Sonoma County 2022 CoC Board Agenda Report

Item No:

Subject: 2022 CoC Competition Overview and Scoring for New Projects

Meeting Date: August 24, 2022

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Summary

On August 01, 2022, the U.S. Department of Housing and Urban Development (HUD) issued the Continuum of Care (CoC) <u>Notice of Funding Opportunity (NOFO) for the 2022 Continuum of Care Funds</u>.

On August 11, 2022, the Sonoma County Community Development Commission released the local competition for funding and released our Request for Proposals. Given the quick turn around from HUD this year, new and renewal project applications are due on August 29th.

Full information on the Sonoma County CoC Competition local Request for Proposals can be found at our website here: <u>https://sonomacounty.ca.gov/development-services/community-development-</u> commission/divisions/homeless-services/continuum-of-care/2022-continuum-of-care-competition

As required if the CoC Competition for funding, projects must be ranked and rated against one another in a competitive process. This includes the scoring of renewal and new projects. The attached new project tool was revised from last year after Staff's review of the FY 2022 CoC NOFO to include or expand on additional or new HUD priorities.

Recommended Action(s)

Approve the attached 2022 CoC Competition Program Scoring Tool for New Projects as recommended by the CoC Competition and Evaluation Committee.

Discussion

2022 CoC Competition Overview

Funding Available:

- Approximately **\$202,131** in competitive bonus funding is now available for one (1) or more new permanent supportive housing, rapid rehousing, joint transitional-rapid rehousing, or HMIS/Coordinated Entry projects.
- Approximately **\$191,288** in competitive DV bonus funding is also available for one (1) or more bonus projects serving victims of domestic violence (see NOFO for more details).
- Approximately **\$0** is available for reallocation for one or more permanent supportive housing projects (PSH), rapid rehousing projects (RRH), joint transitional housing-rapid rehousing projects (TH-RRH), HMIS projects (HMIS Lead only), or Coordinated Entry projects is available.

The Sonoma County Continuum of Care is responsible for prioritizing projects and placing all submitted projects into one of two tiers. Projects placed in Tier 1 will be funded first, from HUD's FY2022 allocation of

\$2.8 billion. Projects placed in Tier 1 are virtually guaranteed funding, assuming they pass threshold review by HUD.

This year, HUD has determined that Tier 1 funding will be equal to 95% of the total Annual Renewal Demand (ARD). This means that 5% of our ARD is at risk in Tier 2. Tier 2 is the difference between Tier 1 and the maximum amount of renewal reallocation, and CoC Bonus funds that a CoC can apply for. Underperforming projects may be at risk of being placed into Tier 2, and ultimately could have their projects eliminated or reduced if a new project application is ranked above it as projects are funded on a nationally competitive basis.

Total Possible CoC Award	\$4,557,326
New CoC Bonus Project Funding	\$202,131
New DV Bonus Funding	\$191,288
Continuum of Care Planning Grant	\$121,279
Annual Renewal Demand (ARD)	\$4,042,618
Anticipated Tier 1 funding	\$3,840,487
Anticipated Tier 2 funding	\$595,500
Reallocated funds currently available for new Tier 2 project(s) – this	\$0
amount may increase	
Balance to be put at risk in Tier 2	\$202,131

The above numbers confirm our total possible award amount from the CoC NOFO. This funding will be for the grant year of 2023-2024. As this is competitive funding, we have a total of \$202,131 that is considered at risk of being lost within the competition of our Annual Renewal Demand. Awards granted through HUD during this process depend on how well we do in the overall collaborative application, our process for reallocation of underperforming projects, system performance, and our rating/ranking process for reviewing projects, etc.

New projects will be scored by the CoC Competition and Evaluation Committee on September 1st. In addition, during this meeting the Committee will also rate and rank new and renewal projects against each other for a Final Priority Listing. The Final Priority Listing is set to be approved on the Special CoC Board meeting on September 7th in order to meet HUD's posting deadlines.

Please note, we do not yet have a quorum for the CoC Board meeting on September 7th at 1:00 pm. HUD's deadline for funding this year is extremely short, if you are unable to attend, please let us know if you are able to send a proxy.

Sonoma County CoC's Local Timeline:

Local Request for Proposals Released	August 11, 2022
Bidders conference for NEW Projects	August 15,2022
Renewal/Reallocation Questionnaires (Renewal Projects)	August 15, 2022
Technical Assistance Session (e-snaps and applications)	August 16, 2022

Open Office Hours	August 19, 2022
Application Materials and Local Submission in e-snaps (New and Renewal Projects)	August 29, 2022
Technical Review of New and Renewal Applications	August 30 – September 13, 2022
2022 CoC Competition Evaluation Committee Review of New Project Applications and approve final Priority Listing	September 01, 2022
Continuum of Care Board Final Approval of New Projects and Ranking and Ratings	September07, 2022
Publication of new project selections and Priority Listings (earlier if possible) on the Sonoma County Continuum of Care Competition website and notice to providers	September 12, 2022
Public Posting of full Consolidated Application	September 23, 2022
Finals Submission by CoC (8:00 PM EST)	September 23, 2022

Scoring for New Projects

Staff utilized the New Project Scoring tool during last year's competition and adjusted the scoring based on new and/or expanded HUD Priorities within in the NOFO.

HUD Priorities in 2022 CoC NOFO:

- 1. End homelessness for all persons experiencing homelessness.
- 2. Use a Housing First approach.
- 3. Reduce unsheltered homelessness.
- 4. Improve system performance.
- 5. Partner with housing, health, and service agencies.
- 6. Advance racial equity and address racial disparities.
- 7. Improving assistance to LGBTQ+ individuals.
- 8. Engage persons with lived experience of homeliness.
- 9. Support local engagement to increase the supply of affordable housing.

Based on the information reviewed in the NOFO the following changes/revisions were made to the New Project Scoring Tool and unanimously approved by the CoC Competition and Evaluation Committee on August 18, 2022. NOFO Priorities added:

- 1. NOFO requires 20% of scoring for System Performance Measures (SPM). Updated previous scoring section to include 20/100 points for SPMs.
 - a. Since the projects will be new, they need to provide measurable outcomes within submitted materials for each question.
- 2. Given the need to include 20% of SPMs and additional questions, other sections of the score sheet have been updated from last year by reducing points to ensure a total of 100 points maximum.
- 3. Questions added for the following priorities: Addressing the needs of the LGBTQ+ population, inclusion of those with lived experience, and addressing Racial Equity.

CoC Program 2022 Competition Scoring for New Projects

Measurement		Possible points	
	Priorities: Ending Chronic Homelessness, Coordinated Entry, Housing First, System Performance res, Racial Equity, LGBTQ+, Lived Experience, and Mainstream Resources:	40	
1.	Housing Stability. (System Performance Measure) Proposed percentage of clients served in project to meet this outcome. Scoring methodology: 5 points available. Highest percentage of project participants remaining permanently housed at year-end earns full points; the 5 points are prorated from highest to lowest percentage of project participants permanently housed at year end, to lowest. Example if the high is 100% remain in permanent housing at project year-end, and the low is 20% permanently housed, the 100% proposal earns 5 points and the 20% proposal earns 1 points.	5– staff will calculate	
2.	Exits to Permanent Housing. (System Performance Measure) Proposed percentage of clients served in the project to meet this outcome. Scoring methodology: 5 points prorated for the highest percentage of project participants Exit to permanent destinations. Highest rate of income growth for participants at exit earns full points. Ex: If 100% of individuals is the highest rate and the lowest rate is 5%, the high score earns 5 points and the low score earns .25 points	5– staff will calculate	
3.	Increase in earned income. (System Performance Measure) Proposed percentage of clients served in the project to meet this outcome. Scoring methodology: 5 points prorated for the highest percentage of project participants increasing employment income at annual assessment and exit. Highest rate of income growth for participants at annual assessment and exit earns full points. Ex: If 100% of individuals is the highest rate and the lowest rate is 5%, the high score earns 5 points and the low score earns .25 points	5 – staff will calculate	
4.	Increase in non-employment income. (System Performance Measure) Proposed percentage of clients served in project to meet this outcome. Scoring methodology: 3 points prorated for the highest percentage of project participants increasing other income at annual assessment and exit. Highest rate of other income growth for participants at annual assessment and exit earns full points. Ex: If 100% of individuals is the highest rate and the lowest rate is 5%, the high score earns 5 points and the low score earns .25 points	5 – staff will calculate	
5.	Maximizing the use of mainstream resources: Agency plan and commitment to a specific plan for assisting eligible participants with mainstream health, social, and employment programs. Proposed percentage of clients served in project to meet this outcome. Scoring methodology: 4 points prorated for a commitment of up to 100% of participants linked to mainstream resources in new PSH projects. (A 75% commitment earns 3 points; a 50% commitment earns 2 points; a 25% commitment earns 12 points a 10% commitment earns .5 point; a 100% commitment earns 4 points.)	4 - staff will calculate	
6.	Housing First approach and Coordinated Entry: A HF approach identifies, engages, and connects homeless persons with the highest level of need; and works to eliminate any barriers to housing in front of the people that need our help the most. Extent to which narrative reflects how the agency is working to implement a Housing First approach. Scoring methodology: Please see the local questionnaires on Housing First. Reviews will award 0.5 points for each item effectively addressed for 10 questions. 5 points awarded for agency narrative in supplemental questionnaire that includes specific information on accepting new dients, exiting dients, lack of preconditions to entry, reducing barriers, and addressing situations where housing is jeopardized and compliance with Coordinated Entry. 5 points awarded based on score from HUD's Housing First Assessment Tool.	10	

7.	Improving Assistance for LGBTQ+ Individuals: Addressing the service needs of LGBTQ+,		2
	transgender, gender non-conforming, and non-binary individuals and families in agency planning process, employment, and agency anti-discrimination policies.		2
	Scoring Methodology: Full points for addressing service needs, hiring practices, and having		
	an agency anti-discrimination policy; Half points for addressing the needs, but do not have		
	an anti-discrimination policy; and zero points for no action/work pertaining to meeting the		
	needs of this population.		
8.	Racial Equity: Emphasizing system and program changes to address racial equity using proven approaches and partnership with racially diverse stakeholders who		2
	have experience serving underserved populations. Extent to which narrative		
	reflects how agency is working to eliminate barriers to improve racial equity and to		
	address disparities. Such as: review procedures, and processes with attention to		
	identifying barriers that result in racial disparities, and taking steps to eliminate		
	barriers to improve racial equity and to address disparities.		
	Scoring Methodology: Full points for reviewing data and implementing a plan to address		
	these needs as an agency; half points for reviewing the data without implementing a plan;		
	and zero points for no action/work completed to address racial inequities in the agencies		
9.	programming.	-	
9.	Persons with lived Experience: Incorporating Persons with lived experience or those who have formerly experienced homelessness in program planning, policy		2
	development, employment, decision making bodies, etc.		
	Scoring Methodology: Full points for the inclusion of those with lived experience		
	on decision making bodies and with employment opportunities at the		
	organization; half points for only meeting one of the two options for full points;		
	and zero points for no participation from those with lived experience.		
Meas	urement	Possi poir	
Pro	ject Design & Description	2	
			1
	arrative is understandable; project design reflects experience of applicant in working with sed population; applicant understands client needs, type and scale and location of the housing	1	n
	bulation being served, how clients are assisted in receiving mainstream benefits, performance	1	0
	urement indicators for housing and income meet HEARTH benchmarks, plan to assist clients		
	apidly obtaining permanent housing is clear and accessible. * Domestic violence projects		
will b	e evaluated based on the degree they improve safety for the population they serve and		
empl	oy trauma-informed victim centered approaches to service delivery.		
	Bonus: Coordination with Housing and Healthcare (create new projects that coordinate with		
	ng providers and substance use/ healthcare organizations to provide permanent supportive		
	ng and rapid rehousing services) g methodology: 3 points (2 points provided to new projects that have identified partnerships	5	
	hcare organizations or housing providers to provide supportive services/subsidies; 4 points		
	w projects that have a written commitment from a health care organization or housing		
-	der that services or subsidies are being provided that is equivalent to 25% of the funding being		
-	ted; 5 points new projects that will receive subsidized housing units for at least 25% of the		
-	for PSH and 25% of individuals served in RRH not funded through the CoC or ESG Programs or area with a written commitment of 25% convices from healthcare areanizations).		
-	ered with a written commitment of 25% services from healthcare organizations).	 	
	Project readiness: Plan for opening services and housing is understandable, realistic, and	6	i
	y (e.g., open within 90 days of contract execution). Extent to which narrative addresses ited plan for housing placement after technical submission of contract (within 60 days, 120		
	and 180 days)		
	••	Destil	Delate
Measu	rement	Possible	PUINTS
		-	

Budget & Cost Effectiveness	15
11. Budget: up to 6 points for a budget that is reasonable and meets threshold requirements for eligible expenses. Line item narratives document how CoC funds requested are essential to helping people become permanently housed. Cash match is adequate, from appropriate sources, and accurately calculated.	5
A 2-point bonus is available for projects that demonstrate at least 10% of services funding from other "mainstream" federal programs as possible in narratives and budget section, e.g., Medi-Cal funding of services.	
12. Cost Effectiveness: Total Project Budget (including estimated match) ÷ number projected to achieve housing performance measures defined in the project application.	
Scoring methodology: 5 prorated points; lowest cost per successful projected housing outcome earns full points. The difference between the highest and lowest cost per successful outcome is spread over the 5 points to create a deduction factor per added dollar cost. (If the lowest cost per successful outcome is \$100 and the highest is \$200, the \$100 difference is spread over 5 points to create a .05-point factor to be deducted per added dollar. The \$100/outcome project receives 5 points; the \$200/outcome project receives 0 points; a \$135 per outcome project receives a deduction of 1.75 points and a score of 3.25.)	5 - staff will calculate
13. Financial Audit and Health: Scoring based on most recent audit including identification of agency as "low risk", number (if any) of findings, documented match, etc. 5 points = no findings, timely audit, documented match, 3 points = 1 finding in past 3 years, inaccurate/inconsistent match; 0-1 points = multiple findings, late audit, etc.	5 – staff will calculate
Measurement	Possible Points
Organizational Capacity & Local Priorities	24
14. Organizational capacity and experience: Relevant experience of the project applicant and partners, as described in the e-snaps submission and via review of CoC and Supplemental Application.	5
15. Local Priorities: Alignment with 10-year plan goals. 1 point for each goal this is in the project: 1) Evidence of project's collaborations with corrections partners 2) Evidence of SSI/SSDI Outreach Access & Recovery (SOAR) benefits advocacy 3) Evidence of current practices to prioritize chronically homeless or otherwise medically compromised for permanent housing. (Ex: linkage to HOST or linkage to healthcare partners) and 4) Alignment with Upstream Investments and evidence-based practices.	4
Alignment with 10-year plan goals. 1 point for each goal this is in the project: 1) Evidence of project's collaborations with corrections partners 2) Evidence of SSI/SSDI Outreach Access & Recovery (SOAR) benefits advocacy 3) Evidence of current practices to prioritize chronically homeless or otherwise medically compromised for permanent housing. (Ex: linkage to HOST or linkage to healthcare partners)	

 17.HMIS data quality, timeliness and coverage of all programs serving homeless: There are 3 criteria: Universal Data Elements (Name, SSN, DOB, gender, race & ethnicity) are at least 95% complete; Assessment data is entered in HMIS 5 days or less after assessments are administered; Data Validation Reports from HMIS are clean Full points for meeting all 3 criteria; pro-rated points for missing one or more criteria **For Victim Services providers, this will be measured by analysis of data quality submitted by victim services providers that does not contain identifying information. 	10 -staff will calculate
Total	100