multiple housing options throughout DuPage County. Landlord financial incentives will be used to overcome DV leasing barriers. It also shortens the timeframe to house participants. This project will build upon the current relationships with landlords and build in the additional safety requirements. 2) DuPagePads Philosophy of Care stresses maintaining an environment of agency and participant mutual respect, and utilizes a resident council to ensure that clients feel empowered. There is an Equity Committee that works toward minimizing power differentials. Clients will be given literature and access in group sessions for trauma information. All staff are trained on trauma-informed approaches. An anonymous grievance process is in place to allow for complaints or concerns for review. This promotes mutual respect and that participants are on equal footing. 3)The project will train 1.5 FTE case managers on educating program participants on the dynamics of intimate partner violence: the cycle of power and control, on the varying ways that trauma can manifest itself, and steps that participants can take to overcome the trauma they have experienced. DuPage PADS will use Family Shelter Service to provide a full series of domestic violence training to these staff. All DuPagePads employees and volunteers, including Board Members, have completed training on the impact of trauma on brain development. Re-Traumatization, Secondary Traumatic Stress, Vicarious Trauma, and Compassion Fatigue. Education also includes how to maintain environments that are trauma-sensitive. 4) The 3.5 fte case managers will implement the current practices at intake and throughout case management of a strengthbased approach to care, assessments and case plans. DuPagePads regularly uses assessment tools that involve the participants in the identification of both their strengths and needs. This will allow the case managers to work collaboratively with clients to build upon their strengths and provide assistance to address the needs that they identify. 5) DuPagePads complies with HUD's Fair Housing and Equal Access Rule. Staff will participate in the CoC training on the principles of both rules to ensure understanding and proper implementation. In addition, clients review and sign an acknowledgment of policies to document communication of Fair Housing and Equal Opportunity as well as Equal Access. DuPagePads provides Cultural Competence training to enhance staff understanding of racial, ethnic, gender identity and sexual orientation at time of hire and at least once per year through its Relias Computerized Training Program. The Linguistic and Cultural Competency Plan was initially adopted by the Board of Directors on 6/22/2012 and is updated annually. An Equity Committee was created at DuPagePads in 2020. Self-advocacy training is also being conducted to assist clients and staff in expression of equity issues; the last training was May 2023. 6) Opportunities for connection will be provided in the monthly group program already being done by Family Shelter on site. DuPagePads offers group counseling that will also offer opportunities for connection and peer-to-peer support. There will be specialized DV

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counseling/aftercare available to households from Family Shelter up to one year. Family Shelter also provides counselor and advocate led groups where survivors and their children can share experiences, find support, and break the isolation that many undergo when experiencing domestic violence. 7) DuPagePads has a partnership with the YWCA to refer clients to its Strong Families program, which is a home-based parenting education program. An additional resource will be Kids Above All for a Parent Empowerment Program. This program is an IL State Board of Education funded home-visiting program. Family Shelter will continue to offer a variety of supports for parents. These trauma-informed and evidence-based services include parenting fundamentals, economic stability, emotional wellness, linkages to legal, financial aid and food pantries, and family counseling services for both adults and children.

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

2. in policy and program development throughout the project's operation.

(limit 2,500 characters)

 The Haven of Hope project involves survivors with a range of lived experience including homelessness and domestic violence. The agency employs 2 case management staff with lived experience of homelessness and/or survivors of intimate partner violence, sexual assault, and stalking. Staff with lived experience are regarded as experts who can offer an important perspective on how we provide these critical housing services for survivors in our community. Respecting confidentiality, staff only share personal experiences at their own comfort level and DuPagePads provides a safe space for sharing. Current staff with lived experience provide feedback towards policy and procedures on a voluntary basis and can stop and start this assistance at their own pace. 2) In addition to hiring persons with lived experience, DuPagePads provides additional opportunities for current tenants with lived experience to work with program staff to develop, implement and review and update/evaluate policies and procedures for our DV focused housing programs. Currently tenants are discussing with staff the policy on rent portion assistance and timeframes in focus groups. A client satisfaction survey is sent every six months to identify issues with program policies and procedures. Survey data will be analyzed, and results will identify strengths and areas for growth. Summary information will be shared with staff, the Programs Committee, and clients. Focus groups may be conducted in place of, or in addition to, paper or digital surveys. Additionally, direct feedback is also obtained from conversations with their case managers and documented in case notes. To formalize the involvement with persons (survivors) served, DuPagePads has recently adopted a policy "Voice of Persons with Lived Experience". This policy

recently adopted a policy "Voice of Persons with Lived Experience". This policy formalizes the process for obtaining their involvement in the development, implementation and evaluation of housing policies and procedures. Through Committees and Surveys, clients can provide feedback on policies and procedures. It serves as a key element of agency management and service delivery. Committees for residents/tenants will be held at least quarterly for the Interim Housing Center, Permanent Supportive Housing, and survivors in Haven of Hope Rapid Rehousing. A meeting summary will be provided to agency senior management and the Programs Committee, including any suggestions, needs, or requests.

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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 at	achment for each doo	cument listed where 'Required?' is 'Yes'.	
3.	files to PDF, rather that	n printing documents rint option. If you are	er file types are supported–please only use and scanning them, often produces higher q unfamiliar with this process, you should cor	zip files if necessary. Converting electronic uality images. Many systems allow you to sult your IT Support or search for
4.	Attachments must mate	ch the questions they	are associated with.	
5.	Only upload documents ultimately slows down t	s responsive to the qu he funding process.	estions posed-including other material slow	rs down the review process, which
6.	If you cannot read the a	attachment, it is likely	we cannot read it either.	
	. We must be able to displaying the time and time).	o read the date and ti date of the public pos	me on attachments requiring system-genera sting using your desktop calendar; screensh	ted dates and times, (e.g., a screenshot ot of a webpage that indicates date and
	. We must be able to	o read everything you	want us to consider in any attachment.	
7.	After you upload each a Document Type and to	attachment, use the D ensure it contains all	ownload feature to access and check the at pages you intend to include.	tachment to ensure it matches the required
8.	Only use the "Other" at	tachment option to me	eet an attachment requirement that is not ot	nerwise listed in these detailed instructions.
Document Typ	Required? Document Description Date Attached			
1C-7. PHA Ho Preference	meless	No	PHA Homeless Pref	09/10/2023
1C-7. PHA Mo Preference	ving On	No	PHA Moving On Pre	09/10/2023
1D-11a. Lette Working Group		Yes	Letter signed by	09/10/2023
1D-2a. Housin	g First Evaluation	Yes	Housing First Eva	09/10/2023
1E-1. Web Po Competition D	sting of Local eadline	Yes	Web posting - Loc	09/10/2023
1E-2. Local Co Tool	mpetition Scoring	Yes	Local Competition	09/10/2023
1E-2a. Scored Project	Forms for One	Yes	Scored Forms for	09/10/2023
1E-5. Notificati Rejected-Redu	E-5. Notification of Projects Yes Notification of P 09/10/2023 ejected-Reduced		09/10/2023	
1E-5a. Notifica Accepted	ation of Projects Yes Notification of P 09/10/2023			
1E-5b. Local C Selection Rest		Yes	Local Competition	09/10/2023
1E-5c. Web Po Approved Con Application	osting–CoC- solidated	Yes		

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1E-5d. Notification of CoC- Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	FY2023 HDX Compet	08/07/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin	09/10/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal	09/15/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

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Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Letter signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web posting - Local Competition Deadline

Attachment Details

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Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description:

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Attachment Details

Document Description:

Attachment Details

Document Description: FY2023 HDX Competition Report IL-514 DuPage

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

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Document Description:

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PHA HOMELESS PREFERENCE

DuPage Housing Authority letter on homeless preference



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 711 E. Roosevelt Road

 FAX
 630.690.0702
 Wheaton, IL 60187

www.DuPageHousing.org

August 9, 2023

Mary A. Keating, Director DuPage County Community Services 421 N. County Farm Road Wheaton, IL 60187

Dear Mary Keating,

This letter is to affirm the partnership of the DuPage Housing Authority (DHA) with the DuPage County Continuum of Care (DC CoC).

When selecting applicants from the Housing Choice Voucher (HCV) Program waiting list, DHA uses a two-tiered single waiting list system. This system gives applicants that qualify for a preference an opportunity to receive a subsidy ahead of applicants that do not have a qualifying preference. The preferences are a way of organizing the waiting lists to address local housing issues and DHA policy. Without preferences, applicants on the waiting lists would be "organized" only by the date and time that they applied.

The DHA uses weighted, *general preferences* for applicants. You qualify for any of the approved *DHA General Preferences* based on the preference category and your status or condition within each category.

Top Preferences – Applicants are served immediately when vouchers are available.

DHA has established the following Top Preferences. Preferences in this category are *superior* to the Ranking Preferences that follow. DHA will not process applications in a subordinate category before all applications in the superior category have been processed. Top Preferences have no maximum number of vouchers available to those who meet the criteria:

- 1. Participants for at least one (1) year in any DHA Project-based Voucher program, who voluntarily surrender their project-based subsidy and request tenant-based subsidy to move with continued assistance;
- Participants in any State of Illinois funded, targeted-population housing program, (i.e. Bridge Subsidy Initiative, Rental Housing Support, or similar) living in the DuPage County service area, who become displaced because of discontinuation of that program due to lost state funding;
- Participants in any HUD-funded DuPage Continuum of Care or other DuPage County or State of Illinois targeted population housing program (including transitional housing, supportive housing or permanent housing), that as a component of their service, DHA has an Inter-governmental Agreement (IGA), Memorandum of Understanding (MOU), Memorandum of Agreement (MOA), or other similar agreement.
- 4. Participants with a HAP Contract terminated by DHA due to insufficient funding described in [DHA Plan:12-I.D] and [24 CFR 982.454].



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Ranking Preferences – 1 point each for maximum of 7 points:

Category One: Residency Preference

You are eligible for the Residency Preference if:

- 1. You are a full-time Resident of any municipality or township within the DHA service area of DuPage County; <u>or</u>
- 2. One or more adults in the household is employed at least 30 hours per week within the DHA service area of DuPage County; or if one or more adults in the household is a participant for at least 30 hours per week within the DHA service area of DuPage County in an accredited employment training program designed to prepare individuals for the job market.

Category Two: Family Preference

You are eligible for the Family Preference if:

- 1. At least one household member is a minor child under 18 years old; or
- 2. The head of household or spouse is at least 62 years of age or older; or

Category Three: Veteran Preference

You are eligible for the Veteran Preference if:

1. The applicant head of household is a military veteran who separated from the service with any classification except dishonorable.

<u>Category Four: Domestic Violence, Dating Violence, Sexual Assault or Stalking</u> <u>Preference</u>

You are eligible for the Domestic Violence, Dating Violence, Sexual Assault or Stalking Preference if:

- 1. You have been determined to be a victim of domestic violence, dating violence, sexual assault, or stalking as described and prescribed under the Violence Against Women's Act (VAWA), and
- 2. You submit required documentation to qualify for the preference.

To qualify for this preference, documentation that supports the determination must show you are being displaced or have been displaced from a domicile within the DHA service delivery area due to domestic violence, dating violence, sexual assault or stalking, *with written verification from the police, a social service agency, court, a physician, and/or a public or private facility giving shelter and/or counseling to victims*.

Category Five: Family Self-sufficiency (FSS) / HUD Demonstration Program Preference

You are eligible for the FSS / HUD Demonstration Program Preference if:

- 1. You are enrolled in the HUD Family Self-sufficiency Program (FSS); or
- 2. You are enrolled in any other HUD Demonstration Program. Demonstration Programs are HUD sponsored programs that after a determination of good cause and subject to statutory limitations, have been given authority to grant waivers to regulations that govern those programs [24 *CFR 5.110*].



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Category Six: Involuntary Displacement Preference

You are eligible for the Involuntary Displacement Preference if:

1. A government action or a state or federally declared natural disaster involuntarily displaced you from a domicile in the DHA service area of DuPage County.

Category Seven: Homeless Preference

Proving the Homeless Preference is the most difficult preference to prove. Though it is not required, it is highly recommended that homeless persons seek assistance from social service agencies or other public or private organizations or providers of supportive services for homeless persons. Your eligibility for any Homeless Preference chosen can then be supported by documentation from that agency or organization.

We look forward to continued collaboration with the DuPage County Continuum of Care.

Sincerely,

Cheron Corbett, Executive Director ccorbett@dupagehousing.org



PHA MOVING ON PREFERENCE

DuPage Housing Authority letter on Move On preference



www.DuPageHousing.org

August 9, 2023

Mary A. Keating, Director DuPage County Community Services 421 N. County Farm Road Wheaton, IL 60187

Dear Mary Keating,

This letter is to affirm the partnership of the DuPage Housing Authority (DHA) with the DuPage County Continuum of Care (DC CoC).

In 2020, the DHA was initially awarded 60 HCV Mainstream Vouchers (aka Moving On); and during fall of 2020 an additional 18 vouchers were issued from HUD.

HCV Mainstream Voucher Program

Commonly referred to as *Mainstream Program, Mainstream Vouchers* or *Mainstream* – (also formerly known as *Mainstream 5-Year Vouchers* and *Section 811 Vouchers*) are tenant-based vouchers. These vouchers serve a special population of households of non-elderly persons with disabilities (defined as a household composed of one or more persons 18 to 61 years of age with disabilities, which may include additional household members who are not non-elderly persons with disabilities), with a preference for those who:

- are currently homeless;
- have previously experienced homelessness and currently a client in a permanent supportive housing or rapid rehousing project; or
- are individuals who are transitioning out of institutional or other segregated settings.

This program helps to further the goals of the *Americans with Disabilities Act* by helping persons with disabilities live in the most integrated setting. The program also encourages partnerships with health and human service agencies with a demonstrated capacity to coordinate voluntary services and supports to enable individuals to live independently in the community.

Move On Project Partnership

The *Move On Project* is a collaborative partnership between the DuPage Housing Authority (DHA) and partner agencies who are members of the DuPage Continuum of Care (CoC), to help households transition into a Housing Choice Voucher (HCV) as they continue efforts to reach self-sufficiency.

Households for this project are generally DuPage CoC partner agency clients, enrolled in a *Permanent Supportive Housing* (PSH) and/or a *Rapid Rehousing Program* (RRH)



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but also can include qualifying households identified from the *Coordinated Entry System* (CES).

Continuum of Care Referrals

The *Move On Project* will allow DHA's CoC partners to refer households currently in their Permanent Supportive Housing (PSH) and/or Rapid Rehousing Programs (RRP), and who are ready to "move on" to maintain housing stability under the voucher program, which they achieved by intensive supportive services with a social service agency.

Households identified on the *Coordinated Entry System* (CES) who meet the minimum Mainstream qualifications may also be referred for the *Move On Project*. Note that CES households may not continually be receiving services from a CoC agency, but they have been initially assessed and found eligible to be referred.

DHA Policy

Whenever DHA opens the general HCV waiting list for new applications, or *specifically* opens the HCV waiting list to accept targeted applications with Mainstream preferences, referrals can be made on the household's behalf through the DuPage Continuum of Care agencies – including CES referrals from the DuPage County Community Services' HMIS Department.

Referral Submission

<u>Initial referrals to seed the waiting list (Implemented Mainstream in January 2020)</u> Once a *Move On Project* applicant has been identified, the completed referral will be submitted to DHA for processing and adding applicant to the HCV waiting list with targeted preferences designated for the Mainstream HCV Program.

Preferences will be given for those *initial* referral households that:

- are currently homeless 1 point;
- have previously experienced homelessness and currently a client in a permanent supportive housing or rapid rehousing project and referred to DHA through the DuPage Continuum of Care (CoC) – 10 points; or
- are referred to DHA through the DuPage CoC who are transitioning out of institutional or other segregated settings – 10 points

<u>Ongoing referrals after waiting list is seeded (Mainstream WL opened on 5/4/2021)</u> Once a Move On Project applicant has been identified, the completed referral will be submitted to DHA for processing and adding applicant to the HCV waiting list with targeted preferences designated for the Mainstream HCV Program.



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Preferences will be given for those households that:

- are currently homeless 1 point;
- have previously experienced homelessness and currently a client in a permanent supportive housing or rapid rehousing project and referred to DHA through the DuPage Continuum of Care (CoC) – 1 point; or
- are referred to DHA through the DuPage CoC who are transitioning out of institutional or other segregated settings – 1 point

In all cases, the applicant is provided information on how to create an online account to select additional preferences they may qualify for, and to complete the online preapplication and any other documents as required to be added on to the HCV waiting list.

We look forward to continued collaboration with the DuPage County Continuum of Care on this new initiative and serving those in the DuPage community who are at the low-mid income level.

Sincerely,

Cheron Corbett, Executive Director ccorbett@dupagehousing.org



LETTER SIGNED BY WORKING GROUP

Letter signed by member of CoC Board with lived experience



August 10, 2023

Ms. Mary Keating, Director DuPage County Community Services 421 N. County Farm Road Wheaton, IL 60187

Dear Ms. Keating,

This letter is to verify my support for the DuPage CoC IL 514 priorities for serving individuals and families experiencing homelessness with severe service needs in the CoC's geographic area.

I am the member of the CoC Board representing persons with lived experience and have held this position for the last 7 years. As a voting member, I am involved in the decision making process.

I can verify the following:

- Individuals with lived experience of homelessness participate in CoC committees, subcommittees, focus groups, or workgroups;
- The CoC has members which employ individuals with lived experience of homelessness;
- Minutes from CoC or CoC Subcommittee meetings show persons with lived experience are involved in decision-making;
- Individuals with lived experience of homelessness are included in the revision and approval of the local competition ranking and scoring criteria for projects;
- Individuals with lived experience of homelessness are included in the recommendation and prioritization of projects for funding.

Thank you.

Bob Adams Co-Founder Midwest Shelter for Homeless Veterans Member DuPage County CoC Leadership Committee



HOUSING FIRST EVALUATION

SHIFT renewal project evaluation of Housing First

2023 Housing First Compliance - SHIFT Renewal PSH project

1. Housing First/Low Barrier. Project participants are NOT terminated for:

Check all that apply to show this project's commitment to utilizing a Housing First approach. (1 point per each criterion met up to a maximum of 5 points).

- ✓ Failure to participate in support services
- ✓ Failure to make progress on a service plan
- ✓ Loss of income
- ✓ Being a victim of domestic violence
- \checkmark Any other activity not included in a typical lease agreement
 - o None

2. Referring to the housing first self-assessment in the reference library, describe how your program uses and maintains a Housing First model. Include examples of how your project will address barriers of those with criminal histories in accessing housing. (e.g., landlord engagement, partnerships/collaborations with reentry providers, etc.)

(Maximum 3 points possible) Refer to the Housing First Assessment document link. Maximum characters: 1500. You have 1500 characters left.

SHIFT is guided by the principle that everyone is "housing ready" and helps households access housing as quickly as possible without preconditions. The Project does not exclude individuals with criminal backgrounds, who lack a valid driver's license and/or vehicle, have significant debt or a oor/inconsistent work history. Clients are not required to participate in supportive services as a condition of their tenancy. Case managers utilize Harm Reduction, Strengths Based Practice, client-centered counseling, Trauma Informed Care and Motivational Interviewing while offering supportive services to maximize housing stability and prevent returns to homelessness. The Project adheres to the CoC's Coordinated Entry System Policy to prioritize those with greatest length of time homeless and highest level of need. A client driven service approach is utilized where clients have choice in housing, engagement in services and developing their own service plans so they can meet their basic needs with choice and dignity. Rather than moving towards eviction proceedings due to unpaid rent, the project allows tenants to enter into payment installment plans for rent arrearages, provides money management support and an eviction prevention plan. Staff advocate and are liaisons between participants and landlords ensuring families secure and maintain equitable housing. Landlords are engaged and incentivized to expand Housing inventory and increase housing options for the most vulnerable populations, including those with criminal backgrounds. The employment counselor assists with criminal record expungements, allowing clients who were unable to pass landlords' background checks to be eligible for a variety of housing options. The Housing Project Manager and Housing Navigator maintain an apartment database to effectively and efficiently match clients and landlords and work to acquire new landlords who are willing to work with participants' criminal backgrounds.

EVALUATION

HOUSING FIRST CRITERIA	Actual Points	Max Points
1. Project meets all HUD criteria, including persons are not	5	5
terminated for:	5	J
a) failure to participate in support services, b) failure to make		
progress on a service plan, c) loss of or no income, d) being a		
victim of domestic violence, or e) any other activity not included in a typical lease agreement.		
2. Agency provides general explanation of their Housing First	3	3
approach, lowering barriers, and address housing for persons		
hardest to serve, including those with justice involved history		



LOCAL COMPETITION DEADLINE

Notification Memo with deadline dates Screenshot of posting of deadline dates



TO: DUPAGE IL 514 HOMELESS CONTINUUM MEMBERS and STAKEHOLDERS

FROM: DUPAGE COUNTY COMMUNITY SERVICES, Collaborative Applicant

RE: 2023 Continuum of Care NOFO NOTIFICATION OF LOCAL COMPETITION

DATE: July 24, 2023

HUD published the FY2023 Continuum of Care (CoC) Funding Notice for Homeless Assistance Grants on July 5, 2023. Approximately \$3.13 billion is available. Of this, \$52 million is available for Domestic Violence bonus projects. The Notice of Funding Opportunity (NOFO) for the Fiscal Year (FY) 2023 Continuum of Care (CoC) Program Competition (NOFO) has been posted on <u>Grants.gov</u> and is available on the <u>Funding Opportunities</u> page on HUD's website. Additional resources are available on the <u>Continuum of Care Program Competition</u> page of HUD's website between July 5-31, 2023. The CoC Consolidated Application, CoC Priority Listing, and Project Applications will be available in <u>e-snaps</u>. Collaborative Applicants and project applicants will access the applications to review, update, and enter required information for the application process. Additional guidance is posted on the <u>CoC Program</u> <u>Competition</u> page of HUD's website. The HUD deadline date is September 28, 2023.

DUPAGE COC DEADLINES

August 9, 2023 – Renewal projects will submit a CoC project template for evaluation. August 25, 2023 – New projects will submit a CoC project template for evaluation. August 29, 2023 – The DuPage CoC Local Competition is complete. Each project application must be submitted in *e-snaps* for final CoC review. September 13, 2023 – Each project applicant is notified in writing if their project is accepted, rejected, or reduced on the CoC Project Priority Listing.

Esnaps submission of projects may be no later than 30 days before the HUD deadline of 9/28/23. The DuPage CoC will notify all project applicants no later than 15 days before the application deadline of September 28, 2023 whether their project application will be accepted and ranked, rejected or reduced as part of the CoC Consolidated application and of their number ranking. Project application deadlines and materials will be posted on <u>www.dupagehomeless.org</u>.

Project submission instructions for esnaps will be reviewed at a virtual **APPLICATION WORKSHOP** scheduled for August 9, 2023 from 1:30 pm. – 2:30 pm. This is a Zoom meeting. Advance registration is required. The registration link is below: https://us02web.zoom.us/meeting/register/tZYsdO-rrj0qG9PiELdjPqrU2Iv2F513jgKs

After registering, you will receive a confirmation email containing information about joining the meeting.

FUNDING AMOUNTS

ANNUAL RENEWAL DEMAND (ARD) –The total amount for all projects eligible for renewal in the 2023 competition based on the HUD approved Grants Inventory Worksheet. The DuPage CoC Annual Renewal Demand (ARD) amount approved was **\$6,258,634**.

NEW PROJECTS

New Projects include expansion of existing renewal projects. New projects may be created through the reallocation process, bonus funds, or a combination of reallocation and bonus funds. Reallocation and bonus funds may be combined to funds new projects. There is an amount allocated to each CoC for bonus projects that is equal to 7% of the Final Pro Rata Need. **This amount is \$438,104. Multiple projects are allowed.** All New project applications <u>are</u> included in the project tiering except Planning.

5 types of new projects are allowed:

- Permanent supportive housing that serve chronically homeless or eligible under the Dedicated PLUS definition. See NOFO p. 55
- Rapid Rehousing projects that serve households who meet the homeless definition categories of 1,2 or 4. See NOFO p.55
- Joint TH and PH-RRH component project that serve households who meet the homeless definition categories of 1,2 or 4.– See NOFO p.56
- Dedicated HMIS (only by the current HMIS Lead). See NOFO p. 57
- Coordinated Entry (supportive services only) to develop or operate a coordinated entry system. See NOFO p. 57

NEW PROJECTS CREATED THROUGH DOMESTIC VIOLENCE BONUS FUNDS

There is an additional amount allocated to each CoC for projects dedicated to victims of domestic violence. This amount is estimated to be **\$366,103**. Projects must serve survivors of domestic violence, dating violence, and stalking. The eligible population is survivors of domestic violence who are defined as homeless at 24CFR 578.3 (4). All DV projects must be for a grant term of 1 year. These projects will be selected by HUD based on CoC Score plus other criterion noted in NOFA p.28 using a 100 point scale. CoCs may create any of the following project types if the amount is at least \$50,000:

- Rapid Rehousing (PH-RRH);
- Joint Transitional Housing and Rapid Rehousing (Joint TH-RRH)
- Supportive Services Only-Coordinated Entry (SSO-CE) that targets victims of domestic violence. (Only one Coordinated Entry application is allowed).

NOTE: Expansion of any existing RRH or Joint TH-RRH renewal that is non-DV will qualify as a new DV bonus if it exclusively serves DV persons.

COC PLANNING COSTS – Eligible costs are related to the collaborative process for an application to HUD, evaluating the outcomes of projects, and participating in the jurisdiction's consolidated planning process. The total amount available for this year is **\$312,932**.

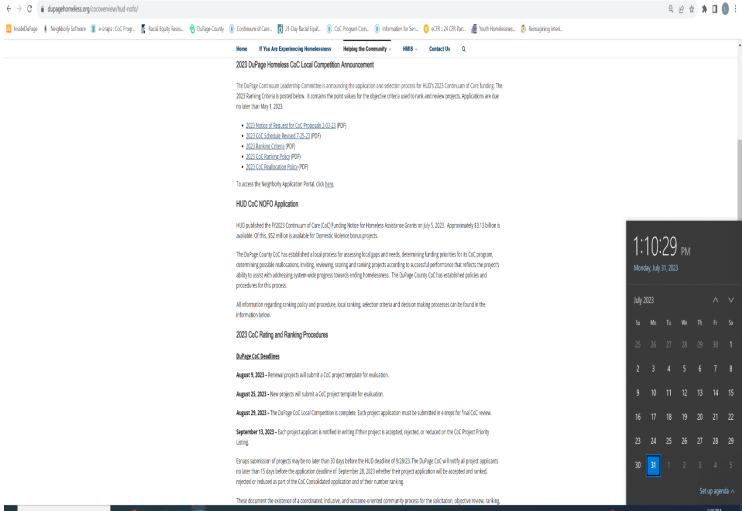
PROJECT TIERING - The CoC will submit a Priority Listing that lists the new and renewal projects that are being applied for. All projects that are approved for inclusion will be prioritized in a two tier approach. The tiers are financial thresholds. Tier 1 is 93% of the Annual Renewal Demand for current projects. Tier 2 is the difference between Tier 1 and the maximum amount of renewal, reallocation and bonus funds available (excluding the DV bonus amount). The Planning project is excluded from tiering.

Tier 2 project-level scoring remains the same with 3 criteria – CoC Application score, ranked position of the project application in Tier 2, and the project application's commitment to Housing First. Up to 50 pts CoC Score + 40 pts Rank number in Tier 2 + 10 pts. Housing First project.

HIGHLIGHTS IN 2023!

- CoC Planning grants have increased from 3% to 5% of the Final Pro Rata Need.
- Bonus projects funds are 7% of the CoC Annual Renewal Amount.
- HUD continues to provide opportunities to expand or consolidate CoC projects. Expansions submit a standalone renewal application and a standalone new project application. Consolidations submit 2 individual stand alone renewal project applications.
- CoCs are required to have leveraging agreements with housing providers and health care organizations for at least one new project.
- The DV bonus project point scoring remains the same as last year.
- There is a change in the homeless definition for Category 4 which allows for any person who is experiencing trauma or a lack of safety, not just fleeing to be eligible for services.
- Coordinated Entry requires safety planning and confidentiality protocols.
- DV Survivors with lived experience are involved in CoC policy development.
- CoCs need a letter from persons with lived experience showing support for priorities.
- A rating factor on engaging local leaders to increase the affordable housing supply.

Questions regarding the FY 2023 CoC Program Competition process must be submitted to <u>CoCNOFO@hud.gov</u>. Questions related to *e-snaps* functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to <u>e-snaps@hud.gov</u>.



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LOCAL COMPETITION SCORING TOOL

Ranking Criteria

Project Performance Evaluation

Business Plan

Cost Forms

2023 CoC Ranking Criteria



Priorities	Criteria	Maximum Points
See question C.2. The severity of Needs/Barriers experienced by program participants in order to serve those withthe highest needs.	 Project serves: Chronically homeless LGBTQ+ persons Youth Veterans Low or no income Current substance abuse, significant health or behavioral health challenges, or functional impairments Coming from the streets Criminal history Abuse/victimization or a history of victimization/abuse, Domestic Violence, Sexual Assault, Childhood Abuse, sex trafficking High utilization of crisis or emergency services to meet basic needs Length of time homeless Risk of continued homelessness Risk of illness or death Only project of its kind in the CoC geography 	10 (1 point for each population served up to 10 pts maximum)
See question C.3. Project has committed to utilizing a Housing First/Low Barrier approach.	 Project meets all HUD criteria, including persons are not terminated for: a) failure to participate in support services, b) failure to make progress on a service plan, c) loss of or no income, d) being a victim of domestic violence, or e) any other activity not included in a typical lease agreement. 	5 (1 point for each criteria met)
See question C.4. Organization demonstrates understanding and implementation of Housing First/Low Barrier approach. NAEH Housing First Self- Assessment Tool added to the Reference Library	Applicant provides general explanation of their Housing First approach, lowering barriers, and address housing for persons hardest to serve, including those with justice involved history.	Up to 3 points



2023 CoC Ranking Criteria

See question C.5. Ensures that the project assists participants to the maximum extent in obtaining mainstream benefits.	 Project provides transportation assistance to appointments Use of a single application form for 4 or more benefits Annual follow-ups to ensure benefits are received and renewed Helps participants applying for SSI/SSDI and get the technical assistance they need Has a staff person who has completed SOAR training 	5 1 point for each criteria met (up to 5 points possible)
See question C.6. Monitor the capacity of the project to operate with full unit utilization.	Give the project's average unit occupancy rate over the past operating year.	5 5 points if unit occupancy was 95% or over 4 points if unit occupancy was between 90 – 94% 3 points if unit occupancy was between 80 – 89% 0 points if unit occupancy was less than 79%
See questions C.7. & C.8. Meets CoC System Performance goals of housing stability and income.	 a) Measurable outcomes of the project meet these HUD housing stability goals: 80% of participants remaining in Permanent Supportive Housing or exiting to another permanent housing destination or exiting transitional housing to a permanent housing destination: FOR RENEWALS ONLY (10 points) b) Measurable outcomes of the project meet these HUD income goals: 50% of participants (leavers and stayers) meeting employment income OR total income measures: FOR RENEWALS ONLY (10 points) 	20 a) 10 points if at least 80%, 5 points if at least 65%, 0 points if below 65% b) 10 points if at least 50%, 5 points if at least 25%, 0 points if under 25%



See Question C.9. Timely draw down of funds. At minimum funds must be drawn on a quarterly basis.	4 points = demonstrates draw down of funds on at least a quarterly basis	4
See question D.1. Monitor the amount of funds unspent from each renewal project for possible reallocation to new beds in order to utilize all CoC funds most effectively.	Indicate the percentage and amount of funds that were unspent. 5 points if 0 – 5% are unspent 4 points if 5.1 – 10 % are unspent 2 points if 10.1 – 15% are unspent 0 points if 15.1% or more are unspent	Up to 5 points
See question D.2. Monitor the capacity of the project to meet HUD reporting requirements.	Timely submission of the project Annual Progress Report (APR) for the last operating year in Sage on or before the due date. 5 pts no APR 0 pts.	5
See question D.3. Applicant follows McKinney-Vento laws regarding education of homeless students.	 1 point = Agency has a dedicated staff person to coordinate linkages to services for homeless students. 1 point = Agency has developed policies and procedures. 1 point = Agency has adopted policies and procedures through Board Action. 1 point = Agency has written agreement(s) with agencies serving infants, toddlers and preschool children (i.e. MOU w/Head Start program) 	4 (1 point for each criteria met)
See question D.4. and UPLOADED COST FORMS. Funding request is appropriate to scope/size of proposed project.	5 points = Includes an acceptable budget in sufficient detail, costs are adequately tied to project activities, all costs are justified and reasonable	Up to 6 points
See information below and review UPLOADED COST FORMS. Applicant organization demonstrates it has funding request appropriate to scope and size of the proposed project and has identified sources of non-federal 25% cash match.	1 point = Meet minimum requirement of having 25% match with identified sources of non-federal cash match in appropriate amount/s.	



See question D.5. Made program modifications when appropriate, to best serve its participants. See question D.6. New Projects. Coordination with Housing and Healthcare.	 Agency adequately describes qualitative and quantitative evidence which demonstrated either the strength of the existing program or the need for improvements, change, or no changes. 25% of units for PSH or participants for RRH that are not funded by the CoC or ESG – (5 pts) 25% of total request in leveraging from a healthcare provider OR 100% access to substance abuse treatment service for project participants – (5 pts) Specific action steps are listed to achieve project goals; demonstrates staffing is available and realistic (5 pts) 	2 Up to 15 points
See questions D.7. – D.9. Diversity, Equity and Inclusion Proposed project ensures that persons of all races, ethnicities, gender identities, sexual orientations, and abilities have equal opportunity and access to the project. HUD Final Rule on Equal Access added to the Reference Library.	 Demonstrated process used to ensure persons of persons of all races, ethnicities, gender identities, sexual orientations, and abilities have equal opportunity and access to the project. (1 pt) Degree to which the project has taken steps taken to identify and resolve racial barriers. Improve racial equity in the provision and outcome of services. (1 pt) Provided appropriate explanation of changes made to improve service delivery to culturally diverse populations. (1 pt) Provided Cultural Competency Training or educational instruction to agency leadership, staff or board to build awareness, knowledge and skills related to cultural difference. (1 pt) How do you involve individuals with lived experience in 1) service delivery and 2) decision making processes? (2 pts) 	6 (Up to 6 pts maximum)
See Questions E.1. and E.2 Applicant has demonstrated capacity to achieve proposed project goals and verified use of best practices through a third party review.	 2 points Application process Financial and organizational review OR program review End result is funding, licensure, 	5 (Up to 5 points possible)



 certification, or accreditation for a specific time period. 3 points Application process Financial and organizational review, site visit, program review – (Has 2 of these 3 items) End result is funding, licensure, certification, or accreditation for a specific time period 5 points (MUST include all 4 items) Application process Financial and organizational review, site visit Program review End result is funding, licensure, certification, or accreditation for a specific time period 5 points (MUST include all 4 items) Application process Financial and organizational review, site visit Program review End result is funding, licensure, certification, or accreditation for a specific time period Active and regular participation in Continuum committee meetings: 1 point = Active in one committee 2 points = Active in two committees 3 points = Active in three or more committees And / Or: 2 points = Agency has employed a Committee Chairperson in the past twelve months with regular and active participation and/or a staff member with active participation in special CoC projects, subcommittees, task forces, etc. with chairperson recommendation. 	5 (Up to 5 points possible)
5 points = Contributes consistent and quality data containing the Minimum Data Elements and Program specific data elements for all clients served. At least 50% of agency end users have been certified. Agency has	5 (Up to 5 points possible)
	 specific time period. 3 points Application process Financial and organizational review, site visit, program review – (Has 2 of these 3 items) End result is funding, licensure, certification, or accreditation for a specific time period 5 points (MUST include all 4 items) Application process Financial and organizational review, site visit Program review End result is funding, licensure, certification, or accreditation for a specific time period 7 Program review End result is funding, licensure, certification, or accreditation for a specific time period Active and regular participation in Continuum committee meetings: 1 point = Active in one committee 2 points = Active in two committees 3 points = Active in three or more committees And / Or: 2 points = Agency has employed a Committee Chairperson in the past twelve months with regular and active participation and/or a staff member with active participation in special CoC projects, subcommittees, task forces, etc. with chairperson recommendation. 5 points = Contributes consistent and quality data containing the Minimum Data Elements and Program specific data elements for all clients served. At least 50% of agency end



	 monitoring visit. Agency Data Administrator attends all mandatory training sessions and meetings. 3 points = Contributes consistent and high- quality data containing the Minimum Data Elements and Program specific data elements for all clients served or domestic violence service provider that has demonstrated utilization of comparable data base. 1 point = Contributes data but is not of sufficient quality to meet standards. 0 points = Domestic violence service provider that cannot demonstrate utilization of comparable data base. 	
See Questions E.3.c - Applicant participates in CoC Street Count planning and implementation during years when CoC Biennial Point in Time Street Count activity takes place. CONTINUUM STREET COUNT COMMITTEE WILL PROVIDE THIS SCORE.	5 points = One decision maker staff or their delegate staff participates in each planning meeting. Agency provides a minimum of one team (2+ persons) to participate on the night of the count. Two meetings (Nov/Dec) One training (Jan) Night of the Count (Jan)	5 (Up to 5 points possible)
See Question F.1. Applicant has demonstrated the need for this project targeted to survivors of domestic violence who meet the definition of homeless. Need must use data from HMIS or a comparable database that meets HMIS standards. THIS IS FOR DOMESTIC VIOLENCE PROJECTS ONLY.	 <u>2</u> points = Agency has data to quantify the need for this project within the CoC from a database comparable to or using HMIS. <u>3</u> points = Agency has demonstrated the extent of need for this project within the CoC, identified gaps within the system, and how this project will fill this gap. 	5 (Up to 5 points possible)
See Question F.2. Project involves survivors with a range of lived expertise in policy and program development throughout the project's operation. THIS IS FOR DOMESTIC VIOLENCE PROJECTS ONLY.	5 points – Agency adequately describes how the project involves survivors with a range of lived expertise in policy and program development throughout the project's operation.	5 (Up to 5 points possible)



Total Score Max Available - Renewal Projects	
100	
Total Score Max Available - New Projects	
69	
Total Score Max Available - Renewal DV	
Projects 79	
Total Score Max Available - New DV Projects	
110	



2023 Project Performance Evaluation

B. 1. Project Type

Select one.

- o HMIS
- o Joint Transitional and Rapid Rehousing
- Permanent Supportive Housing
- Rapid Re-housing
- Coordinated Entry Supportive SSO
- Supportive Services Only
- Transitional Housing

B.2. Project Amount: \$_____

B.3. Start Date of Current Grant Year

If you have an award but have not yet started, indicate 'N/A' Start Date:_____

B.4. Expiring HUD Grant Number

If you have an award but have not yet started, indicate 'N/A' Expiring HUD Grant Number:

B.5. This project is a:

Select one.

- o Renewal awarded, does not have HUD start date (i.e. executed grant agreement)
- Renewal in first operating year
- Renewal-no changes proposed
- Renewal-changes proposed
- New project-Agency has received CoC funding within the last three years
- New project-Agency has not received CoC funding within the last three years

B.6. Please provide a brief description of your project. Include information about the type of assistance and housing you plan on providing or have been providing. Maximum characters: 2000. You have 2000 characters left.

B.7. Performance Thresholds.

- a. Please check all that apply **based on the most recent APR or your agency records.** To calculate income measures in Sage, please use documentation in Reference Library.
 - Most recent APR shows average utilization rate of units below 90%.
 - The project had unspent HUD funds in the last completed operating year.
 Most recent APR shows fewer than 80% of leavers exiting to permanent housing
 - Most recent APR shows fewer than 50% of participants (leavers and stayers) meeting employment income OR total income measures
 - The project did not make at least 4 quarterly drawdowns in the last operating year.
 - Applicant agency had significant managerial changes or lost key personnel in last year.
 - There have been significant program changes in the last year.
 - $\circ \quad \text{None of the above} \\$

B.8. Please check all that apply if no APR has been required/completed yet.

- Project awarded, does not have HUD start date.
- Project in its first operating year.

ONLY for projects in their first operating year, please complete the following:

Enter N/A for all other projects.

Project Utilization

Utilization Rates	Total number of Households/Units from application	Total number of household's served since opening on (enter start date here) 00/00/0000	What is the project's plan for 100% utilization?
Households Without			
Children			
Households with Children			

Financial Performance

Financial	Dates of draw	Amount of funds	% Of total HUD award
Performance	downs from	spent from start date	spent from start date
year to date	start date		

a. If you wish to enter additional information on the above, please do so here.

B.9. Tell us about your project capacity

Information is from Screen 5A esnaps project submission or APR Q2 "As proposed in the project application" **Project Capacity**

Project Capacity	Total Units in Project	Total Beds in Project
Households Without Childre	۱	
Households with Children		

B.10. For all renewals that have completed an operating year, tell us about your persons served. Information is from APR Q5

Persons Served

Total Person Served in Last Operating Year	
Number of Leavers in Last Operating Year	
Number of Stayers in Last Operating Year	

B.11. Has HUD or another entity monitored this CoC project within the last 12 months?Select one.

nonths?Select one.

- Yes
- **No**

B.12. If your agency has had any reporting, monitoring, or billing deficiencies related to this CoC project, please provide an update.

Select one.

- No concerns and no findings
- Yes, concerns or findings that have since been resolved
- Yes, concerns or findings that the agency is currently working to resolve
- N/A no entity has monitored our agency or project

B.13. If you answered "Yes" to question 10, please provide a brief outcome of the monitoring and/or explain any deficiency or finding. Please include your agency's resolution or plan for resolution, including dates if applicable.

B.14. Describe your agency's policy which addresses affirmatively furthering fair housing, anti-discrimination, and equal access in accordance with an individual's gender identity. Maximum characters: 2500. You have 2500 characters left.



2023 Business Plan

Compliance

C.1. Is the project description the same as submitted in the PPE? If not, please describe the changes to the project below, and what factors necessitated the change (this question is not scored) Maximum characters: 1500. You have 1500 characters left

C.2. High Need Populations Served: In the past year, which HUD defined populations have been servedby this project?

Check all that apply to indicate your project's commitment to serving those with the highest needs. New Projects, please indicate this project's target populations. (1 point for each population served up to a maximum of 10 points).

- Chronically homeless persons
- LGBTQ+ persons
- o Youth
- o Veterans
- Low or no income persons
- o Current substance abuse, significant health or behavioral health challenges, or functional impairments
- Coming from the streets
- Criminal history
- Abuse/victimization or a history of victimization/abuse, Domestic Violence, sexual assault, childhood abuse, sex trafficking
- o High utilization of crisis or emergency services to meet basic needs
- Length of time homeless
- Risk of continued homelessness
- Risk of illness or death
- Only project of its kind in the CoC geography
- o None

C.3. Housing First/Low Barrier. Project participants are NOT terminated for:

Check all that apply to show this project's commitment to utilizing a Housing First approach. (1 point per each criterion met up to a maximum of 5 points).

- Failure to participate in support services
- Failure to make progress on a service plan
- Loss of income
- Being a victim of domestic violence
- Any other activity not included in a typical lease agreement
- o None

C.4. Referring to the housing first self-assessment in the reference library, describe how your program uses and maintains a Housing First model. Include examples of how your project will address barriers of those with criminal histories in accessing housing. (e.g., landlord engagement, partnerships/collaborations with reentry providers, etc.)

(Maximum 3 points possible) Refer to the Housing First Assessment document link. Maximum characters: 1500. You have 1500 characters left.

C.5. Mainstream Benefits. Which of the following methods do you employ to help participants secure mainstreambenefits?

Check all that apply. (1 point for each criterion met up to 5 points maximum).

- Project provides transportation assistance to appointments
- Use of a single application form for 4 or more benefits
- Annual follow-ups to ensure benefits are received and renewed
- o Helping participants applying for SSI/SSDI get the technical assistance they need
- Having a staff person who has completed SOAR training
- o None

C.6. Average Unit Utilization. What was the project's average unit occupancy rate in the most recent APR?

(Up to 5 points possible).

- 95% or over (5 points)
- 90% to 94.9% (4 points)
- o 80% to 89.9% (3 points)
- Less than 80% (0 points)
- New project proposed no data available (0 points)
- Project is in first operating year (0 points)
- Renewal, awarded with no HUD start date (0 points)

C.7. HUD Housing Stability Goals: PSH = 80% participants remain or exit to other permanent housing, or TH = 80% leavers exit to permanent housing. Referring to this project's most recent completed APR, participants met the following:

Calculate: PSH Total stayers (Q05a) + total who exited to PH (Q23a)/Total persons served (Q05a) TH=Total who exited to PH (Sage 23a+23b)/Total Leavers (Sage 05a). (Maximum 10 points possible).

- \circ Met goal of 80% remaining or exiting to permanent housing destination 10 points
- Had at least 65% remaining or exiting to permanent housing destination 5 points
- Had less than 65% remaining or exiting to permanent housing destination 0 points
- New project proposed or no data available for bed occupancy rate 0 points
- Project has not completed first operating year 0 points
- Renewal, awarded with no HUD start date 0 points

C.8. HUD income goals are that 50% of participants (leavers and stayers) meet employment income OR total income measures. Referring to this project's most recent completed APR, participants (both leavers and stayers) met the following:

Refer to your most recent completed APR (Q18), (Q19a3) (Maximum 10 points possible).

- At least 50% met employment income OR total income measures 10 points
- At least 25% met employment income OR total income measures 5 points
- Less than 25% met employment income OR total income measures 0 points
- New project proposed or no data available for income goals 0 points
- $\circ \quad \ \ \text{Project has not completed first operating year-0 points}$
- $\circ~$ Renewal, awarded with no HUD start date 0 points

C.9. Timely drawdown of HUD Funds. Funds must be drawn on a minimum quarterly basis. If your project is arenewal, please enter drawdown dates from last project year. (Maximum 4 points possible).

Drawdown date for Quarter 1 Drawdown date for Quarter 2 Drawdown date for Quarter 3 Drawdown date for Quarter 4

_____Renewal, awarded with no HUD start date – 0 points

D.1. Were HUD funds unspent from this project in the last operating year? *State the unspent amount as a percentage of this project's total HUD award. If funds were unspent, please also*

add the total dollar amount.(0 – 5 % unspent (5 points), 5.1 - 10% or less of funds unspent (4 points), 10.1 - 15% or less of funds unspent (2 points), 15.1% or more of funds unspent (0 points)

- _____Total HUD Award
- _____Total Dollar amount unspent

_____Percentage of HUD Award unspent

- _____New Project Proposed (N/A)
- Project is in its first operating year

D.2. HUD Reporting Requirements - Annual Progress Report (APR) for last operating year

Check all that apply. If your project has not yet completed its first operating year. (Maximum 5 points possible).

- APR submitted on time 5 points
- APR submitted after due date 0 points
- New project proposed 0 points
- Project is in its first operating year 0 points
- Renewal, awarded with no HUD start date 0 points

D.3. Compliance with McKinney-Vento laws regarding education of homeless students.

Please check all that apply. (Maximum 4 points possible).

- Agency has a dedicated staff person to coordinate linkages to services for homeless students(1 point)
- Agency has policies and procedures around this requirement (1 point)
- Agency has adopted policies and procedures **through** board action (1 point)
- If serving children, there are written agreements with agencies serving infants, toddlers and pre-school children (1 point)
- o Not Applicable

CoC Project Questions

D.4. Upload completed 2023 COST FORMS (see Required Documents). Cost Form must show a funding request, appropriate to scope/size of project, with sufficient detail indicating reasonable, justified costs to program activities and 25% non-federal cash match.

Select one. (Maximum 6 points possible; up to 5 points possible for cost forms and 1 point possible for cash match).

- This project has a minimum 25% cash match.
- This project has insufficient cash match

D.5. Program modifications: Have you made modifications to this project in the last year? What qualitative orquantitative evidence indicated a need for modifications or indicated the strength of the project if you did not make modifications?

If this is a proposed new project, or a HUD project awarded without a start date, please state N/A. (Maximum 2 points possible). Maximum characters: 1500. You have 1500 characters left.

D.6. NEW Projects – Coordination with Housing and Healthcare a) Indicate housing leveraging resources (25% of units for PSH or participants for RRH that are not funded by the CoC or ESG – 5

pts); b) Indicate how 25% of total requests in healthcare leveraging resources are coming from a healthcare provider OR how 100% access to substance abuse treatment service will be provided for project participants – (5 pts); c) Provide the timetable established to achieve proposed project goals and discuss how the project will be staffed? – (5 pts).

Please respond to each part of the question. Please describe and quantify the amount of leveraging you expect to receive in each category. (Maximum 15 points possible 5 points for each question). If renewal, please state N/A.Maximum characters: 2000. You have 2000 characters left.

Diversity, Equity and Inclusion

Please describe efforts and strategies to broaden the inclusivity of your organization to ensure nondiscrimination and equal access to persons regardless of race, culture, ethnicity, gender identity, sexual orientation, disability or language.

D.7. Describe the process used to ensure persons of persons of all races, ethnicities, gender identities, sexual orientations, and abilities have equal opportunity and access to the project. Degree to which the project has taken steps taken to identify and resolve racial barriers, improve racial equity in the provision and outcome of services. *Please respond to each statement. (Maximum 2 points possible, 1 point per statement)* Maximum characters: 1500.

D.8. Provide an explanation of changes made within your organization to improve service delivery to culturally diverse populations. Identify dates of Cultural Competency training or educational instruction to agency leadership, staff or board provided to build awareness, knowledge and skills related to cultural difference.

Please respond to each statement. (Maximum 2 points possible, 1 point per statement). Maximum characters: 1500.

D.9. Describe how your agency engages persons with lived experience. How do you involve individuals with Lived Experience of Homelessness in Service Delivery and Decision making processes. (*Maximum 2 points possible*). Maximum characters:1500.

Organization's Demonstrated Capacity

E.1. What other organization(s) review and verify the practices of your organization? What kind of application or process initiated your relationship with this reviewing entity? Answer N/A if no other organization(s) review and verify your practices.

Reviewing organizations cannot include DuPage County, U.S. Dept. of Housing & Urban Development (HUD) or theagency auditor. Maximum characters: 1500. You have 1500 characters left.

E.2. What types of reviews were completed by the organization(s) listed in Question 19 and what were the results of those reviews? *Check all that apply. See "Required Documents" tab. UPLOAD REQUIRED FOR FUNDING LETTER, CERTIFICATION, OR ACCREDITATION DOCUMENT.* (Scored with E1. for a maximum 5 points possible - scoring matrix for this question in the Ranking Criteria in the Reference Library).

- Application Process
- Financial and organizational review of the agency
- $\circ \quad \ \ \, \text{Program review of the agency}$

- o Site visit
- o Result was funding, certification, licensure, or accreditation (upload documentation)
- Not applicable

E.3. How does your agency actively participate in the Continuum of Care?

Please check all that apply Points will be awarded based on input from appropriate Continuum Committees Chairsand HMIS team. (Up to 15 maximum points possible; see 2023 CoC Ranking Criteria).

- Active and regular participation in one CoC committee
- Active and regular participation in two CoC committees
- Active and regular participation in more than two CoC Committees
- o Agency staff member has been Committee Chairperson within last year
- Agency staff member has participated in special CoC projects, subcommittees, etc.
- o Participation in HMIS (meets the expectations as outlined in Ranking Criteria)
- o Domestic Violence Service Provider UTILIZING an HMIS comparable data base
- Agency participation in Street Count (see Ranking criteria)
- Not Applicable

E.4. If any of your previous answers require more detail, or if there is something else you would like to state about the project, please do so. Otherwise, please state "N/A."

Maximum characters: 2000. You have 2000 characters left.

Domestic Violence (for DV Projects Only)

Is this a Domestic Violence Project? If yes, please answer the questions below:

F.1. Describe how agency collects information to determine need for homeless services for survivors of DV and their families who are defined as homeless at 24CFR 578.3 (4). (Up to maximum 5 points possible).

Maximumcharacters: 2000. You have 2000 characters left.

F.2. How does the project involve survivors with a range of lived expertise in policy and program development throughout the project's operation?

(Up tomaximum 5 points possible).

Maximum characters: 2000. You have 2000 characters left

2023 COST FORMS – DUPAGE COUNTY HOMELESS CONTINUUM

Organization Name	
Project Name	
HUD Expiring Grant Number (if	
renewal)	
Project Start Date	
Project End Date	
Contact Person	
Email address	
Telephone with extension	
Project Budgets	
Indicate if NEW or Renewal Project	

FUNDING REQUEST

LEASING COSTS

FOR A JOINT TH-RRH, INDICATE THE FOLLOWING:

	Housing Type	Funding Source
Number of TH units		
Number of TH beds		
Number of RRH units		
Number of RRH beds		
Associated address		

Leasing Units - HUD paid amount cannot exceed FY23 FMR for both new and renewal projects.

I. Number of Units	e. HUD Paid Amount	f. Number of Months 12	g. Totals
		12	
		12	
		12	
		12	
		12	
		12	
		12	
		12	
-			12 12 12 12 12 12

LEASED STRUCTURES BUDGET

STRUCTURE NAME	
STREET ADDRESS 1	
STREET ADDRESS 2	
CITY	
STATE	
ZIP	
HUD PAID RENT PER MONTH	
X 12 months for a year	
X Grant term	
TOTAL REQUEST FOR GRANT TERM	

RENT ASSISTANCE COSTS

Select the "Type of Rental Assistance:" N/A, PRA, TRA, or SRA. (not applicable, project rental assistance, tenant rental assistance, or sponsor rental assistance).

Rent Assistance Units – rent must <u>equal</u> HUD FY23 FMR amount for new projects, <u>can be less</u> <u>than FMR for renewal projects.</u>

c. Size of Units	d. Number of Units	e. HUD FMR amount	f. 12 months	g. Total Request
0 Bedroom			12	
1 Bedroom			12	
2 Bedrooms			12	
3 Bedrooms			12	
4 Bedrooms			12	
5 Bedrooms			12	
6 Bedrooms			12	
Other:			12	
h. Totals:				

SUPPORTIVE SERVICES BUDGET – HUD funds only

		Annual Request		
Eligible Costs	Quantity (limit 400 characters)	Annual Request	Grant Term	Total for grant term
1. Assessment of Service Needs				
2. Assistance with Moving Costs				
3. Case Management				
4. Child Care				
5. Education Services				
6. Employment Assistance				
7. Food				
8. Housing/Counseling Services				
9. Legal Services				
10. Life Skills				
11. Mental Health Services				
12. Outpatient Health Services				
13. Outreach Services				
14. Substance Abuse Treatment services				
15. Transportation				
16. Utility Deposits				
17. Operating Costs *				
Total Annual Assistance Request				

**Project applicants may only include "17. Operating Costs" (maintenance, repair, building security, furniture, utilities, and equipment) in the Supportive Services budget, if the costs are for a facility that is used to provide supportive services for program participants.

OPERATING BUDGET – HUD funds only. May not be included in Rapid Rehousing projects.

Eligible Costs	Quantity (limit 400 characters)	Annual Request	Grant Term	Total for grant term
1.Maintenance/Repair				
2.Property Taxes and Insurance				
3. Replacement Reserve				
4. Building Security				
5.Electricity, Gas and Water				
6. Furniture				
7. Equipment (lease, buy)				
Total Assistance Requested				

Sources of Match - leveraging is no longer required.

The following list summarizes the funds that will be used as match for the project, both cash and in-kind. On the chart below please list all available cash and in-kind match resources for your program. A 25% match is required for all funds except leasing. <u>Note: use of any In-Kind Match requires an attachment of an executed Memorandum of Understanding verifying the amount listed.</u>

IDENTIFY AS MATCH	TYPE - CASH	GOVT. OR PRIVATE	NAME OF SOURCE	DATE OF WRITTEN COMMITMENT	VALUE (\$)

IDENTIFY AS MATCH	TYPE IN-KIND	GOVT. OR PRIVATE	NAME OF SOURCE	DATE OF WRITTEN COMMITMENT	VALUE (\$)

Note – To add more lines in chart, click onto the row just above. SUMMARY FOR MATCH

TOTAL VALUE OF CASH COMMITMENTS	
TOTAL VALUE OF IN-KIND COMMITMENTS	
TOTAL VALUE OF ALL COMMITMENTS	

Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant? Answer "Yes" or "No." If "Yes," the following questions and text box will appear. If "No," no further response is required \square Yes \square No

Briefly describe the source of the program income: Enter a description of the source of program income. **Note:** CoC-generated program income includes occupancy charges paid to the recipient or subrecipient. These amounts are considered program income and **may** be used as match funds **Estimate the amount of program income that will be used as Match for this project:** Enter estimated amount in the field provided.

PROJECT SUMMARY BUDGET

Eligible Costs	Annual Assistance	X Grant Term – only for	= Total Assistance for
	HUD Dollars Request	new projects	Grant Term
1a. Leased Units			
1b. Leased Structures			
2. Rent Assistance			
3. Supportive Services			
4. Operating			
5. HMIS			
Subtotal Costs Requested			
Administrative Costs (Up to 10%)			
Total Assistance plus Admin Requested			
Cash Match Amount*			
In-Kind Match*			
Total Match			
Total Budget			

* The sum of cash and in-kind match must equal 25% of all assistance requested except Leased Units and Leased Structures.



SCORED FORMS FOR ONE PROJECT

Catholic Charities SHIFT permanent supportive housing renewal project scored (from Neighborly internet platform)

Reviewer: Mary Keating

Score

93 out of 100

Status: Complete

Date submitted: 7/3/2023 3:14:42 PM

SECTION	POINTS	AVAILABLE
	AWARDED	POINTS
C. Business Plan	52	52
D. Business Plan	26	28
E. Organization's Demonstrated Capacity	15	20
Total	93	100

Reviewer Notes:

Reviewer: Mary Keating

C: BUSINESS PLAN	POINTS AWARDED	AVAILABLE POINTS
C.2 Project Serves:	10	10
• Chronically homeless		
• LGBTQ+ persons		
• Youth		
• Veterans		
• Low or no income		
 Currentsubstance abuse, significant health or behavioral health challenges, or functional impairments 		
• Coming from the streets		
Criminal history		
• Abuse/victimization or a history of victimization/abuse, Domestic Violence, Sexual Assault, Childhood Abuse, sex trafficking		
• High utilization of crisis or emergency services to meet basic needs		
• Length of time homeless		
• Risk of continued homelessness		
• Risk of illness or death		
• Only project of its kind in the CoC geograph		
C.3. Project meets all HUD criteria, including persons are not terminated	5	5
for:		_
a) failure to participate in support services, b) failure to make progress on a		
service plan, c) loss of or no income, d) being a victim of domestic		
violence, or e) any other activity not included in a typical lease agreement.		
C.4. Applicant provides general explanation of their Housing First	3	3
approach, lowering barriers, and address housing for persons hardest to		
serve, including those with justice involved history		
C.5	5	5
• Project provides transportation assistance to appointments		
• Use of a single application form for 4 or more benefits		
• Annual follow-ups to ensure benefits are received and renewed		
 Helps participants applying for SSI/SSDI and get the technical assistance they need 		
• Has a staff person who has completed SOAR training		

C.6. Give the project's average unit occupancy rate over the past operating year.	5	5
5 points if unit occupancy was 95% or over		
4 points if unit occupancy was between $90 - 94\%$		
3 points if unit occupancy was between 80 – 89%		
0 points if unit occupancy was less than 79%		
C.7. & C.8	20	20
a) Measurable outcomes of the project meet these HUD housing stability		
goals: 80% of participants remaining in Permanent Supportive Housing or		
exiting to another permanent housing destination or exiting transitional		
housing to a permanent housing destination: FOR RENEWALS ONLY (10 points)		
b) Measurable outcomes of the project meet these HUD income goals: 50%		
of participants (leavers and stayers) meeting employment income OR total		
income measures: FOR RENEWALS ONLY (10 points)		
a) 10 points if at least 80%, 5 points if at least 65%, 0 points if below 65%		
b) 10 points if at least 50%, 5 points if at least 25%, 0 points if under 25%		
C.9 4 points = demonstrates draw down of funds on at least a quarterly	4	4
basis		
Section Total	52	52

D: BUSINESS PLAN	POINTS AWARDED	AVAILABLE POINTS
D.1. ndicate the percentage and amount of funds that were unspent.	5	5
5 points if $0 - 5\%$ are unspent		
4 points if $5.1 - 10$ % are unspent		
2 points if $10.1 - 15\%$ are unspent 0 points if 15.1% or more are unspent		
D.2. Timely submission of the project Annual Progress Report (APR) for	5	5
the last operating year in Sage on or before the due date. 5 pts no APR 0 pts		
D.3.	4	4
1 point = Agency has a dedicated staff person to coordinate linkages to		
services for homeless students.		
1 point = Agency has developed policies and procedures.		
1 point = Agency has adopted policies and procedures through Board		
Action.		
1 point = Agency has written agreement(s) with agencies serving infants,		
toddlers and preschool children (i.e. MOU w/Head Start program)		
D.4.	6	6
5 points = Includes an acceptable budget in sufficient detail, costs are		
adequately tied to project activities, all costs are justified and reasonable		
1 point = Meet minimum requirement of having 25% match with identified		
sources of non-federal cash match in appropriate amount/s.		
D.5.	1	2
Agency adequately describes qualitative and quantitative evidence which		
demonstrated either the strength of the existing program or the need for		

improvements, change, or no changes		
 D.6. New projects only 25% of units for PSH or participants for RRH that are not funded by the CoC or ESG – (5 pts) 25% of total request in leveraging from a healthcare provider OR 100% access to substance abuse treatment service for project participants – (5 pts) Specific action steps are listed to achieve project goals; demonstrates staffing is available and realistic (5 pts) 	0	0
 D.7-D.9 Demonstrated process used to ensure persons of persons of all races, ethnicities, gender identities, sexual orientations, and abilities have equal opportunity and access to the project. (1 pt) Degree to which the project has taken steps taken to identify and resolve racial barriers. Improve racial equity in the provision and outcome of services. (1 pt) Provided appropriate explanation of changes made to improve service delivery to culturally diverse populations. (1 pt) Provided Cultural Competency Training or educational instruction to agency leadership, staff or board to build awareness, knowledge and skills related to cultural difference. (1 pt) How do you involve individuals with lived experience in 1) service delivery and 2) decision making processes? (2 pts) 	5	6
Section Total	26	28

E: ORGANIZATION'S DEMONSTRATED CAPACITY	POINTS	AVAILABLE
	AWARDED	POINTS
E.1. & E.2.	4	5
2 points		
 Application process Financial and organizational review OR program review End result is funding, licensure, certification, or accreditation for a specific time period 3 points 		
 Application process Financial and organizational review, site visit, program review – (Has 2 of these 3 items) End result is funding, licensure, certification, or accreditation for a specific time period 5 points (MUST include all 4 items) 		

	[r
 Application process Financial and organizational review, site visit Program review End result is funding, licensure, certification, or accreditation for a specific time perio 		
E.3a. Active and regular participation in Continuum committee meetings:	5	5
 1 point = Active in one committee 2 points = Active in two committees 3 points = Active in three or more committees And / Or: 2 points = Agency has employed a Committee Chairperson in the past twelve months with regular and active participation and/or a staff member with active participation in special CoC projects, subcommittees, 		
task forces, etc. with chairperson recommendation. E.3b.	1	5
 5 points = Contributes consistent and quality data containing the Minimum Data Elements and Program specific data elements for all clients served. At least 50% of agency end users have been certified. Agency has addressed any issues identified at last security monitoring visit. Agency Data Administrator attends all mandatory training sessions and meetings. 3 points = Contributes consistent and highquality data containing the Minimum Data Elements and Program specific data elements for all clients served or domestic violence service provider that has demonstrated utilization of comparable data base. 1 point = Contributes data but is not of sufficient quality to meet standards. 		
0 points = Domestic violence service provider that cannot demonstrate utilization of comparable data base		
E.3c. 5 points = One decision maker staff or their delegate staff participates in each planning meeting. Agency provides a minimum of one team (2+ persons) to participate on the night of the count.	5	5
Two meetings (Nov/Dec) One training (Jan) Night of the Count (Jan)		
Section Total	15	20



NOTIFICATION of PROJECTS REJECTED-REDUCED

Email Notification

Projects Rejected-Reduced Notification Document

Website screenshot of posting with date

From: Sent: To: Subject: Attachments:	Snipes, Lisa Tuesday, August 29, 2023 11:08 AM blake.mitchell@hopefair.org; acarnold9@gmail.com; alafauce@cc-doj.org; alex@chicagohomeless.org; anne@homedupage.org (anne@homedupage.org); apechous@waynetwp-il.org; Aredzic@dupagepads.org; Barb@dupagefoundation.org; Becky Rush; beckyb@teenparentconnection.org; Bmalak@peoplesrc.org; bpettigrew@hamdardcenter.org; bridgeintake@sbcglobal.net; bthurlby@cc-doj.org; Burdick, Julie; carol.simler@gmail.com; chanabern@aol.com; christinelewis@mshv.org; clepage@peoplesrc.org; clenajera@sbcglobal.net; cmadsen@cc-doj.org; colleen.zavodny@elmhurst.edu; 211DuPage; Daniell@mshv.org; dbezick@pslegal.org; dhilliard@outreachcommin.com; director@elmhurstwalkin.org; Director@HamdardCenter.org; donna.rennard@serenityhouse.com; droth@dupagefederation.org; ErinH@Raygraham.org; Fiore, Carrie; Fixler, Steven; Fletcher, Majory; foluke@housingactionil.org; Fox, Joan; gdidomenico@cmfdn.org; genesis@fhcmoms.org; Menconi, Gina; Hamlin, Julie; Britton, Heather, heather@fhcmoms.org; HorneL@metrofamily.org (HorneL@metrofamily.org); HornerJ@naperville.il.us; IL@namidupage.org; janell.robinson@hopesfrontdoor.org; jantomkay@comcast.net; jcoyer@dupagepads.org; Jderrick@loaves-fishes.org; jlaureano@childserv.org; imartinez@waynetwp-il.org; JTurner@dupagepads.org; june.bishop@hopefair.org; ktate@neighborhoodfp.org; katrinapbaugh@gmail.com; kdoyle@accessdupage.org; Keating, Mary; Kerry.Thomas2@va.gov; Kim Huffman; Kimz@raygraham.org; Knannion@360youthservices.org; kmurphy@accessdupage.org; kobmam@dupagepads.org; Kvoung@childserv.org; Lake, David; Lesvia Abdallah; Hawkins@outreachcommin.com; Lisa Howe; Snipes, Lisa; Ljefferson@dupagepads.org; Inrma321 @aol.com; Lynda Wilson; m.kober@namidupage.org; mwileman@ageguide.org; operationdriveNFP@gmail.com; Patricia O'Malley; peglijewski@gmail.com; plevis@peoplesrc.org; rachel.watson@hopefair.org; Tarosan@seniorhomesharing.org; Becky Day; regina.watkins@serenityhouse.com; Rizik Mohammad; Randi Luna; ro'brochta@cc-doj.org; rosaura.realegen
Attachments:	2023 Projects Accepted w Tiering List rev 8-29-23.pdf; 2023 Projects Rejected and Reduced Notification rev 8-29-23.pdf

Dear CoC Membership:

This email is to notify all CoC members and project applicants of the selection and ranking of all projects that applied in the 2023 CoC funding competition.

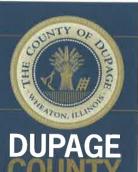
Attached to this email is the 2023 Projects Accepted Notification with Tiering List and the Projects Rejected/Reduced Notification.

These documents related to the CoC's project selection and ranking process will be posted to the CoC website no later than 9/13/23. The link is <u>https://dupagehomeless.org/cocoverview/hud-nofo/</u>.

Thank you to all who participated in this year's CoC funding application process.

Lisa Snipes Continuum Planner **DuPage County Continuum of Care** 421 N. County Farm Road Wheaton, IL 60187 Ph: 630 407-6413 www.dupagecounty.gov www.dupagehomeless.org





Community Development (630) 407-6600

Family Center 422 N. County Farm Rd, Wheaton, IL 60187 (630) 407-2450

Housing Supports and Self-Sufficiency (630) 407-6500

Intake and Referral (630) 407-6500

Senior Services (630) 407-6500

COMMUNITY SERVICES

TO: DUPAGE CoC MEMBERS

DATE: August 28, 2023

FROM: MARY KEATING, DIRECTOR, DUPAGE COUNTY COMMUNITY SERVICES

RE: NOTIFICATION OF 2023 PROJECTS REJECTED AND REDUCED

The DuPage Homeless Continuum completed the project selection and tiering process on August 23, 2023. The DuPage Homeless Continuum evaluated closely the actual funds expended and outcomes of all renewal projects to determine performance and make decisions regarding project reductions. There was a voluntary reallocations of one renewal project – Partners In Housing. Catholic Charities, Diocese of Joliet, requested to reduce their project from 32 units to 18 PSH units. DuPage PADS agreed to submit a new project request for 14 PSH units so that PSH capacity did not decrease.

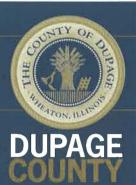
Projects Rejected/Reduced

There were 2 projects rejected. The DuPage PADS Permanent Supportive Housing (PSH) Expansion and Catholic Charities Permanent Supportive Housing (PSH) Expansion were rejected due to lack of any remaining funds in Tier Two. The PSH beds were a lower priority because state of Illinois funds were allocated to expand PSH beds. The DuPage Continuum received funding for 13 new PSH units.

Projects Rejected	Score	Project Amount	Approved Funding Amount	Reason
Catholic Charities PSH Expansion	67.8	\$ 48,240	0	Lack of funds in Tier Two and lower priority due to availability of state funds for permanent supportive housing.
DuPage PADS PSH Expansion	67.0	\$ 439,920	0	Lack of funds in Tier Two and lower priority due to availability of state funds for permanent supportive housing.

Projects Reduced	Score	Project Amount	Approved Funding Amount	Reason
360 Youth	67.4	\$ 274,396	\$130,797	Amount was adjusted to fit
Services				Tier Two total amount.

421 N. County Farm Road, Wheaton, Illinois 60187 (630) 407-6500 - www.dupagecounty.gov/community



Community Development (630) 407-6600

Family Center 422 N, County Farm Rd, Wheaton, IL 60187 (630) 407-2450

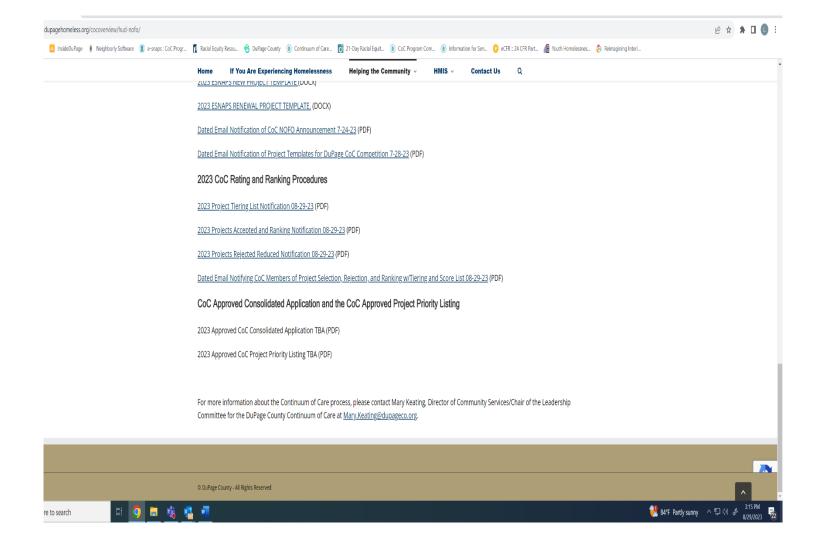
Housing Supports and Self-Sufficiency (630) 407-6500

Intake and Referral (630) 407-6500

Senior Services (630) 407-6500

COMMUNITY SERVICES

Expansion Joint TH-RRH New project				
Catholic Charities	96.6	\$657,416	\$403,137	Voluntary reallocation of the project to reduce PSH
Partners In Housing renewal				units from 32 to 18.





NOTIFICATION of PROJECTS ACCEPTED

Email Notification

Projects Accepted Notification Document

Tiering List

Website screenshot of posting with date

From: Sent: To: Subject: Attachments:	Snipes, Lisa Tuesday, August 29, 2023 11:08 AM blake.mitchell@hopefair.org; acarnold9@gmail.com; alafauce@cc-doj.org; alex@chicagohomeless.org; anne@homedupage.org (anne@homedupage.org); apechous@waynetwp-il.org; Aredzic@dupagepads.org; Barb@dupagefoundation.org; Becky Rush; beckyb@teenparentconnection.org; Bmalak@peoplesrc.org; bpettigrew@hamdardcenter.org; bridgeintake@sbcglobal.net; bthurlby@cc-doj.org; Burdick, Julie; carol.simler@gmail.com; chanabern@aol.com; christinelewis@mshv.org; clepage@peoplesrc.org; clenajera@sbcglobal.net; cmadsen@cc-doj.org; colleen.zavodny@elmhurst.edu; 211DuPage; Daniell@mshv.org; dbezick@pslegal.org; dhilliard@outreachcommin.com; director@elmhurstwalkin.org; Director@HamdardCenter.org; donna.rennard@serenityhouse.com; droth@dupagefederation.org; ErinH@Raygraham.org; Fiore, Carrie; Fixler, Steven; Fletcher, Majory; foluke@housingactionil.org; Fox, Joan; gdidomenico@cmfdn.org; genesis@fhcmoms.org; Menconi, Gina; Hamlin, Julie; Britton, Heather, heather@fhcmoms.org; HorneL@metrofamily.org (HorneL@metrofamily.org); HornerJ@naperville.il.us; IL@namidupage.org; janell.robinson@hopesfrontdoor.org; jantomkay@comcast.net; jcoyer@dupagepads.org; Jderrick@loaves-fishes.org; jlaureano@childserv.org; imartinez@waynetwp-il.org; JTurner@dupagepads.org; june.bishop@hopefair.org; ktate@neighborhoodfp.org; katrinapbaugh@gmail.com; kdoyle@accessdupage.org; Keating, Mary; Kerry.Thomas2@va.gov; Kim Huffman; Kimz@raygraham.org; Knannion@360youthservices.org; kmurphy@accessdupage.org; kobmam@dupagepads.org; Kvoung@childserv.org; Lake, David; Lesvia Abdallah; Hawkins@outreachcommin.com; Lisa Howe; Snipes, Lisa; Ljefferson@dupagepads.org; Inrma321 @aol.com; Lynda Wilson; m.kober@namidupage.org; mwileman@ageguide.org; operationdriveNFP@gmail.com; Patricia O'Malley; peglijewski@gmail.com; plevis@peoplesrc.org; rachel.watson@hopefair.org; Tarosan@seniorhomesharing.org; Becky Day; regina.watkins@serenityhouse.com; Rizik Mohammad; Randi Luna; ro'brochta@cc-doj.org; rosaura.realegen
Attachments:	2023 Projects Accepted w Tiering List rev 8-29-23.pdf; 2023 Projects Rejected and Reduced Notification rev 8-29-23.pdf

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These documents related to the CoC's project selection and ranking process will be posted to the CoC website no later than 9/13/23. The link is <u>https://dupagehomeless.org/cocoverview/hud-nofo/</u>.

Thank you to all who participated in this year's CoC funding application process.

Lisa Snipes Continuum Planner **DuPage County Continuum of Care** 421 N. County Farm Road Wheaton, IL 60187 Ph: 630 407-6413 www.dupagecounty.gov www.dupagehomeless.org





COMMUNITY SERVICES

TO: DUPAGE CoC MEMBERS

DATE: August 29, 2023

FROM: MARY KEATING, DIRECTOR, DUPAGE COUNTY COMMUNITY SERVICE

RE: NOTIFICATION OF 2023 PROJECTS ACCEPTED AND RANKING

The DuPage Homeless Continuum completed the project selection and tiering process on August 23, 2023. Nineteen projects were recommended for inclusion on the 2023 Project Priority Listing though only 18 are ranked. This included 6 new projects and 13 renewal projects. The CoC Planning grant is not ranked.

The 6 new projects accepted for inclusion on the 2023 Project Priorities Listing included:

RANK	New Projects	Funding Request	Approved Funding Amount	Project Funding description
9	DuPage PADS Hope Place Expansion (reallocation of Partners)	\$254,279	\$254,279	PSH for 14 chronically homeless persons
14	DuPage Community Services Coordinated Entry	\$80,000	\$80,000	Costs for operating the CoC Coordinated Entry
16	DuPage PADS New Beginnings Expansion Rapid Rehousing	\$227,307	\$227,307	7 RRH units for direct rent assistance for both singles and families
17	360 Youth Services Expansion Joint TH- RRH	\$274,396	\$130,797	Additional homeless youth participants
18	DuPage PADS Haven of Hope DV Expansion	\$366,103	\$366,103	DV Bonus funds – 7 units of Rapid Rehousing for both singles and families
n/a	DuPage County Community Services Planning grant	\$312,932	\$312,932	CoC Planning

Community Development (630) 407-6600

Family Center 422 N. County Farm Rd. Wheaton, IL 60187 (630) 407-2450

Housing Supports and Self-Sufficiency (630) 407-6500

Intake and Referra (630) 407-6500

Senior Services (630) 407-6500



COMMUNITY SERVICES

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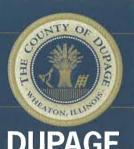
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There were thirteen renewal projects accepted for inclusion on the 2023 Project Priorities.

	RANK	AGENCY	PROJECT NAME	Description	Score	Amount Requested	Recommended Amount
munity lopment	1	DuPage Community Services Dept.	HMIS	HMIS dedicated renewal project.	N/A	\$188,556	\$188,556
407-6600 Iy Center . County Farm Rd. on, IL 60187 407-2450 ing Supports Self-Sufficiency 407-6500	2	360 Youth Services	360 Joint TH-RRH	6 Transitional housing units for 12 persons and 8 rapid rehousing units. 20 beds	94.8	\$630,722	\$630,722
e and Referral 407-6500 Services 407-6500	3	Midwest Shelter for Homeless Veterans	Freedom Harbor	4 one bedroom units of PSH for 4 chronically homeless veterans both male and female.	92.8	\$73,033	\$73,033
	4	Catholic Charities, Diocese of Joliet	SHIFT- New Hope	Permanent Supportive Housing for 22 homeless families with multiple disabilities in 22 units.	94.6	\$968,764	\$968,764
	5	Catholic Charities, Diocese of Joliet	DuPage Daybreak	Transitional Housing renewal for homeless families – 11 units	96.6	\$220,349	\$220,349
	6	DuPagePads, Inc.	Hope Place	Permanent Supportive Housing for 5 chronically	96.0	\$86,084	\$86,084



COMMUNITY SERVICES

DUPAGE COUNTY Image: Service ser	83
7360 Youth ServicesYouth In TransitionTransitional housing for 	83
7360 Youth ServicesYouth In TransitionTransitional housing for 10 males ages96.8\$206,183\$206,1	83
Services Transition housing for 10 males ages 18-24 in 5	83
10 males ages	
10.24 in F	
Community 18-24 In 5	
Development units.	
(630) 407-6600 8 Catholic Partners In Permanent 96.6 \$657,416 \$403,1	37
Family Center Charities, Housing Supportive	
422 N. County Farm Rd. Diocese of Housing for	
Wheaton, IL 60187 Joliet 18 homeless	
(630) 407-2450 households	
Housing Supports with	
and Self-Sufficiency disabilities.	
(630) 407-6500 9 DuPagePads, New Permanent 96.0 \$538,313 \$538,3	13
Intake and Referral Inc. Horizons Supportive	
(630) 407-6500 Housing for	
19 +24=43	
Senior Services chronically	
(630) 407-6500 homeless	
persons in 26	
units.	
10 DuPagePads, Carol's Permanent 95.8 \$1,387,483 \$1,387	,483
Inc. Place Supportive	
Housing for in	
67 one	
bedroom and	
4 two	
bedroom	
units for	
chronically	
homeless	
individuals	
and families.	
Total 71	
units, 79 beds	
11 Catholic Journey 4 Transitional 86.8 \$237,330 \$237,3	30
Joliet and 6 rapid	
rehousing	
units for	in



Community Development (630) 407-6600

Family Center 422 N. County Farm Rd. Wheaton, IL 60187 (630) 407-2450

Housing Supports and Self-Sufficiency (630) 407-6500

Intake and Referral (630) 407-6500

Senior Services (630) 407-6500

COMMUNITY SERVICES

			families.			
12	DuPagePads,	New	14 units for	84.2	\$349,0433	\$65,093
	Inc.	Beginnings	direct rent			
			assistance in			
			rapid			
			rehousing			
13	DuPagePads,	Haven of	6-1 bedroom	64.8	\$715,358	\$715,358*
	Inc.	Норе	and 11- 2			
			bedroom			
			Rapid			
			Rehousing			
			units for 17			
			households			

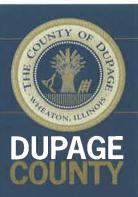
*\$197,254 in Tier 1, \$518,104 in Tier Two

The DuPage CoC Rank and Review committee scored each new and renewal application from the Business Plans and Cost Forms submitted which incorporate the 2023 Ranking Criteria. The Ranking Criteria contains objective measure of project outcomes including system performance measures, project performance, administrative ability and utilization. One renewal project, Haven of Hope DV Rapid Rehousing, was selected to straddle the position between Tier One and Tier Two since it was the lowest scoring renewal. It is a rapid rehousing project so if it is not funded it will avoid displacement of any persons in permanent housing units. In Tier Two, the straddle renewal project was followed by the DuPage PADS Expansion of New Beginnings Rapid Rehousing. Coordinated Entry data indicated that Rapid Rehousing for all populations is the greatest need. The third position in Tier Two is 360 Youth Services Expansion of Joint TH-RRH for youth. The amount was adjusted to fit the Tier Two required total. It was chosen over the expansion of the permanent supportive housing beds to meet the needs of homeless youth. There was additional funding for PSH from the state of Illinois for permanent supportive housing which will increase PSH capacity by 13 units in the CoC.

The DV bonus project, Expansion of the Haven of Hope Rapid Rehousing, was placed last in Tier Two so it would not affect funding of higher priority projects and is not part of the Tier Two amount.

The Planning project is included in Projects Accepted but is not ranked according to HUD guidelines.

A final Tiering List with all projects, amounts and Rankings is attached.



Community Development (630) 407-6600

Family Center 422 N. County Farm Rd, Wheaton, IL 60187 (630) 407-2450

Housing Supports and Self-Sufficiency (630) 407-6500

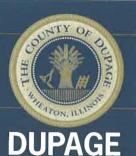
Intake and Referral (630) 407-6500

Senior Services (630) 407-6500

COMMUNITY SERVICES

HUD will select all project amounts in Tier One from the highest scoring CoC to the lowest scoring CoC before selecting any project amounts in Tier Two. Tier Two projects will be scored individually by HUD up to 100 points each. In Tier Two, HUD will select projects in order of point value from all CoCs. The DV bonus will be scored on a different 100 point scale that is evaluated nationally.

I wish to thank the Rank and Review and Leadership committees for their thoughtful deliberations on this process.



COMMUNITY SERVICES

AGE		0000 511				507	
NIT		2023 DU	PAGE HUD (CARE PROJ	ECT	
				TIERING			
				ewal Demand = \$6,25	8,634		
	1			104 bonus amount			
				TAL \$6,696,738			
			Tier	One = \$5,820,530			
			Tier	$T_{W0} = \$876,208$			
			DV	Bonus= \$366,103			
00							
ter			RENE	WAL PROJECTS	S		
Farm Rd. 187	RANK	AGENCY	PROJECT NAME	Description	Amount	Score	Туре
50 ports	1	DuPage Community Services Dept.	HMIS	HMIS dedicated renewal project.	\$188,556	n/a	Renewal HMIS
ifficiency 00 Referral 00	2	360 Youth Services	360 Joint TH- RRH	6 Transitional housing units for 12 persons and 8 rapid rehousing units. 20 beds	\$630,722	94.8	Renewal - JOINT TH- RRH
ices 00	3	Midwest Shelter for Homeless Veterans	Freedom Harbor	4 one bedroom units of PSH for 4 chronically homeless veterans both male and female.	\$73,033	92.8	Renewal PSH
	4	Catholic Charities, Diocese of Joliet	SHIFT- New Hope	Permanent Supportive Housing for 22 homeless families with multiple disabilities in 22 units.	\$968,764	94.6	Renewal PSH
	5	Catholic Charities, Diocese of Joliet	DuPage Daybreak	Transitional Housing renewal for homeless families – 11 units	\$220,349	96.6	Renewal TH
	6	DuPagePads, Inc.	Hope Place	Permanent Supportive Housing for 5 chronically homeless individuals in 5 units.	\$86,084	96.0	Renewal PSH
	7	360 Youth Services	Youth In Transition	Transitional housing for 10 males ages 18-24 in 5 units.	\$206,183	96.8	Renewal TH
	8	Catholic Charities, Diocese of Joliet	Partners In Housing	Permanent Supportive Housing for 18 homeless households with disabilities in 18 units	\$403,137	96.6	Renewal PSH

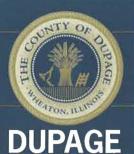
Family Centor 422 N. County Farm

Wheaton, IL 60187 (630) 407-2450

Housing Supports and Self-Sufficience (630) 407-6500

intake and Referra (630) 407-6500

Senior Services (630) 407-6500



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COMMUNITY SERVICES

OUNTY	9	DuPage PADS	Hope Place Expansion (Partners Reallocation)	Permanent Supportive Housing for 14 chronically homeless person in 14 units	\$254,279	96.6	NEW PSH
ununity slopment	10	DuPagePads, Inc.	New Horizons	Permanent Supportive Housing for 19 +24=43 chronically homeless persons in 26 units.	\$538,313	96.0	Renewal PSH
407-6600 Ily Center I. County Farm Rd. ton, IL 60187 407-2450 Sing Supports Salf-Sufficiency 407-6500	11	DuPagePads, Inc.	Carol's Place	Permanent Supportive Housing for in 67 one bedroom and 4 two bedroom units for chronically homeless individuals and families. Total 71 units, 79 beds	\$1,387,483	95.8	Renewał PSH
e and Referral 407-6500 or Services 407-6500	12	Catholic Charities, Diocese of Joliet	Journey Home	4 Transitional housing units for families and 6 rapid rehousing units for families.	\$237,330	86.8	Joint TH- RRH renewal
407-0000	13	DuPagePads, Inc.	New Beginnings	14 units for direct rent assistance in rapid rehousing	\$349,043	84.2	Renewal Rapid Rehousing
	14	DuPage Community Services Dept.	Coordinated Entry	Costs associated with operating the CoC Coordinated Entry system.	\$ 80,000	N/A	NEW - Coordinated Entry
	15	DuPagePads, Inc.	Haven of Hope	6-1 bedroom and 11- 2 bedroom Rapid Rehousing units for 17 households	\$197,254	64.8	Renewal DV Rapid Rehousing
				Subtotal Tier One	\$5,820,530		
				TIER TWO	1		
		AGENCY	PROJECT NAME	Description	Amount	Score	Туре
	15	DuPagePads, Inc.	Haven of Hope	6-1 bedroom and 11- 2 bedroom Rapid Rehousing units for 17 households	\$518,104	64.8	Renewal DV Rapid Rehousing
	16	DuPage PADS	New Beginnings RRH Expansion	7 additional RRH units	\$227,307	64.0	NEW Expansion



DUPAGE

Community Development (630) 407-6600

Family Center 422 N. County Farm Rd. Wheaton, IL 60187 (630) 407-2450

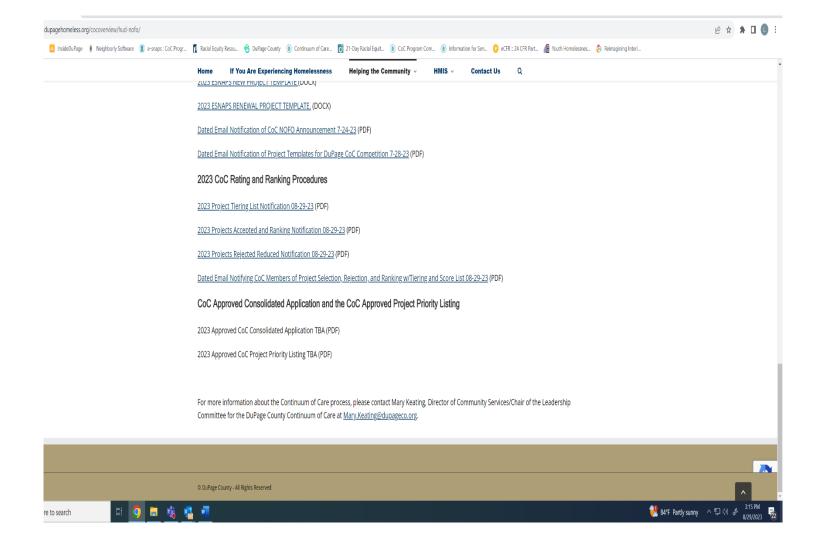
Housing Supports and Self-Sufficiency (630) 407-6500

Intake and Referral (630) 407-6500

Senior Services (630) 407-6500

COMMUNITY SERVICES

17	360 Youth Services	360 Joint TH- RRH Expansion	3 additional units	\$130,797	67.4	NEW Expansion
	Scivices		Subtotal Tier Two	\$876,208		
			DV BONUS		70.0	
18	DuPage PADS	Haven of Hope DV Expansion	7 additional DV RRH units	\$366,103	70.2	Expansion NEW DV RRH
				+212.022	n la	Planning
N/A	DuPage County	Planning	Not tiered	\$312,932	n/a	Flamming





LOCAL COMPETITION SELECTION RESULTS

Table of FINAL PROJECT SCORES with Status

2023 DUPAGE HUD CONTINUUM of CARE FINAL PROJECT SCORES FOR ALL PROJECTS

		TIER	ONE PROJECTS			
RANK	AGENCY	PROJECT NAME	Description	Amount	Score	Туре
1	DuPage Community Services Dept.	DuPage HMIS HMIS dedicated renewa Community ACCEPTED project.		\$188,556	n/a	Renewal HMIS
2	360 Youth Services	360 Joint TH-RRH ACCEPTED	6 Transitional housing units for 12 persons and 8 rapid rehousing units. 20 beds	\$630,722	94.8	Renewal - JOINT TH- RRH
3	Midwest Shelter for Homeless Veterans	Freedom Harbor ACCEPTED	4 one bedroom units of PSH for 4 chronically homeless veterans both male and female.	\$73,033	92.8	Renewal PSH
4	Catholic Charities, Diocese of Joliet	SHIFT- New Hope- ACCEPTED	Permanent Supportive Housing for 22 homeless families with multiple disabilities in 22 units.	\$968,764	94.6	Renewal PSH
5	Catholic Charities, Diocese of Joliet	DuPage Daybreak ACCEPTED	Transitional Housing renewal for homeless families – 11 units	\$220,349	96.6	Renewal TH
6	DuPagePads, Inc.	Hope Place ACCEPTED	Permanent Supportive Housing for 5 chronically homeless individuals in 5 units.	\$86,084	96.0	Renewal PSH
7	360 Youth Services	Youth In Transition ACCEPTED	Transitional housing for 10 males ages 18-24 in 5 units.	\$206,183	96.8	Renewal TH
8	Catholic Charities, Diocese of Joliet	Partners In Housing ACCEPTED	Permanent Supportive Housing for 18 homeless households with disabilities in 18 units	\$360,081	96.6	Renewal PSH
9	DuPage PADS	Hope Place Expansion (Partners Reallocation) ACCEPTED	Permanent Supportive Housing for 14 chronically homeless person in 14 units	\$297,335	96.6	NEW PSH
10	DuPagePads, Inc.	New Horizons ACCEPTED	Permanent Supportive Housing for 19 +24=43 chronically homeless persons in 26 units.	\$538,313	96.0	Renewal PSH
11	DuPagePads, Inc.	Carol's Place ACCEPTED	Permanent Supportive Housing for in 67 one bedroom and 4 two bedroom units for chronically homeless individuals and families. Total 71 units, 79 beds	\$1,387,483	95.8	Renewal PSH
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14	DuPage Community Services Dept.	Coordinated Entry ACCEPTED	Costs associated with operating the CoC Coordinated Entry system.	\$ 80,000	N/A	NEW - Coordinated Entry
15	DuPagePads, Inc.	Haven of Hope ACCEPTED	6-1 bedroom and 11- 2 bedroom Rapid Rehousing units for 17 households	\$197,254	64.8	Renewal DV Rapid Rehousing
			Subtotal Tier One	\$5,820,530		
			TIER TWO		C -	
15	AGENCY DuPagePads, Inc.	PROJECT NAME Haven of Hope ACCEPTED	Description6-1 bedroom and 11- 2bedroom Rapid Rehousing unitsfor 17 households	Amount \$518,104	Score 64.8	Type Renewal DV Rapid Rehousing

16	DuPage PADS	New Beginnings RRH Expansion ACCEPTED	7 additional RRH units	\$227,307	64.0	NEW Expansion
17	360 Youth Services	360 Joint TH-RRH Expansion ACCEPTED	Additional homeless youth participants	\$130,797	67.4	NEW Expansion
			Subtotal Tier Two	\$876,208		
N/A	Catholic Charities	PSH Expansion REJECTED	3 additional units	0	67.8	Expansion NEW
N/A	DuPage Pads	PSH Expansion REJECTED	20 additional PSH units	0	67.0	Expansion NEW
			DV BONUS			
18	DuPage PADS	Haven of Hope DV Expansion ACCEPTED	7 additional DV RRH units	\$366,103	70.2	Expansion NEW DV RRH
N/A	DuPage County	Planning ACCEPTED	Not tiered	\$312,932	n/a	Planning

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	328	425	555	525
Emergency Shelter Total	177	279	400	370
Safe Haven Total	4	2	5	0
Transitional Housing Total	137	107	119	122
Total Sheltered Count	318	388	524	492
Total Unsheltered Count	10	37	31	33

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	50	68	61	41
Sheltered Count of Chronically Homeless Persons	49	68	58	39
Unsheltered Count of Chronically Homeless Persons	1	0	3	2

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	46	68	93	94
Sheltered Count of Homeless Households with Children	46	68	93	93
Unsheltered Count of Homeless Households with Children	0	0	0	1

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	18	8	6	9	8
Sheltered Count of Homeless Veterans	17	7	6	8	8
Unsheltered Count of Homeless Veterans	1	1	0	1	0

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

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	388	348	348	100.00%	0	40	0.00%	348	89.69%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	144	144	144	100.00%	0	0	NA	144	100.00%
RRH Beds	130	130	130	100.00%	0	0	NA	130	100.00%
PSH Beds	442	442	442	100.00%	0	0	NA	442	100.00%
OPH Beds	68	68	68	100.00%	0	0	NA	68	100.00%
Total Beds	1,172	1,132	1,132	100.00%	0	40	0.00%	1,132	96.59%

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	223	243	172	160

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	15	14	16	26

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	92	89	101	130

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for IL-514 - DuPage County CoC

Submitted

FY 2021

604

758

Measure 1: Length of Time Persons Remain Homeless

FY 2022

947

1094

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.

Universe Average LOT Homeless **Median LOT Homeless** (Persons) (bed nights) (bed nights) Submitted

FY 2022

190

246

Submitted

FY 2021

156

255

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

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.

Difference

34

-9

FY 2021

122

172

FY 2022

132

176

Difference

10

4

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.

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1.1 Persons in ES and SH

1.2 Persons in ES, SH, and TH

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)			ge LOT Hor 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")	646	1004	510	430	-80	274	222	-52
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1085	1147	522	443	-79	347	264	-83

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		lomelessness n 6 Months	Returns to Homelessness I from 6 to 12 Months			omelessness 24 Months		of Returns Years
	Destination (2 Years Prior)	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	8	0	0%	1	13%	1	13%	2	25%
Exit was from ES	83	6	7%	0	0%	4	5%	10	12%
Exit was from TH	50	1	2%	3	6%	6	12%	10	20%
Exit was from SH	4	0	0%	0	0%	1	25%	1	25%
Exit was from PH	149	1	1%	1	1%	3	2%	5	3%
TOTAL Returns to Homelessness	294	8	3%	5	2%	15	5%	28	10%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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	425	555	130
Emergency Shelter Total	279	400	121
Safe Haven Total	2	5	3
Transitional Housing Total	107	119	12
Total Sheltered Count	388	524	136
Unsheltered Count	37	31	-6

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	760	1099	339
Emergency Shelter Total	591	940	349
Safe Haven Total	16	13	-3
Transitional Housing Total	192	199	7

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)	150	171	21
Number of adults with increased earned income	15	17	2
Percentage of adults who increased earned income	10%	10%	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)	150	171	21
Number of adults with increased non-employment cash income	62	60	-2
Percentage of adults who increased non-employment cash income	41%	35%	-6%

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)	150	171	21
Number of adults with increased total income	72	73	1
Percentage of adults who increased total income	48%	43%	-5%

Metric 4.4 – Change in earned income for adult system leave	rs

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	53	74	21
Number of adults who exited with increased earned income	11	18	7
Percentage of adults who increased earned income	21%	24%	3%

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)	53	74	21
Number of adults who exited with increased non-employment cash income	25	22	-3
Percentage of adults who increased non-employment cash income	47%	30%	-17%

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)	53	74	21
Number of adults who exited with increased total income	29	36	7
Percentage of adults who increased total income	55%	49%	-6%

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.	643	781	138
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.	243	72	-171
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)	400	709	309

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.	740	1008	268
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.	287	216	-71
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.)	453	792	339

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	90	197	107
Of persons above, those who exited to temporary & some institutional destinations	44	80	36
Of the persons above, those who exited to permanent housing destinations	9	19	10
% Successful exits	59%	50%	-9%

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	371	543	172
Of the persons above, those who exited to permanent housing destinations	244	261	17
% Successful exits	66%	48%	-18%

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	431	512	81
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	426	505	79
% Successful exits/retention	99%	99%	0%

2023 HDX Competition Report FY2022 - SysPM Data Quality

IL-514 - DuPage County CoC

	All ES, SH		All ES, SH All TH All PSH,		All TH		All PSH, OPH		All PSH, OPH		РЅН, ОРН		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	166	257	377	136	138	144	352	397	436	92	89	101						
2. Number of HMIS Beds	166	257	377	136	138	144	352	397	436	92	89	101						
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00						
4. Unduplicated Persons Served (HMIS)	823	607	956	197	192	199	419	462	553	279	297	317	102	119	231			
5. Total Leavers (HMIS)	686	369	618	79	79	69	41	55	50	175	166	181	73	91	198			
6. Destination of Don't Know, Refused, or Missing (HMIS)	351	39	94	0	0	1	1	2	2	1	1	0	7	20	41			
7. Destination Error Rate (%)	51.17	10.57	15.21	0.00	0.00	1.45	2.44	3.64	4.00	0.57	0.60	0.00	9.59	21.98	20.71			

2023 HDX Competition Report FY2022 - SysPM Data Quality

2023 HDX Competition Report Submission and Count Dates for IL-514 - DuPage County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/25/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/10/2023	Yes
2023 HIC Count Submittal Date	4/10/2023	Yes
2022 System PM Submittal Date	2/23/2023	Yes



HOUSING LEVERAGING COMMITMENTS

DuPagePads – private funding for Rapid Rehousing for 3 additional homeless persons

(25% of 11 participants in the Haven of Hope Expansion)



August 24, 2023

Letter of Commitment

"DuPage PADS commits to providing privately funded rapid rehousing for 3 other homeless participants in rapid rehousing. Housing for these participants will be paid for through a donation from a private donor's bequest. Rapid Rehousing for the 3 other homeless participants will be made available during the grant term of 9/1/24-8/31/25. "No federal or state funds will be utilized.

Sincerely,

April Redzic, President & CEO



HEALTH CARE FORMAL AGREEMENTS

DuPage PADS MOU with Healthcare Alternative Systems (H.A.S.) substance abuse treatment and recovery services provider



Healthcare Alternative Systems, Inc.

Providing a continuum of multicultural and bilingual (English/Spanish) behavioral care and social services that empower individuals, families and communities

web site: www.hascares.org

CHICAGO LOCATIONS

Main Office 2755 W. Armitage Ave. Chicago, Illinois 60647 Tel. (773) 252-3100 Fax (773) 252-8945

4534 S. Western Ave. Chicago, Illinois 60609 Tel. (773) 254-5141 Fax (773) 254-5753

1949 N. Humboldt Blvd. (Men's Residence) Chicago, Illinois 60647 Tel. (773) 252-2666 Fax (773) 252-0527

1866 N. Milwaukee Ave. (Transitional Housing) Chicago, Illinois 60647 Tel. (773) 782-4734 Fax (773) 782-8160

5005 W. Fullerton Ave. Chicago, Illinois 60639 Tel. (773) 745-7107 Fax (773) 745-9902

210 N. Ashland Ave. (Medication Assisted Treatment) Chicago, Illinois 60607 Tel. (312) 948-0200 Fax (312) 948-0600

> SUBURBAN LOCATIONS

373 S. County Farm Rd. Wheaton, IL 60187 Tel. (630) 344-0001 Fax (630) 344-0206

1115 N. 23rd Avenue Melrose Park, IL 60160 Tel. (708) 345-3632 Tel. (773) 387-4843 Fax (844) 616-2536

1915-17 W. Roosevelt Rd. Broadview, IL 60155 Tel. (708) 498-0200 Fax (844) 616-2536

OUTPATIENT SERVICES Substance Abuse Treatment & Prevention

Mental Health

Postpartum Depression

Domestic Violence for Victims & Perpetrators

Youth Substance Abuse Treatment & Prevention

SUBSTANCE ABUSE TREATMENT SERVICE AGREEMENT

This agreement made and entered into this <u>13</u> day of <u>September</u> 2023 by and between <u>DuPagePads</u> and Healthcare Alternative Systems, Inc. (H.A.S.), an Illinois not-for-profit corporation to provide access to substance abuse treatment services for all program participants who qualify and choose these services that are in the DuPagePads New Beginnings Expansion and Haven of Hope Expansion rapid rehousing projects. H.A.S. agrees to provide these services effective 9/1/2024 or when the projects go to grant agreement and for the duration of the grant operating year.

WITNESSETH:

Whereas, H.A.S. and <u>DuPagePads</u> deem it mutually desirable to enter into a linkage agreement, to encourage but not mandate referral, in order to provide a continuum of substance abuse treatment services to clients and their families through cooperative use of each parties' facilities, programs or services on an as needed basis and available resources.

1. **PROVISION OF SERVICES:**

H.A.S. agrees to provide the following services for DuPagePads clients, including but not limited to all clients in New Beginnings Expansion and Haven of Hope for the period of 9/1/24-8/31/2025:

- Residential substance abuse treatment for Adult Spanish speaking males (based on availability)
- Adult Intensive Outpatient Services for men and women
- Adult Aftercare services for men and women
- Other support services including: Family case-management, Adolescent services, MISA, HIV/AIDS services, Mental Health and family services, and Domestic Violence services.
- Postpartum depression therapy
- Anger management
- Transitional housing for males

See document entitled "H.A.S. Agency Services with Descriptions" for a comprehensive list of services by site location.
 All services provide in both Spanish and English dependent upon client need.

1 -

Both parties shall provide the services as stated above, subject to the following conditions:

- Willingness of the individual referred voluntarily agrees to receive treatment and to participate in the services provided.
- > Appropriateness and eligibility of referrals as determined by each party's program admission criteria: and
- > Availability of services at the time of the referral.

2. MUTUAL RESPONSIBILITIES:

- Both parties shall become familiar with each other's programs, goals, objectives and procedures. Governance and policy matters shall remain the responsibility of each party.
- Each provider shall be responsible for billing and collecting its own payment for services rendered to patients.
- Both parties agree to observe all Federal, State, Program and accreditation standards if required concerning the confidentiality of patient information and treatment.

3. GENERAL PROVISIONS:

- Each party is an independent contractor with respect to the other and not an agent, servant, or employee thereof or joint venture of the other.
- This agreement is non-exclusive and does not prohibit either party from entering into similar agreements with other providers.
- Each party agrees to hold the other harmless from any claims, demands and expenses of all kinds by reason of any act or omission caused or alleged to have been caused by the other party.
- This agreement represents the entire understanding between the parties and supersedes any and all prior agreements, written or oral. Any modification of this agreement shall be valid only if in writing and signed by both parties hereto.

In witness whereof, the parties have executed this agreement by and through their respective authorized officers as of the day and year first written above.

DuPagePads 601 W. Liberty Drive, Wheaton, IL 60187 Email: aredzic@dupagepads.org Phone: 630-517-0649_ Fax: Signature: Title: President and CEO Healthcare Alternative Systems, Inc. 2755 West Armitage Chicago, Ill., 60647

Signature: Title:

Date:_____

Date: 4-15-2023