

Before Starting the Special CoC Application

You must submit both of the following parts in order for us to consider your Special NOFO Consolidated Application complete:

1. the CoC Application, and
2. the CoC Priority Listing.

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

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

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

CoC Approval is Required before You Submit Your CoC's Special NOFO CoC Consolidated Application

- 24 CFR 578.9 requires you to compile and submit the Special NOFO CoC Consolidated Application on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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1A-1. CoC Name and Number: AL-500 - Birmingham/Jefferson, St. Clair, Shelby Counties CoC

1A-2. Collaborative Applicant Name: One Roof

1A-3. CoC Designation: CA

1A-4. HMIS Lead: One Roof

1A-5.	New Projects	
	Complete the chart below by indicating which funding opportunity(ies) your CoC applying for projects under. A CoC may apply for funding under both set asides; however, projects funded through the rural set aside may only be used in rural areas, as defined in the Special NOFO.	
1.	Unsheltered Homelessness Set Aside	Yes
2.	Rural Homelessness Set Aside	No

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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1B-1.	Web Posting of Your CoC Local Competition Deadline–Advance Public Notice. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Local Competition Deadline attachment to the 4A. Attachments Screen.	
	Enter the date your CoC published the deadline for project application submission for your CoC's local competition.	08/12/2022

1B-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. (All Applicants)	
	Special NOFO Section VII.B.1.a.	
	You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected new project applications during your CoC's 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

1B-3.	Projects Rejected/Reduced–Notification Outside of e-snaps. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4A. Attachments Screen.	
	1. Did your CoC reject or reduce any project application(s)?	No
	2. Did your CoC inform the applicants why their projects were rejected or reduced?	No
	3. If you selected yes, for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	

1B-3a.	Projects Accepted–Notification Outside of e-snaps. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Accepted attachment to the 4A. Attachments Screen.	
	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	10/05/2022
1B-4.	Web Posting of the CoC-Approved Special NOFO CoC Consolidated Application. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Web Posting–Special NOFO CoC Consolidated Application attachment to the 4A. Attachments Screen.	
	Enter the date your CoC posted its Special NOFO CoC Consolidated Application on the CoC’s website or affiliate’s website–which included: 1. the CoC Application, and 2. Priority Listings.	10/18/2022

2A. System Performance

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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2A-1.	Reduction in the Number of First Time Homeless—Risk Factors.	
	Special NOFO Section VII.B.2.b.	
	Describe in the field below:	
	1. how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;	
	2. how your CoC addresses 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 or to end homelessness for individuals and families.	

(limit 2,500 characters)

1.The CoC determined the risk factors to identify persons experiencing homelessness for the first time through HMIS data review, evaluation of Coordinated Entry (CE) data, and discussions with provider agencies regarding the reasons for homelessness. The CoC first time homeless decreased by 496 people, going from 2975 reported in FY2020 to the FY2021 number of 2479. CoC provider agencies believe that the historical risk factors of lack of support, high risk medical needs, economic hardship, etc., are continued reasons for homelessness. The CE Annual Evaluation assessed the CE process including a person’s first experience of homelessness. This review has allowed CE to help identify vulnerable individuals and families to offer prevention services. Through reviewing HMIS data and discussions of risk factors, the CoC Street Outreach team and CE staff are able to identify vulnerable individuals and families to be prioritized for services. The CoC continues to encourage the faith / benevolence community to participate in CE to bolster the amount of data there is to review risk factors to identify persons experiencing homelessness.

2.The CoC’s strategies to address individuals and families at risk of becoming homeless is through strengthening homeless prevention and diversion services. To reduce first time homelessness, the CoC uses a community-developed vulnerability tool, set by local risk factors, to prioritize homeless prevention funds. Whenever a person is identified to be at-risk of homelessness during the initial screening with CE, CE staff engage in problem-solving conversations, and the client is provided with diversion information and referrals to resources in the community for immediate emergency services and other services for the risk factors they are facing. Connection to community resources such as employment and job training services, mental health referrals, legal aid, identification assistance, etc., can potentially divert a person from homelessness. The risk factors are considered in all of the CE triage and assessments to link individuals and families with higher risk to appropriate services based on vulnerability. The CoC works with the CE Advisory Council in marketing and advertising CE to increase access for the community.

3.One Roof is responsible for overseeing the CoC strategy to reduce the number of individuals and families experiencing homelessness for the first time.

2A-2.	Length of Time Homeless–Strategy to Reduce. (All Applicants)	
	Special NOFO Section VII.B.2.c.	
	Describe in the field below:	
	1. your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;	
	2. how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,500 characters)

1. The CoC’s strategy to reduce the length of time individuals and persons in families remain homeless is to increase services that will reduce barriers to housing. The CoC has developed a housing navigator program to create relationships with landlords and identify units more quickly for clients referred from CE and accepted into housing programs to help reduce length of time homeless. The CoC Street Outreach team focuses on connecting unsheltered clients with CE to prioritize them for housing, moving clients directly from the street to PH. In 2022, the CoC held an intensive 2-day training/retraining for all housing providers on Housing First to increase the understanding that the lack of “housing readiness” should not keep a client from housing opportunities. The CoC includes additional points value to this SPM to increase the housing provider’s understanding of the importance of housing individuals and persons in families rather than letting them stay in ES, SH or TH. The CoC continues to develop new partnerships who provide community resources and engagement to help reduce obstacles to obtaining housing. The CoC continues to advocate for the development of safe, decent and affordable housing so that housing stock is available to move clients quickly from homelessness to housed.

2. The CoC identifies, prioritizes, and houses individuals and persons in families with the longest lengths of time homeless through the use of standardized tools in CE. The CoC utilizes the VI-SPDAT, the VI-FSPDAT (for families), and the TAY-VI-SPDAT (for youth 18-24) tools to assess vulnerability and prioritize individuals and families with the highest scores to match them with appropriate housing referrals as the units become available. The CoC has voted to prioritize individuals and families experiencing chronic homelessness for both PSH and RRH programs in order to identify and house those with the longest lengths of time homeless and highest vulnerabilities. The CoC Street Outreach team works closely with CE to maintain engagement with unsheltered clients with the longest histories so they can move directly from the street to PH.

3. One Roof is responsible for overseeing the CoC strategy to reduce the length of time individuals and families remain homeless.

2A-3.	Successful Permanent Housing Placement or Retention. (All Applicants) Special NOFO Section VII.B.2.d.	
	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:	
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and	
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.	

(limit 2,500 characters)

1.The 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 is by reducing barriers that make it more difficult to obtain housing. For example, identification is not required by CoC members for ES, SH, or TH but it is often a barrier to applying for housing. The CoC has increased assistance in helping with this barrier by partnering with organizations who walk a person through the process. The CoC continues to focus on landlord engagement to grow the pool of landlords to provide housing to CoC clients. Through individualized case plans, CoC Case Managers encourage clients to obtain income through mainstream resources, employment or training programs, and to apply for supplemental programs. The CE Advisory Committee has a newly tasked Community Resources Coordination Workgroup who focuses on service expansion and creative problem solving to reduce barriers. The CoC continues to develop partnerships with non-federally funded entities that can pay various utilities, fines, and other monetary barriers that hinder individuals from permanent housing.

2.The 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 is through linking to supportive services and utilizing additional permanent housing opportunities. All CoC programs focus on creating and maintaining this stability by providing strong, supportive services including ties to the community, mainstream resources, after care, and encouraging clients to call for assistance before returning to homelessness. The CoC has prioritized ESG prevention funds to formerly homeless clients to help prevent a return of homelessness. The CoC notifies programs when any Public Housing Authority is opening both the public housing and Section 8 waiting lists to have their clients apply. The CoC has led efforts to roll out the Emergency Housing Vouchers in partnership with the PHA and a network of agencies. The CoC prioritizes clients in PSH and RRH programs as a move-on referral to EHV which in turn has increased openings in every PSH program for more CE referrals of unsheltered and sheltered clients.

2A-4.	Returns to Homelessness–CoC’s Strategy to Reduce Rate. (All Applicants)	
	Special NOFO Section VII.B.2.e.	

Describe in the field below:

1.	how your CoC identifies individuals and families who return to homelessness;
2.	your CoC’s strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,500 characters)

1.The CoC’s strategy to identify individuals and families who return to homelessness is through utilizing HMIS data, CE assessments and evaluation, and the CoC’s Street Outreach team. HMIS and the CoC reporting platform are utilized to record and monitor trends and common factors of clients returning to homelessness as part of CoC monitoring. CE utilizes HMIS and the vulnerability tools to identify clients who frequently return to homelessness. This is factored into the ranking of vulnerability and chronically homeless status. The CE team gathers a client’s history of homelessness, and reviews if the client has completed multiple intakes in the past. During the annual CE evaluation, OnenRoof contacts program clients within a specific timeframe to gather the client’s feedback of the program. Through this evaluation, the CoC has evaluated action steps to help identify and connect clients who may need additional assistance if they are at risk of becoming homeless again. The CoC Street Outreach team is continually building community relationships to strengthen partnerships to better identify clients with high need barriers and returns to homelessness. The CoC meets regularly with a focus group of people with lived expertise to help in all decision making processes. Feedback from the focus group has shown the importance of developing community support in housing to help reduce returns.

2.The CoC’s strategy to reduce the rate of additional returns to homelessness is through detailed assessments, data review, and case management. CE completes the narrative of the client’s detailed history of housing and homelessness over the last three years prior to making a referral to a housing program. In this narrative CE sees if there are any trends or potential reasons for returning to homelessness that can be identified and eliminated. This SPM is reviewed during quarterly Performance Meetings required for CoC funded agencies. Housing First prioritizes connecting clients to safe housing and then CoC agency providers provide voluntary wrap around services to support housing stability and mitigate any problems that might threaten returns to homelessness. The CoC continues to encourage agencies to do consistent follow-up calls to clients after "graduation" to non-CoC funded PH to help identify risk for additional homelessness.

3.One Roof is responsible for overseeing the CoC strategy to reduce the rate individuals and persons in families return to homelessness.

2A-5.	Increasing Employment Cash Income–Strategy. (All Applicants)	
	Special NOFO Section VII.B.2.f.	

Describe in the field below:	
1.	the strategy your CoC has implemented to increase employment cash sources;
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.

(limit 2,500 characters)

1. The CoC's strategy to increase access employment cash sources is to review HMIS data related to employment cash income and to connect individuals and families with job training resources and employment opportunities. This SPM is reviewed during quarterly Performance Meetings required for CoC funded agencies. HMIS will continue to monitor this data for each partner agency and the CoC will work directly with those agencies that show little or no income increase among their clients. HMIS will also continue to monitor this as a data quality issue; the HMIS team has found that there are common errors in recording income. The CoC will continue to work with partner agencies to identify and leverage collaborations with local employment resources and to encourage agencies in setting client employment goals. The CoC is focused on helping facilitate clients to obtain vital documents and identification as they are barriers to employment opportunities. One Roof has created and maintains a career and job training resource list that is updated regularly and shared with clients and partner agencies. One Roof shares information about employment opportunities, job fairs, and job skills training programs through the weekly newsletter that goes out to the CoC and the community.

2. The CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their cash income. The City of Birmingham is a "Ban the Box" employer and the CoC advocates for surrounding geographies and major employers to follow that same policy so that persons with felony convictions will be more likely to find employment. The CoC works with local and state agencies, major employers, employment organizations, and Workforce Development programs specializing in workers with employment barriers. These partners often present at and participate in Membership Meetings and Continuum events to publicize their program and employment availability as well as through the weekly Continuum newsletter. The CoC is often recruiting, growing, and sharing this network of resources to help individuals and families increase employment cash income.

3. One Roof is responsible for overseeing the CoC strategy to increase income from employment.

2A-5a.	Increasing Non-employment Cash Income—Strategy. (All Applicants)	
	Special NOFO Section VII.B.2.f.	
	Describe in the field below:	
	1. the strategy your CoC has implemented to increase non-employment cash income;	
	2. your CoC's strategy to increase access to non-employment cash sources; and	
	3. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 characters)

1. The CoC's strategy to increase non-employment cash income is through data review, reducing barriers, providing resources and referrals, and networking. This SPM is reviewed during quarterly Performance Meetings required for CoC funded agencies. HMIS will continue to monitor this data for each partner agency and the CoC will work directly with those agencies that show little or no income increase among their clients. HMIS will also continue to monitor this as a data quality issue; the HMIS team has found that there are common errors in recording income.

2. To increase access to non-employment cash income, the CoC encourages all member agencies to link their clients with mainstream providers either during the program intake or by providing easy access to benefit applications online. The CoC will continue to provide a SOAR specialist to all member agencies to assist clients apply for Social Security Disability and SSI. The CoC Street Outreach team works directly with those experiencing unsheltered homelessness to connect to mainstream resources. The Outreach team will help clients complete the SNAP application and take it to the field office with and for the client. The CoC will continue to have mainstream benefits agencies make presentations to the Membership, explain the applications process and address specific problems providers experience in the process of assisting clients to apply for and maintain benefits. The CoC works closely with VA and partners who serve Veterans to assist Vets rejected for VA services. One partner agency employs a retired Veteran who is an attorney specializing in upgrading dishonorable or other-than honorable discharges, thus allowing the Vet to get disability compensation/pensions. During an in-depth CE needs assessment, the CE staff will assess with the client potential resources to access - SNAP, SSI, SSDI, TANF, retirement, or alimony - and refers the client appropriately to file for these income sources. The CE Advisory Council is focusing on expanding services to reduce structural barriers and increase capacity to provide better access of services. This Unsheltered NOFO request for One Stop and Peer Outreach supports would greatly enhance the CoC's ability to assist clients with completing applications and would provide a place to get mail for those unsheltered persons.

3. One Roof is responsible for overseeing the CoC strategy to increase non-employment cash income.

2B. Coordination and Engagement–Inclusive Structure and Participation

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2B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry. (All Applicants)	
	Special NOFO Sections VII.B.3.a.(1)	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
23.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
24.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
25.	Other homeless subpopulation advocates	Yes	Yes	Yes
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	No	Yes
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	Yes	Yes	Yes
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Service Providers	Yes	Yes	Yes
	Other:(limit 50 characters)			
33.	Veterans Advocates and Service Providers	Yes	Yes	Yes
34.	Physical and Dental Homeless Health Advocates and Providers other than hospitals	Yes	Yes	Yes

2B-2.	Open Invitation for New Members. (All Applicants)	
	Special NOFO Section VII.B.3.a.(2), V.B.3.g.	

	Describe in the field below how your CoC:
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, other People of Color, persons with disabilities).

(limit 2,500 characters)

1. One Roof website has an invitation to join the CoC prominently posted. An invitation is included in multiple newsletters (going to 1200+ people and agencies) and social media postings throughout the year. CoC members are frequently encouraged to refer others to One Roof for conversations and personal invitations.. During One Roof trainings or presentations to civic, faith, Greek, student, business, etc groups, we discuss benefits of membership and give an open invitation to join.
2. Important information, including invitations, is posted on the One Roof website in PDF format and linked on social media. Print documents are available in our ADA accessible office and we offer a computer and private area available for Read Out Loud Function if desired. One Roof has a contract with AIDB (AL Institute for Deaf and Blind for on-call interpreters as needed.
3. One Roof advertises in the weekly newsletter about how to join the CoC and encourages member agencies to help spread the word to program graduates about how to join the CoC. The CoC Street Outreach team is always looking for people who are interested in giving input in how the CoC is run, whether this be a person experiencing homelessness or formerly homeless person. The CoC held specific focus groups within the unsheltered population by going to agencies where people receive services; one of these agencies works specifically with offenders. During the focus groups, all were encouraged to join the CoC to continue to give their input beyond the group.
4. One Roof annually hosts a workshop on Disabilities and Deaf and Blind Culture and on Latinex culture to help ourselves and our member agencies better understand how to gather and present agency-specific information as well. Multiple Disability Advocacy agencies are on our newsletter mailing list so receive all important information to share with clients. One member agency has a large Latinex program, so we partner with them to get info out, and we regularly communicate with our local Hispanic advocacy organization. This CoC generally has no Indigenous people in homelessness. We have multiple BIPOC-led member agencies and actively solicit others for collaborations and potential CoC participation. The CoC has multiple LGBTQ+ led member organizations and actively solicits others for collaborations and potential CoC participation.

2B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. (All Applicants)	
	Special NOFO Section VII.B.3.a.(3)	

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

(limit 2,500 characters)

1. CoC stakeholder participation in Membership & Board of Directors is reviewed annually and “gap” representatives are personally invited to present to CoC meetings and/or join Membership or Board of Directors. CoC goal is representation of all stakeholder groups. One Roof has a Youth Action Council and conducted an extensive Youth Needs Assessment during 2020/2021 to make certain that voice is represented, and is finding new ways to genuinely involve our youth with lived experience in other CoC work. The CoC has worked hard to increase collaboration with the court system and jails to get their perspective and has a less-than-two-year-old partnership between Birmingham Police Department and our Street Outreach team. The CoC has begun holding listening sessions/ focus groups with various groups such as neighborhoods, government officials, businesses, and persons with lived experience to solicit input on specific situations, general policies, new programs, etc. We expect this to continue with groups meeting at least quarterly.

2. One Roof meetings are advertised on the CoC website, by email, through social media, by newsletter, and invitations are given in person when applicable. Information is then presented verbally and distributed in writing. One Roof works to be included in neighborhood meetings, faith community committee work, and other non-homeless dedicated arenas. Homelessness invariably comes up and One Roof wants to be there to hear what is said and to offer correct information as well.

3. One Roof team members attending meetings/ forums/ workshops gather printed materials, web references, educational links, etc. for reference. All information is brought back to One Roof for discussion and taken to Membership and/or the Board of Directors as appropriate. One Roof sends at least one team member to as many national homelessness conferences and local learning opportunities as is possible on our budget, and brings that information back to the agency, to the governing body, and to the entire continuum as appropriate. These “law” collaborations mentioned in 1B-3(1) have led to non-CoC funding requests for new programs (none funded yet, but this is still a relatively new effort). The CoC has begun hosting a series of Focus Groups around homelessness. While these were started as a part of the Community Planning on Unsheltered Homelessness, the information gathered is being incorporated into this NOFO and into the entire CoC planning process.

2B-4.	Public Notification for Proposals from Organizations Not Previously Funded. (All Applicants)	
	Special NOFO Section VII.B.3.a.(4)	

Describe in the field below how your CoC notified the public:	
1.	that your CoC’s local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,500 characters)

1. The CoC notified the public that the local competition was open and accepting project applications through advertising on the One Roof website, weekly newsletters, and social media. It was also announced during the membership meetings which are open to the public.
2. a) On April 6 and April 12, 2022 One Roof hosted workshops for agencies that had never been HUD CoC funded. Included was information on potential HUD Continuum and ESG funding; financial controls expected of a funded agency; explanations of Housing First, Equity in leadership and client services, and Equal Access; a brief introduction to HMIS; an overview of fundable projects and a very clear invitation to apply for CoC funding when the NOFO is announced. This workshop was announced on the One Roof website, in newsletters to the general public, and was sent to municipal representatives asking that they forward to agencies they knew of.
- b) On August 4, 2022 the CoC announced in a Zoom membership meeting (open to the public and advertised on the One Roof website) that it is accepting new applications from agencies that are not currently CoC funded or that have ever been CoC funded.
- c) On August 5, a timeline with the announcement that applications from non-CoC funded agencies were welcome, was posted on the One Roof website in document form.
- d) On August 8 and August 9 this same announcement was made in Zoom calls that were open to the public. These Zoom calls were advertised on the One Roof website and on social media.
- e) On August 12, 2022 more information on project submission and the announcement that previous funding is not necessary to apply for current funding was added to the website.
3. Information on the process of how project applicants were to submit new and renewal applications was posted on the One Roof website on August 5 in document form and again on August 12 on a Continuum Funding page. This information was shared in publicly advertised and publicly available Zoom meetings on August 8 and August 9.
4. All applications from eligible (CoC membership and participation, nonprofit status, and willingness to participate in CE and HMIS if not DV) agencies are submitted to HUD.
5. Multiple Disability Providers and Advocates are on the One Roof mailing lists and assist us in distributing information. Documents on the One Roof website are posted in PDF format for accessibility. Additionally, print copies of all important announcements/information are available in our ADA accessible office.

2C. Coordination / Engagement—with Federal, State, Local, Private, and Other Organizations

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

2C-1.	Coordination with Federal, State, Local, Private, and Other Organizations. (All Applicants)	
	Special NOFO Section VII.B.3.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC’s geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Nonexistent
2.	Head Start Program	No
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.		

2C-2.	CoC Consultation with ESG Program Recipients. (All Applicants)	
	Special NOFO Section VII.B.3.b.	

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

(limit 2,500 characters)

1. The CoC has phone calls with and attends at least one in-person or virtual annual meeting with the State of Alabama regarding ESG funds. With the City of Birmingham and Jefferson County (ESG and ESG-CV recipients), One Roof attends Public Hearings and offers input on local homelessness/ diversion data. For Jefferson County, One Roof serves on an Advisory Committee around planning and allocation of ESG funds, and collaborated with the County extensively to get ESG-CV funds allocated and reallocated as necessary. With the City of Birmingham One Roof previously has had less input in that planning and allocation process. However, it should be noted that a new City of Birmingham Community Development Director started here April 2022 and has already met with the CoC multiple times to discuss various planning items, ARP funding opportunities and multiple NOFO opportunities, so we expect a higher level of planning consultation with the new ESG fiscal year. One Roof works with all ESG sub-recipients to develop and then refine, based on CE data, the policies and procedures that govern the Continuum implementation of ESG funding (prioritization, eligibility, funding minimums and maximums).
2. One Roof generates and shares the CAPERS used for evaluation and reporting of ESG program recipients and subrecipients. The State, City and County require that ESG subrecipients participate in Coordinated Entry, so plenty of data is available.
3. One Roof attends Public Hearings and submits written comments as appropriate, serves on the Jefferson County Advisory Committee, and provides PIT, HIC, and LSA data directly to all Jurisdictions. PIT data is also listed on the One Roof website and the posting announcement is made in social media.
4. One Roof submits PIT, HIC, and LSA data directly to the Jurisdictions for use in the Consolidated Plan (CP) updates. If the Jurisdictions request information while the CP updates are being done, One Roof shares information and asks for the initial question so that we know the information is being shared appropriately. We offer to link the writer with HMIS data, with the correlating questions in the NOFO applications, or to just provide the response ourselves.

2C-3.	Discharge Planning Coordination. (All Applicants)	
	Special NOFO Section VII.B.3.c.	

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

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

2C-4.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts. (All Applicants)
	Special NOFO Section VII.B.3.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)	No
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

2C-4a.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts–Formal Partnerships. (All Applicants)
	Special NOFO Section VII.B.3.d.

Describe in the field below:

1.	how your CoC collaborates with the entities checked in Question 2C-4; and
2.	the formal partnerships your CoC has with the entities checked in Question 2C-4.

(limit 2,500 characters)

1. The CoC collaborates with education providers working with children and youth. The CoC has several partner agencies who provide youth education services which include tutoring, GED assistance, trade school education, alternative secondary school services, etc., to provide access and opportunities for education, training, employment, and supportive services. Through the monthly membership meetings, planning activities, shared data and best practices, and case conferencing as appropriate, the CoC collaborates with these agencies who work closely with the education entities. Additionally, the Emergency Shelters and Street Outreach team collaborate with local McKinney-Vento school liaisons when a family or youth presents to the shelter to eliminate any barriers.

2. The CoC has multiple formal and informal partnerships with education providers and area school districts. Two examples of formal partnerships include the MOUs the CoC has with both Shelby County Schools and Jefferson County Schools, which are categorized as both a LEAs and school districts. These formal partnerships solidified in writing informal partnerships that have been in place for years. The agreements outline that both County School Boards and their officials actively participate in the CoC and collaborate to quickly identify and connect students and families experiencing or at-risk of homelessness to housing resources in the CoC. Likewise, the CoC projects located in in each county are committed to working closely with education officials if students and families are first identified within the homeless response system. Formal agreements similar to these terms are in the process of being put into place within two other LEAs located within the CoC and several school districts. It is the CoCs hope to reaffirm all informal education partnerships with more formal, written partnerships within the next year.

2C-4b.	CoC Collaboration Related to Children and Youth—Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services. (All Applicants)	
	Special NOFO Section VII.B.3.d.	

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

(limit 2,500 characters)

-The One Roof Board of Directors developed an Education Availability Notice policy following HUD guidelines on McKinney Vento requirements and each Continuum agency that serves families or individuals with school-aged children must comply. On day two of program/ shelter entry, designated staff engage the family to enroll/ re-enroll the children in school, and must inform the families or individuals that they are eligible for various educational services and benefits, including the option for the child to remain in the school where they became homeless. The agency will collaborate with the McKinney school liaison to make certain there are no barriers to the child's education. The procedure is that each agency must appoint a single person/ position who is responsible for making certain this policy is carried out. In most agencies, that is either the Director of Social Work or the Program Director.

-This policy, along with a list of McKinney school liaisons for each school district in the One Roof Continuum, is posted in prominent places in the One Roof CE offices, and has been offered to service providers, libraries, hospitals and multiple other locations homeless families and individuals may frequent.

- Any youth or person with school-aged children calling Coordinated Entry, whether they get a full Assessment or only Diversion Assistance, is informed of their education services eligibility.

2C-5.	Mainstream Resources–CoC Training of Project Staff. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

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

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

You must select a response for elements 1 through 6 in question 2C-5.

2C-5a.	Mainstream Resources–CoC Collaboration with Project Staff Regarding Healthcare Organizations. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations to assist program participants with enrolling in health insurance;

3.	provides assistance to project staff with the effective use of Medicaid and other benefits; and
4.	works with projects to promote SOAR certification of program staff.

(limit 2,500 characters)

1. Annually the CoC hosts Dept. of Human Resources in a membership meeting to update program staff on Food Stamps, TANF, Child Support Programs and Jobs Programs within DHR. One Roof hosts a Social Security workshop for all program staff every two years to cover SSI, Disability, Work Programs, etc. One Roof hosts a panel of SUD programs/providers during a membership meeting to educate on available resources and program requirements. Mainstream and other assistance information is presented during monthly membership meetings, distributed in weekly newsletters, posted on the One Roof website, and is available in office. One Roof offers these resources for member agencies to assist program participants increase income. All clients accessing CE are offered information on available resources.

2. The CoC has several medical member agencies with mobile units that visit shelters, day centers and housing programs to serve clients. The CoC offers education to medical providers on specific needs of those experiencing homelessness and the barriers they face (program access, medication access and storage, continuity of care) and works to connect them with homeless program staff. Several programs have MOU's in place with medical providers. The CoC has multiple housing programs with built in mental health and SUD services. The CoC actively promotes multiple CoC member programs that facilitate medical care including MH and SUD:

- a) AIDS Alabama's (AAI) Enroll Alabama help clients apply for available medical insurance programs;
- b) AAI's Linkage to Care program assists clients with new HIV diagnoses access care;
- c) Recovery Resource Center's peer-staffed program helps those with SUD navigate the system of care. All of these programs work directly with housing programs and the CoC.

3. Alabama is not a Medicaid expansion state; however, several of the CoC agencies leverage Medicaid billing to better support services for clients they are housing through CoC-funded programs. Agencies in the CoC also utilize the SOAR program to help clients receive SSI benefits and Medicaid coverage.

4. One Roof has a dedicated SOAR worker assisting clients referred from agencies, CE and Street Outreach. That worker assists member agency program staff to submit applications. One Roof publicizes the successes of the SOAR program and encourages member agencies to ask for SOAR assistance, to access the training online, and to complete the certification process to better serve clients.

3A. New Projects With Rehabilitation/New Construction Costs

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3A-1.	Rehabilitation/New Construction Costs–New Projects. (Rural Set Aside Only). Special NOFO Section VII.A.	
If the answer to the question below is yes, you must upload the CoC Letter Supporting Capital Costs attachment to the 4A. Attachments Screen.		
Is your CoC requesting funding for any new project(s) under the Rural Set Aside for housing rehabilitation or new construction costs?		No

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3B-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	

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

3B-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	
	You must upload the Project List for Other Federal Statutes attachment to the 4A. Attachments Screen.	
	If you answered yes to question 3B-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)

N/A The CoC is not requesting to designate projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes

4A. Attachments Screen For All Application Questions

Please read the following guidance to help you successfully upload attachments and get maximum points:

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

Document Type	Required?	Document Description	Date Attached
1B-1. Local Competition Announcement	Yes	1B-1. Local Compe...	10/18/2022
1B-2. Local Competition Scoring Tool	Yes	1B-2. Local Compe...	10/18/2022
1B-3. Notification of Projects Rejected-Reduced	Yes	1B-3. Notificatio...	10/18/2022
1B-3a. Notification of Projects Accepted	Yes	1B-3a. Notificat...	10/18/2022
1B-4. Special NOFO CoC Consolidated Application	Yes	1B-4. Special NOF...	10/20/2022
3A-1. CoC Letter Supporting Capital Costs	No		
3B-2. Project List for Other Federal Statutes	No		
P-1. Leveraging Housing Commitment	No		
P-1a. PHA Commitment	No	P-1a. PHA Commit...	10/20/2022
P-3. Healthcare Leveraging Commitment	No		
P-9c. Lived Experience Support Letter	No	P-9c. Lived Expe...	10/20/2022
Plan. CoC Plan	Yes	Plan. CoC Plan	10/20/2022

Attachment Details

Document Description: 1B-1. Local Competition Announcement

Attachment Details

Document Description: 1B-2. Local Competition Scoring Tool

Attachment Details

Document Description: 1B-3. Notification of Projects Rejected-Reduced

Attachment Details

Document Description: 1B-3a. Notification of Projects Accepted

Attachment Details

Document Description: 1B-4. Special NOFO CoC Consolidated Application

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: P-1a. PHA Commitment

Attachment Details

Document Description:

Attachment Details

Document Description: P-9c. Lived Experience Support Letter

Attachment Details

Document Description: Plan. CoC Plan

Submission Summary

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

Page	Last Updated
1A. CoC Identification	08/04/2022
1B. Project Review, Ranking and Selection	10/18/2022
2A. System Performance	10/20/2022
2B. Coordination and Engagement	10/20/2022
2C. Coordination and Engagement–Con't.	10/06/2022
3A. New Projects With Rehab/New Construction	No Input Required
3B. Homelessness by Other Federal Statutes	10/20/2022
4A. Attachments Screen	10/20/2022
Submission Summary	No Input Required

1B 1 Web Posting of Local Competition

Browser tabs: Coc Funding - One Roof, Coc Funding - One Roof, Coc Funding - One Roof, Coc Funding - One Roof

Address bar: https://cal-flamingo-7jgw.squarepace.com/config/pages

Page Title: Coc Funding - One Roof

Page Content:

Coc Funding Opportunities

HUD Information

One Roof is the lead agency responsible for submitting the notice for funding to Housing & Urban Development (HUD). This continuum brings in around 10 million dollars for funding to agencies who provide housing services each year. The continuum votes on grants which objects will be funded for the next year grant cycle in order to be considered for HUD funding, an agency must:

- Attend 80% of membership meetings.
- Be current in membership dues.
- Participate in One Roof events. (Point in Time, Carboard Connect, Project Homeless Connect)

Below are all the HUD documents including the Coc application, ranking and scores and important deadlines and timelines of the NCF/A

REGULAR CONTINUUM FUNDING OPPORTUNITY 2022

RATING AND RANKING TOOL 2022

PROJECT RANKING RESULTS 2022

UNSHeltered NEW PROJECT SCORING & RANKING TOOL

REQUEST FOR PROPOSAL UNSHELTERED NOFO PROJECTS 2022

IMPORTANT INFORMATION

Monday August 8, 2022 Zoom meeting to review Rating and Ranking Tool (open to public)

Topic: Coc NCF/C Rating and Ranking

Time: Aug 8, 2022 02:30 PM Central Time (US and Canada)

Navigation: HOME, Q, EDIT

MAIN NAVIGATION:

- About Us
- Missio
- Financials
- One Roof Team
- Board of Directors
- Yield Base
- Missio Action
- Join Our Team
- ADD PAGE
- Programs
- Coordinated Entry
- SOAP
- HMIS
- Housing Placement
- Education & Advocacy
- ADD PAGE
- Get Involved
- Adopters
- Volunteer
- Donate
- Events
- ADD PAGE
- Continuum of Care
- COC Funding
- ESB Funding
- Fast-Track Partnership
- ADD PAGE
- Community Services
- CE Metrics Report
- System Performance Measure
- Participate Data
- Planning System Data
- ADD PAGE
- Members
- Member Organizations

Search: Type here to search

System tray: 83°F Partly sunny, 3:45 PM, 9/15/2022

Deadline included in timeline for proposals in Request for Proposals

Request for Proposal Unsheltered | Coc Funding - One Roof | (1) One Roof: Uniting Central Al... | Logout

facebook

Manage Page One Roof: Uniting Central Alabama to End Homelessness

Home Professional Tools Insights Ad Center Create ads Create Automated Ads Boost Post Boost Instagram Post Link WhatsApp Meta Business Suite

Intro
 Mission: "Equipping and empowering our community to prevent and end homelessness through advocacy."
 Edit bio

Page · Housing Assistance Service
 1515 6th Ave S, Ft 5th, Birmingham, AL, United States, Alabama
 +1 205-593-4338
 info@oneroofonline.org
 oneroofonline.org
 Promote Website

Closed now
 Price Range · \$
 Rating · 4.2 (28 Reviews)
 Add diversity info

Edit details
 Add hobbies
 Add featured

Request for Proposal Unsheltered

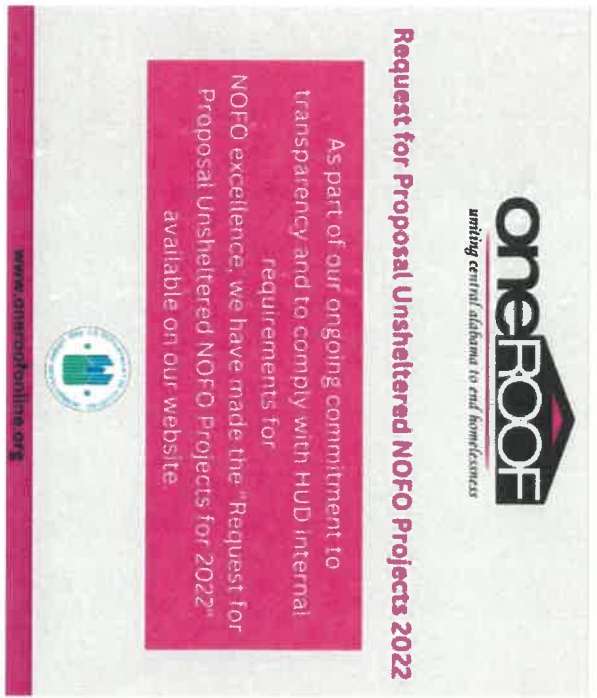
See insights and ads

Boost post

Request for Propo...png PROJECT RANKIN...png

Type here to search

84°F Mostly sunny 4:22 PM 9/15/2022



Request for Proposal Unsheltered... Coc Training - One Roof

Instagram

Request for Proposal Unsheltered... PROJECT RANKIN...png

Instagram

New Posts

oneroofham

Request for Proposal Unsheltered NOFO Projects 2022

As part of our ongoing commitment to transparency and to comply with HUD Internal requirements for NOFO solicitation, we have made the "Request for Proposal Unsheltered NOFO Projects for 2022" available on our website.

oneroofham Copy and paste this link in your browser to view... more

Add a comment.

View Insights

Suggestions For You

oneroofham One Roof

allhrive Followed by familyfromweb.com/ham

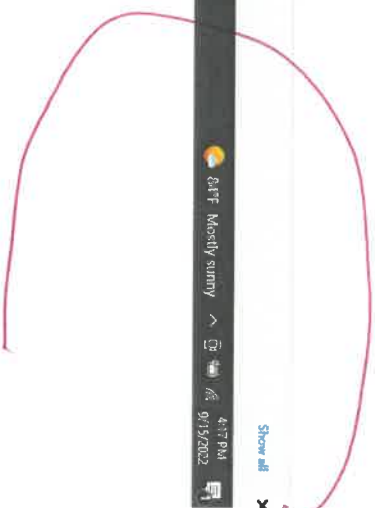
avondale_samaritan_place Followed by 15k14ppwzodhdm0p4m1

woodlawwunichham Followed by 10k14ppwzodhdm0p4m1

oneplec7jc Followed by 10k14ppwzodhdm0p4m1

justseraalibham Followed by 10k14ppwzodhdm0p4m1

4:17 PM Mostly sunny 9/15/2022



1B 2 Local Competition Scoring Tool

NEW PROJECTS RATING TOOL

Project Name: _____
 Organization Name: _____
 Project Type: _____
 Project Identifier: _____

RATING FACTOR	POINTS AWARDED	MAX POINT VALUE
EXPERIENCE		
A. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.	<input type="text"/>	out of 15
B. Describe experience with utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, actual or perceived sexual orientation, gender identity. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases.	<input type="text"/>	out of 10
C. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.	<input type="text"/>	out of 5
Experience Subtotal	0	out of 30
DESIGN OF HOUSING & SUPPORTIVE SERVICES		
A. Extent to which the applicant	<input type="text"/>	out of 15
1. Demonstrate understanding of the needs of the clients to be served.		
2. Demonstrate type, scale, and location of the housing fit the needs of the clients to be served		
3. Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served.		
4. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits		
5. Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.		
B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.	<input type="text"/>	out of 10
C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently.	<input type="text"/>	out of 5
D. Project leverages housing resources with housing units not funded through the CoC or ESG programs.	<input type="text"/>	out of 5
E. Project leverages health resources, including a partnership commitment with a healthcare organization.	<input type="text"/>	out of 5
Design of Housing & Supportive Services Subtotal	0	out of 40
TIMELINESS		
A. Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award.	<input type="text"/>	out of 5
Timeliness Subtotal	0	out of 5
FINANCIAL		
A. Project is cost-effective - comparing projected cost per person served to CoC average within project type.	<input type="text"/>	out of 5
B. Audit	<input type="text"/>	out of 5
C. Documented match amount	<input type="text"/>	out of 5
D. Budgeted costs are reasonable, allocable, and allowable	<input type="text"/>	out of 20
Financial Subtotal	0	out of 30
PROJECT EFFECTIVENESS		
Coordinated Entry Participation- 100% of entries to project from CE referrals	<input type="text"/>	out of 5
Project Effectiveness Subtotal	0	out of 5
EQUITY FACTORS		
Agency Leadership, Governance, and Policies		
Recipient has BIPOC individuals in managerial and leadership positions	<input type="text"/>	out of 10
Recipient's board of directors includes representation from persons with lived experience	<input type="text"/>	out of 10
Recipient has process for receiving and incorporating feedback from persons with lived experience	<input type="text"/>	out of 20
Recipient has reviewed internal policies and procedures with an equity lens and has a plan for updating policies that currently center white dominant culture	<input type="text"/>	out of 10
Program Participant Outcomes		
Recipient has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age	<input type="text"/>	out of 10
Recipient has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes	<input type="text"/>	out of 10
Recipient is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and/or age	<input type="text"/>	out of 10
Equity Factors Subtotal	0	out of 80
OTHER AND LOCAL CRITERIA		
Project is operating in compliance with the Final Equal Access rule regarding Family Separation	<input type="text"/>	out of 15
Project is operating in compliance with the Final Equal Access rule regarding Gender Identity	<input type="text"/>	out of 15
Other and Local Criteria Subtotal	0	out of 30
TOTAL SCORE	0	out of 220
Weighted Rating Score		out of 100

PROJECT FINANCIAL INFORMATION

CoC funding requested	\$	-
Amount of other public funding (federal, state, county, city)		
Amount of private funding		
TOTAL PROJECT COST	\$	-

1B 3 Notification of Projects Rejected/ Reduced

***No projects were Rejected or Reduced

1B 3a Notification of Projects Accepted



Michelle Farley <michelle@oneroofonline.org>

unsheltered nofo projects

Michelle Farley <michelle@oneroofonline.org>

Tue, Oct 4, 2022 at 2:05 PM

To: Anne Rygiel Wright <arygiel@firehouseshelter.com>

Anne, thank you for submitting proposals for a Safe Sleeping Area project and for a Medical Respite Project.

Both of the projects will be submitted for HUD funding consideration.

Safe Sleeping was Ranked #1 to be funded at your full request of \$1,053,800 annually and a total 3-year grant of \$3,161,400.

Medical Respite was Ranked #3 to be funded at your full request of \$320,500 annually and a total 3-year grant of \$961,500.

I look forward to further conversations on these projects.

Michelle

—

Michelle Farley (she, her)

Executive Director, One Roof

1515 6th Avenue South

Birmingham, AL 35233

205.254.8833

www.oneroofonline.org

Uniting Central Alabama to End Homelessness



Michelle Farley <michelle@oneroofonline.org>

Special NOFO project notification

Michelle Farley <michelle@oneroofonline.org>
To: Gordon Sullivan <gordon@oneroofonline.org>

Wed, Oct 5, 2022 at 3:46 PM

Gordon, as required by HUD, this is notification that the three projects submitted by One Roof are going to be submitted to HUD for funding consideration.

The project for Street Outreach will be a Collaborative one with Recovery Resource Center and Community on the Rise as subrecipients. Total for the collaboration is annually \$474,690 and for the 3-year grant \$1,424,070, and it was ranked #4.

The One Stop Center and the Planning grant will be submitted as well.

The One Stop was ranked #3 and will be submitted for funding at your requested annual amount of \$899,690 and for the 3-year grant \$2,699,070.

Planning was ranked #5 and will be submitted for funding at your requested annual amount of \$82,560 and for the 3-year grant \$247,680.

Michelle

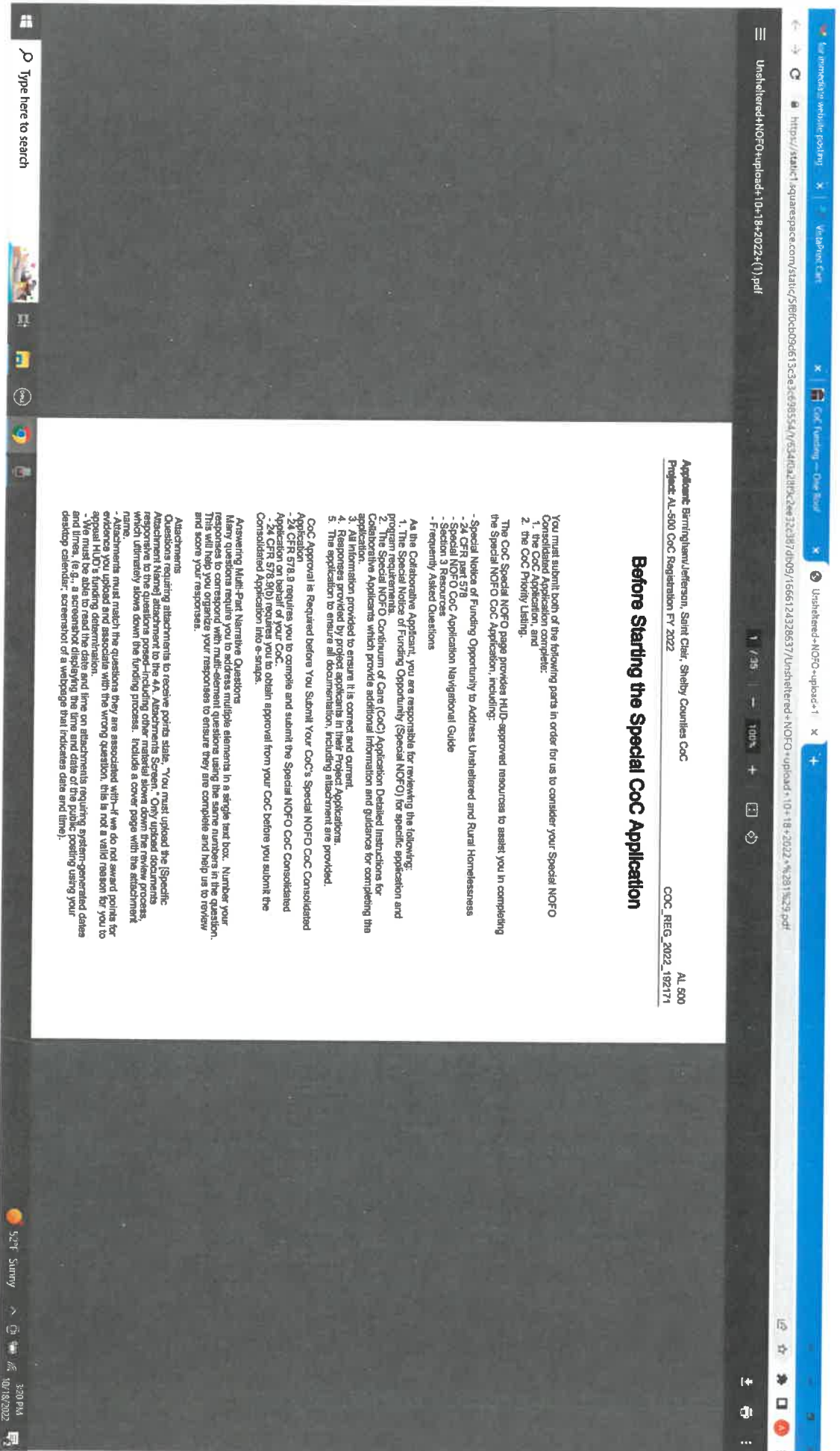
--

Michelle Farley (she, her)
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205.254.8833

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Uniting Central Alabama to End Homelessness

1B 4 Web Posting Special NOFO
CoC Consolidated Application



Browser tabs: One Good Meal, seipoint.com, Home - EViews, The Coc Special NOFO is now available, Coc Funding - One Good Meal, Instagram

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- System tray: 5:27 PM, Sunny

P-1a PHA Commitment



HOUSING AUTHORITY OF THE BIRMINGHAM DISTRICT

President and Chief Executive Officer
Dontrelle Young Foster

Board of Commissioners
Anthony C. Hood, Chairman
D.G. Pantazis, Jr., Vice-Chairman
DeJuana J. Thompson, Commissioner
Abra A. Barnes, Commissioner
Willie J. Lewis, Commissioner

October 19, 2022

Michelle Farley
Executive Director, One Roof
1515 6th Avenue South
Birmingham, AL 35233

Ms. Farley,

The Housing Authority of the Birmingham District is excited to continue our partnership with One Roof. HABD is committed to explore opportunities to pair both existing and new vouchers with CoC-funded supportive services. Pairing the two together will ensure vulnerable populations in our region have full access to permanent housing and can be successful maintaining the same. HABD is also committed to work with One Roof to develop a plan to prioritize Stability Vouchers and evaluate a preference for the HCV program for individuals and families referred from the coordinated entry process, particularly for those experiencing or at risk of homelessness, or attempting to flee domestic violence, dating violence, sexual assault, or stalking.

One Roof has been a great partner to HABD in the administration of the Emergency Housing Voucher program and we look forward to expanding the partnership for the benefit of families in need.

Thank you,

Seth Embry
Chief Operating Officer



JEFFERSON COUNTY
HOUSING AUTHORITY

3700 Industrial Parkway
Birmingham, Alabama 35217-5316

205-849-0123

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Better Communities, Brighter Futures - Moving Beyond Expectations!

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October 19, 2022

Michelle Farley
Executive Director, One Roof
1515 6th Avenue South
Birmingham, AL 35233

Ms. Farley:

The Jefferson County Housing Authority is excited to continue our partnership with One Roof. JCHA is committed to explore opportunities to pair Stability Vouchers with CoC-funded supportive services. JCHA is committed to collaborate with One Roof to develop a plan to prioritize Stability Vouchers for individuals and families referred from the coordinated entry process, particularly those experiencing or at risk of homelessness, or attempting to flee domestic violence, dating violence, sexual assault, or stalking.

One Roof has been a great partner to JCHA in the administration of the Emergency Housing Voucher program, as well as our Continuum of Care program. We look forward to expanding this partnership.

Thank you,

Hannah Gore
Executive Director

P-9c Lived Experience Support Letter

October 18, 2022

To whom it may concern:

We are a Community Planning Committee of five diverse people who have experienced unsheltered homelessness, some of us spending years on the streets. We are generally referred to as the People with Lived Experience Community Planning Committee (PLE-CPC). One of us is currently unhoused but working with the CoC to identify permanent housing options, two have been in permanent housing this time less than a year and one is still in a transitional type situation. Our group is made up of male and female, black and white, those with lengthy incarceration histories and those who were never incarcerated. We have been business owners, victims of violence, and have participated in various CoC programs and services. Some are pet guardians and some are single parents of young children. Some of us are currently working and others are still doing the street hustle because of very complicated ID barriers making taxed work impossible. All of us struggle with some type of disability, whether that is a physical condition or a mental health issue. Some of us struggle with addiction and some have never encountered that barrier. We have varied levels of formal education and have all been anxious to share our “lived experience and street education” during this process to inform the priorities and determine the **One Roof Continuum’s Plan to Reduce Unsheltered Homelessness**.

We have participated in our own focus groups and we have reviewed the information from other focus groups including those specifically for business owners affected by unsheltered homelessness, for municipal officials in areas with significant unsheltered populations, for medical professionals serving homeless and unsheltered people, and for specific subgroups of unsheltered persons (such as those with extensive incarceration histories). We found it interesting that each of those focus groups, no matter how different the participants, had some shared commonalities.

A few shared themes:

- 1. Unsheltered homelessness is financially costly for people experiencing homelessness, for businesses, the medical community and the municipalities.*
- 2. There is an overall lack of knowledge of the available resources as well as the various processes for accessing those resources. This applies to the people in need of resources, the general public, businesses and municipalities and those providing services themselves. Interesting item in particular is that the service providers most well-known to businesses, municipalities and the general public are ones that we, the people with lived experience, know do the least for those who are chronically homeless, unsheltered, and have severe service needs.*
- 3. Unsheltered homelessness comes with safety issues for those experiencing homelessness and for those operating businesses or other groups close to unsheltered homelessness, particularly encampments.*

Some shared system change suggestions:

- 1. Prison reform so that people are not discharged into homelessness without resources.*
- 2. Identify, review and revise policies that contribute to unsheltered homelessness including the very definition of homelessness (especially coming from Transitional Housing and*

Substance Use Disorder programs); being released from jail/ prison without ID; and being transporting from other area hospitals, jails and rural areas to local shelters just to be dumped.

- 3. Work with municipalities to develop policies that DO NOT criminalize homelessness, but DO work to discourage encampments, especially those with criminal activities. Panhandling strongly suggested to be one of these issues.*

Shared suggested programs:

- 1. Voluntary safe sleeping area for tents, cars, "tiny shelters," or other. Must be in area not challenging for neighborhoods or businesses and services MUST be provided.*
- 2. Education for ALL stakeholders on services that are available and how those services should be accessed. This should include a kept-current resource guide written for those on the streets.*
- 3. Peers "on the ground" to help those who are unsheltered access available resources.*
- 4. Crisis Intervention Team. Could be police, social worker, peers, mental health providers. Could be primarily a mental health provider...would be to address the challenges of accessing mental health care and mental health medications for those living unsheltered.*
- 5. Single person within the Mayor's office/ County Commission/ City Council who is knowledgeable about homelessness and is properly connected to address issues.*
- 6. Day Center/ Drop-in Center/ One-Stop Center. Should be a place to plug electronics, store valuables, get mail, receive rotating services, be a permanent Warming/ Cooling Station, get job assistance, access computers and receive computer assistance, take showers, do laundry, and especially to have peer support groups.*
- 7. Medical Respite Unit for people being discharged from hospitals into homelessness or to prevent hospitalization for those who are sick and unsheltered.*

We the members of the PLE-CPC evaluated all of this information and chose four specific programs we believe will greatly reduce the number of people living unsheltered in our Continuum of Care. (We would like to note that more than a year ago another Birmingham planning group suggested that our community needs Safe Sleeping, a Day Center, and Medical Respite.) One Roof then widely-distributed a Request for Proposal for the projects we chose.

Project 1: Birmingham needs a joint Safe Sleeping Area and Day Center/ One Stop Center.

- o Safe Sleeping Area: This could include space for people living in their cars, people living in tents, and/or Tiny Shelters. This is not to be designed as a permanent home (not an RV Park), but as the name suggests, should be a safe place for unsheltered people to get quality rest so that they have the ability to then access services including various housing options. There are many iterations of this idea, and the PLE-CPC is not wed to one idea; their only requirements are safety and attached services.*
- o Day Center/ One Stop Center: As with a safe sleeping area, there are many iterations of this idea, but the PLE-CPC has a few "absolutes." The Center must be staffed primarily with PLE's. It must be safe. It must offer food that is known to be prepared and distributed safely (and healthy would be a plus!); showers; laundry; a place to receive mail; ID assistance; a place to charge electronics; job assistance that includes computers and computer assistance; SUPPORT*

GROUPS...not just the normal AA and NA groups...the PLE-CPC is insistent that Peer Support Groups run by and featuring PLE's are mandatory; a place to relax and plan; and on a rotating basis services such as medical, dental, mental health and other (these might be offered monthly or bi-weekly). Note that this project should be designed for the unhoused population. This is not meant to be a program for people already in shelters or transitional programs.

Project 2: Peer Outreach and Support Team

Birmingham needs a much larger Street Outreach Team than we have, and 100% of the expanded team members should be PLE's. This team of five (number is negotiable) persons will develop housing focused relationships with those on the streets who are currently most resistant to services. These staff members will be mentors/ buddies/ sponsors to and for those who are unsheltered. Some of these team members will be people with prison/ felony/ lengthy incarceration histories. They will be examples of success, will hold hands, encourage, push...and will walk an unsheltered person through the process of getting housed. This team will also work as support after housing to help provide a sense of community and to assist that newly housed person to get connected to community. The reasoning is that a person living on the streets has a community of peers, and when they are housed, they lose that community. We must help them replace that supportive community. This team must work as either a part of the current Street Outreach team or work hand-in-hand so that there is no duplication of services, so that the most vulnerable are identified, and to produce the best housing outcomes possible. It shouldn't have to be said that this team must be paid equitably.

Project 3: Mental Health Street Team

The PLE-CPC would prefer to have a team that includes a specially-trained police officer, a highly trained mental health professional (Psychiatric Nurse Practitioner at least), a mental health social worker, and one to two PLE's. However, after discussion of current policing needs in Birmingham, they feel that the police member is an ultimate goal, but probably not feasible at this time and that we do not need to wait until that "perfect" is possible. Therefore, a team that includes the mental health professional, the mental health social worker, and the one or two PLE's is their goal with this proposal. This team will work non-traditional hours and this team will NOT sit behind a desk! This team will be on the streets addressing the mental health issues where they are. This team should be able to address the lack of mental health medications readily available to those who are unsheltered. This team must work in a highly collaborative manner with SUD groups, the existing and newly proposed Outreach teams, the Continuum, the existing medical and mental health community, and all community stakeholders.

Project 4: Medical Respite Unit

The PLE-CPC and other focus group participants are very concerned about the circle of unsheltered persons going from the streets to the hospital and back to the streets. This Planning Process recommends that a medical respite unit could address this issue. It is important to note that this is NOT a nursing home situation and there would have to be strict guidelines on who would be admitted to a Medical Respite Unit. This is an excellent opportunity for SYSTEMS savings and collaborations. We know that treating unsheltered

people is exceedingly expensive for hospitals and EMT's/ the Fire Department so both service and financial collaborations are strongly encouraged to benefit those institutions and the people they serve.

Please note that other suggested programs include but are not limited to the following. We are NOT requesting Proposals for the following:

- a) Education for agencies on their own programs...seems that the larger the agency, the less consistency there is in their messaging on services available and program requirements and provisions.*
- b) Education for our entire geography – businesses, municipalities, service providers AND the unsheltered – on resources that are currently available. The consensus is that the “known” agencies don't really serve the unsheltered population and those that do provide the services are not known. Some services are time limited but that is not publicized. Some resources are exceedingly limited, and it is not publicized when they are exhausted. This results in a great deal of frustration for unsheltered persons when they do try to access services, and they may well just give up trying to get help after constant denials of service.*
- c) Education on service gaps for the General Public attempting to serve unsheltered persons. The consensus is that a lot of people provide things that are important to them but are duplications of service or are unhelpful to getting people off the streets (public feedings was listed specifically).*
- d) Education on client-based protocols and Trauma Informed Care for all stakeholders attempting to serve unsheltered persons. This applies to governmental bodies including the Food Stamp Office, Social Security and police officers; medical, dental, mental health and substance abuse providers; the faith community; and certainly anyone calling themselves a homeless service provider. One particularly touching example of this was faith groups that frequent prisons but do not welcome into their congregation the person when they are released from prison.*

When the projects were submitted to One Roof we were disappointed to find that there was no proposal for a Mental Health Street Team. However, we were pleased to evaluate proposals for a Peer Outreach and Support Team, for a Medical Respite Program, for a Safe Sleeping Area, a Day Center/ One Stop facility and then a Planning Project. While we envisioned a joint Safe Sleeping/ Day Center, we understand how starting such a large program could be intimidating, and we support splitting them into two projects at this time.

We the PLE-CPC group reviewed all of the projects, scored the projects using the HUD New Project Scoring Tool, and then we ranked the projects. We chose to alter the ranking slightly from what the Scoring Tool alone would indicate because we feel strongly that the Safe Sleeping and the Day Center should be the highest priority. While all of the projects are important to reducing unsheltered homelessness, our lived experience tells us that everyone currently sleeping under bridges or “housed” in the sewer tunnels; those who cycle on and off the streets for years; those who suffer physical, emotional or sexual violence; and of course those with disabilities, need to be able to sleep without fear of violence, and should have ready access to all of the

services needed to leave the streets. That is why we moved Safe Sleeping and the Day Center to numbers one and two. We are all in agreement that the combination of all of the submitted projects will be this community's best plan for significantly reducing unsheltered homelessness and we support One Roof's submission for this special NOFO.

We would also like to emphasize that our efforts do not end with this request for HUD funding; there are other community changes that need to happen as well, more projects that require less or no funding, and systematic shifts in policy that we wish to be a part of.

Thank you.

James Bell James Bell

Chester Coldman Chester Coldman

David King David King

JoAnn Moak JoAnn Moak

Kenny Rodgers Kenneth T. Rodgers

PLAN CoC Community Plan to Reduce Unsheltered Homelessness

P. Introduction: One Roof, like many other CoC's has felt the constraints of HUD's timetables with the shortened grant period of the regular NOFO and having the extensive planning process of the Unsheltered NOFO on top of that. We strongly feel that more time would have resulted in a more detailed and polished Community Plan to reduce unsheltered homelessness, but we also are excited about submitting what we have, getting funded, and executing the plan that a diverse community of stakeholders has worked hard to develop. We are also thrilled at the passionate participation by our Persons with Lived Experience- Community Planning Committee (PLE-CPC) and look forward to next steps with this amazing group of people.

P-1. Leveraging Housing Resources

P-1a. Development of New Units: While no narrative is required, please note that NONE of the PLE-CPC group said the greatest community need is for additional housing. While that group does not say housing is unnecessary, they were clear that various supportive services are more important at this time, and strongly believe that provision of those services would result in housing more of those with the most severe service needs, would greatly decrease the length of time those with these great needs stay homeless, and would increase the length of time someone with a long history of unhoused homelessness is able to maintain housing. Because of the wishes of the PLE planning group, the Request for Proposals for this NOFO did not include PH or PSH projects. That being said, the City of Birmingham is a House America City and September 2021 Mayor Woodfin committed to housing 450 homeless families and individuals and to leveraging private dollars to have 800 new units of affordable housing finished or "in the pipeline" by December 2022.

P-1b. New Units PHA Commitment: Please see attached

P-1c. Landlord recruitment

P-1.c 1. Describe the current strategy for landlord recruitment. Our CoC has a Housing Placement Specialist (One Roof staff member) dedicated to recruiting and retaining landlords (LL) for all CoC- and ESG-funded projects. Previously, each housing provider recruited their own landlords, but now our CoC is leveraging these existing LL relationships in a collaborative way to create a stronger coalition of LLs and a more efficient housing search experience for program participants. This Housing Placement Specialist attends neighborhood association meetings to engage with community members, meets individually with new and existing LLs to cultivate relationships, provides housing search assistance to clients who have received housing referrals through Coordinated Entry, and acts as a mediator for issues that may arise among the LL, client, and the housing provider. All of these relationships and activities are valuable connections to make and maintain in order to identify wants, needs, and to set expectations. As a companion to this personal relationship strategy, our CoC has also adopted a strategy to create infographics and marketing materials which explain the benefits of each housing program in a way that is more logical and easy to understand. These materials are distributed widely.

P-1.c 1a. Demonstrate how well the strategy works.... Through this LL outreach strategy our CoC has broadened our network to reach additional LLs, real estate professionals, and other affordable housing options in our CoC. At least two new LLs/property managers, who manage multiple properties and units across the CoC's three-county geographic area, have committed to leasing units to program participants receiving tenant-based rental assistance. This has increased the number of potential units in the CoC.

P-1.c 1b. Demonstrate how well the strategy works...Historically, it has been less difficult for the CoC to identify housing units within the City of Birmingham and much more difficult to find available housing options within Jefferson County and other parts of the CoC. By actively recruiting LLs, intentionally seeking out diverse housing options, and educating property managers, our CoC has been very successful in identifying units in new, previously untapped, areas of the CoC. It should be noted that, while these new housing options are exciting, there is still insufficient availability of safe, decent, and affordable housing.

P-1.c 2. Identify any new landlord recruitment strategy: The newest strategy and practice implemented (less than 1 year ago) in our CoC has been the creation of the Housing Placement Specialist position within the Coordinated Entry team, serving all CoC- and ESG-funded housing projects. Consolidating our LL recruitment practices has led to a more streamlined approach for matching program participants to willing LLs. This process did come with some lessons learned, including the challenges faced to obtain buy-in for all CoC housing providers (some are protective of their longer-term LL relationships) and the barriers and common limitations of braided funding streams to support LL incentive/ recruitment efforts.

P-1.c 3. Describe how your CoC will use data...: This CoC will use data from HMIS, from HIC, from PIT and even information from PHA's to update the LL recruitment strategy. Data points utilized include client income, income sources, age, household structure, disability status, and address data to help determine the location of units needed, the size (sq. footage, bedrooms) and disability accessibility of units needed, etc. For example, clients with higher service needs may require easier access to public transportation and specifically accessible units (units for those who are deaf, those who have mobility issues, units that are very close to hospitals for those with life-threatening disabilities). Of the 2849 people who entered the homeless system in the last year, 555 reported physical disabilities. HMIS disability data points guide these LL recruitment updates. In the case of clients with disabilities that qualify them for PSH programs, LL recruitment must also identify LLs willing to accept Permanent Supportive Housing (PSH) payments at Fair Market Rent (FMR) for those units. HMIS data says that many clients rely on social security benefits to pay rent, so if no PH or PSH assistance is available, we must target landlords with properties that do not exceed 30% of that client's monthly income. Housing Inventory Count (HIC) data indicates that 30% of the CoC's PH beds are dedicated to households with children and more than 50 families were housed through CE last year. In an effort to minimize disruption in the lives of school-aged children experiencing homelessness, we use address information from families to target LLs in those school districts to help clients remain or regain stability. We utilize data from PHA's as well. For example, one smaller PHA in our CoC is open to prioritizing homeless families and individuals. However, they have one-third of their assigned vouchers going unfilled because of lack of identified landlords willing to accept those vouchers, so housing anyone is a challenge. One Roof LL strategy is being updated to target that area for LL recruitment to assist clients who want to live in that geography. HMIS data indicates that 45% of clients entering the homeless system last year had cash income. Outcomes data from HMIS indicates these clients can do well in Rapid Rehousing, Housing Choice and Emergency Housing Voucher programs. This guides the LL strategy to identify LLs that will actually accept the vouchers.

P-2. Leveraging Healthcare Resources – New PSH/RRH: no narrative required because there were no applications for new PSH/RRH projects using Healthcare Leveraging. There is a Medical Respite application that is Supportive Services Only that has 25% match, but the applying agency was unable to

get commitments for higher leverage from health care providers for a suggested project that may not start for at least 12 months.

P-3. Current Strategy to Identify, Shelter, and House Individuals and Families experiencing unsheltered homelessness

P-3a. A. Identify Evidence Based Practices: The One Roof 4-person, full-time street outreach team (SO) working through Coordinated Entry uses evidence-based practices to conduct street outreach. The outreach is systematic, coordinated and comprehensive, covering 100% of the three-county CoC geography. Field work (bridges, overpasses, abandoned buildings, libraries, emergency rooms, the limited day services frequented by unsheltered persons, etc.) is done 5 days per week with fluctuating hours depending on weather, population being sought, time of year, levels of violence in an area, etc., with some teams remaining on call 7 days per week during inclement weather. The One Roof SO works closely with specialized outreach teams run by partner agencies for veterans, unaccompanied youth, the Latinex population, those who identify as LGBTQ+, and those with one or more Serious Mental Illnesses. One Roof hosts case management monthly meetings with other outreach teams to deduplicate and maximize services. The County Health Department coordinates with the SO team by training all SO in Narcan usage and occasionally having an employee accompany SO in the field to address disease transmission and prevention, to provide Narcan, or to promote use of fentanyl testing strips to prevent overdose deaths. One Roof partners with the Birmingham Police Department to have specially chosen officers work collaboratively with SO when needed, but also work on their own to refer to any available services rather than arresting an unsheltered person. These officers then share these practices with fellow officers. Outreach uses progressive engagement and is housing centric: The One Roof SO housing first, housing focused, emphasizes safety (for clients and staff) and harm reduction, and is of course confidential. The first choice of SO is to move a person directly from the streets into permanent housing. Most of the CoC PH and PSH programs honor that and the largest CoC PHA offers that option as well. Currently only one CoC PSH program does NOT function with housing first practices. Outreach is client focused and culturally responsive, always emphasizing choice in services and housing (if multiple options are available). Coordinated Assessments can be done in the field with the client, and One Roof contracts with translation agencies so that various languages including ASL (via video) are available in the field if needed. The CoC has diverse providers, including those employing and led by people of color. All outreach teams, whether One Roof or a partner, are trained in Trauma Informed Care and victim-centered services. Outreach does a Warm Hand-off to facilitate a smooth transition from streets to housing. This helps the client gain trust in the new agency and helps prevent any confusion as to whom/ what agency can assist, a practice which ultimately helps the client succeed in housing. Outreach has PLE's on the team. One Roof recognizes the value of lived experience (and pays accordingly) when assisting people with high service needs, particularly for people living on the streets, and works to always have peers on the SO. Turnover is higher in this segment of the team and we are exploring potential reasons for that to minimize said turnover and increase the consistency which we know is important when building relationships on the streets. Partner agencies are encouraged to have peer outreach (and other agency positions) members. Part of the Community Plan includes a larger, peer-specific outreach team.

P-3a. B. Demonstrate that CoC strategies are based on data and performance: All One Roof SO strategies are based on data and performance. Non-HMIS Data utilized in the entire SO process include By-name lists; mapping of encampment locations; information from outreach providers not utilizing

HMIS including First Responders; and gathering information from PLE's both sheltered and unsheltered for feedback on Outreach processes, protocols and gaps. One Roof SO records all contacts in HMIS and strongly encourages non-One Roof teams to do the same to capture the true picture of a client's homelessness. HMIS data utilized include length of time (LOT) homeless, both time from engagement to housing and the LOT homeless over the entire life of the client; service patterns; previous engagement with providers (if any); service needs, particularly around ID; and of course, any returns to homelessness. Because the One Roof SO team works as part of Coordinated Entry, data is utilized not only to increase client success once housed, but also to target the most vulnerable unsheltered persons in need of SO services. SO also uses the entire range of VI-SPDAT scores in evaluating clients; high VI-SPDAT assessment scores are used to identify the most vulnerable, and if a low-scoring person with continued homelessness is identified, SO considers the need to reassess that person for updates and/or corrections. One Roof SO meets weekly to use gathered data to plan future interactions with each client. Custom Coordinated Assessment/ Outreach HMIS reports aid in this data review. Emphasis on using all data resulted in an increase of successful SO exits from 34% to 41% in the past year.

P-3b. Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for those who are unsheltered

P-3b. 1. Describe your CoC's current strategy.

P-3b.1. a. This CoC has little to no access to hotel/motel space. Hotels were anxious to take CoC funds during the height of COVID, but no longer. There are no hotels within a 10-mile radius of the majority of service providers that will regularly house anyone they believe to be experiencing homelessness. Part of this is related to actions of people housed during COVID but primarily now the hotels have no financial need for CoC money. One small service provider in a much smaller CoC geography (and 45 minutes or more from the central area of unhoused persons) still has a relationship with one hotel, but this non-federally funded provider houses only single parents with children from that geography. Part of One Roof's strategy here is that we are exploring "national brokers" that advertise their ability to access blocks of hotel rooms.

P-3b.1. b. The CoC does have emergency shelter (ES) beds available, but in limited numbers. According to the February 2022 PIT, this CoC had 342 unsheltered households. The CoC does not have sufficient numbers of ES beds if all of those 342 chose to try to access ES. However, the great majority of this unsheltered group is adamant that they will not go into ES even if available, so the CoC is open to other immediate options, like safe sleeping and micro-shelters.

P-3b.1. c. The two largest shelters are low barrier, but each is often at or over capacity. There is one previously high barrier ES/mission that has had new management for a few months, and while there are still barriers in place, they are gradually being replaced with client-centric policies. The CoC is working to encourage and support this provider in continuing to remove barriers, and this ES has agreed to host a low-barrier extreme weather shelter for this season. All current ES beds are congregate, but each provider has worked to rearrange furniture, put up curtains, and take other measures to provide as much privacy and social distancing as possible in the space they have.

P-3b.1. d. There is a funder in the CoC with plans for temporary micro-shelter and safe-sleeping availability with high levels of services attached, a plan that has been developed with the input and support from a group of currently and formerly unsheltered people. While the CoC is strongly supportive of PH and PSH development, we are seeing increasing levels of self-harm, physical attacks,

murders and overdoses on the streets, and will consider any temporary shelter that saves lives, particularly when someone living unsheltered requests these micro-shelters and safe sleeping areas.

P-3b.1. e. The City of Birmingham, the CoC entitlement with the largest numbers of unsheltered persons, has shared with the CoC that they are submitting their HOME ARP plan to HUD at the beginning of November 2022 to support projects for non-congregant emergency housing as well as a One Stop/ Day Center. The Day Center will have permanent space for an inclement weather shelter.

P-3b. 2. How well the current strategy performs at providing access to low barrier and culturally appropriate temporary accommodations (ES especially non-congregate, transitional housing) to all individuals and families experiencing unsheltered homelessness

The CoC has youth-specific, DV-specific, and Trans-specific emergency beds in limited numbers, and has recently identified two small DV providers with potential to increase capacity for this subpopulation. All current CoC-funded agencies with ES beds follow Equal Access as applied to families and the LGBTQ+ community and utilize client-centric policies and procedures. The CoC has one youth-specific ES that will open this year that was created by a LGBTQ+ agency. All of these new and planned options will be low barrier, will have client-centric policies, and will follow Equal Access. One large ES and one smaller ES each with other housing in the building have redone colors, furniture placement, etc., with a Trauma-Informed lens as well. One of the challenges with immediate temporary housing for our clients who travel with pets is that none of our emergency shelters are equipped to regularly accommodate those animal companions. This has been assigned to a working group for proposed solutions. One Roof has examined ES programs for equity, and no racial or other inequities have been identified in the provision of services or outcomes of any programs.

P-3b. 3. Identify any new practices your CoC implemented in its geography over the past 3 years and the lessons learned from implementing those practices.

The CoC used hotels and motels for non-congregate emergency shelter 2020 – 2021. While this did get people temporarily housed, keeping them housed was challenging. We learned that scattered hotel accommodations do not work well for those with the most severe service needs. There were thefts, overdoses, structural damage to rooms, and many people simply walked away rather than stay “confined” (their language). One lesson was that people with the most severe service needs require far more intensive case management than is possible with scattered hotel rooms. Should an entire hotel/ motel with space for on-site services and intense case management become available, that would be a better option for this CoC. Clients have told us through multiple focus groups that “community” has to be a part of any housing practices. They have taken this a step further to say that community of those who are “like you” is important, whether that is people with “just” homelessness history, those with unsheltered experience, those with DV history, and especially those with incarceration history. The CoC is hosting additional focus groups to determine what this community would look like - - is this one small group of housing units? Is this nearby peer support groups? The PLE-CPC group and other PLE’s will answer this question and the CoC will strategize appropriately.

P-3.c Current strategy to provide immediate access to Low Barrier Permanent Housing for those who are unsheltered: One Roof added a Housing Placement Specialist to our team less than a year ago and he has had some success in identifying new landlords willing to waive background checks, ignore bad credit, and accept felony backgrounds. This work will continue. The CoC is working with two PHA’s

with EHV programs (and that will request Stability Vouchers) to leverage those vouchers as a type of Move On strategy thereby freeing up PSH units for those with the higher service needs.

P-3a 1a. How the current strategy utilizes Housing First: The CoC prioritizes and incentivizes a Housing First (HF) approach in all CoC-funded housing, and strongly encourages the HF approach in any CoC housing. All CoC funded PH and PSH is Housing First except one PHA PSH program. The CoC has been working with that PHA for years to encourage changing to Housing First (or at least implement some HF principles) and will continue to incentivize that change in the scoring process. There is no doubt that additional Low Barrier PH and PSH is needed; the CoC has a waiting list of more than 100 people and that PHA alone returned well over \$800,000 in unspent PSH funds in the last grant year.

P-3a 1b. How the strategy is connected to Leveraging Housing Resources: This NOFO does not request additional PH funding.

P-3a. 2. Demonstrate how the CoC's current strategy performs at providing low-barrier and culturally appropriate access to PH to those who are unsheltered performs

One Roof frequently reviews HMIS, particularly CE data points such as length of time homeless and the number of days from referral to PH or PSH until the client is housed to attempt to identify "glitches" in the process. This data point is also incentivized in the scoring process. For the last year, 690 people of 1718 who accessed Coordinated Entry went directly to PH. Others were diverted or self-resolved. All CoC funded programs are trauma-informed, client-centric, practice equal access, and all but one is Housing First.

P-3a. 3. The evidence that supports the use of the CoC's current strategy.

The annual Scoring and Ranking process incentivizes Housing First practices, Equal Access, trauma-informed practices and client-centric practices. The CoC brings to membership various workshops and training opportunities on each of the above practices to continuously train agency and CoC staff.

P-3a. 4. Identify new practices the CoC has implemented across its geographic area in the past three years and the lessons learned from implementing those practices.

Over the past two years the CoC has increased efforts to incentivize low barrier programs and to hold accountable agencies who are simply not interested in low barrier housing activities. Weight on Housing First practices has continued to increase in points value during the annual scoring and ranking process. The major lesson we have learned is that we need additional providers. We are seeing PSH funding going unspent because of refusal to serve those with the highest service needs. The CoC is currently working to identify additional housing providers and PHA's with a desire to serve this most vulnerable population.

P-4. Updating the CoC's strategy to identify, shelter and house unsheltered with data and performance

P-4. 1. Street outreach

P-4.1.a. CoC requested peer outreach and support team to put more "boots on the ground." The current One Roof Street Outreach team will continue the intensive work they do with the most vulnerable, the most medically fragile, those most in danger of violence or abuse on the streets. The additional peer outreach will greatly increase the CoC's ability to identify additional people on the streets and build the initial relationships to garner interest in housing. The two pieces of the team would then collaborate

extensively on identifying client needs, service gaps, etc. The street outreach team would work to address the identified individual needs and the CoC would work to fill the identified gaps. The CoC will continue to review successful movement out of Street Outreach and housing outcomes for those who went to PH from SO, and will work to address any identified shortcomings.

P-4.1.b. How street outreach activities are connected to Coordinated Entry or HMIS. Street Outreach works as an important arm of Coordinated Entry, and data from both SO and CE are recorded in HMIS. Street Outreach takes CE to the client rather than expecting clients to go to CE – this is just one example of working to decrease any barrier to housing. Street Outreach is really an extension of CE in this CoC. Outreach, CE staff and HMIS staff all work together to use the data we have to improve housing outcomes for individuals and for the Continuum as a whole.

P-4.1.c. How your CoC will incorporate new partners (business owners, law enforcement, healthcare providers) into its street outreach strategies.

- a. This CoC already has a Street Outreach partnership (HOPE officers) with the police force in our area with the highest numbers of unsheltered homelessness. This police force, like many throughout the country, is experiencing high turnover, high officer retirement, and high levels of violent crime, and has a new police chief only a few months on the job. Over the next few months One Roof will resume efforts to have additional officers assigned to HOPE, or at least to have additional officers trained in Trauma Informed Care. One Roof continuously updates the resource sheets made available to officers so that they can refer rather than arrest.
- b. The largest Health Department in the CoC does have staff accompany Street Outreach to train on and distribute Narcan; to teach prevention of disease transmission; and to train on and distribute Fentanyl testing strips. The CoC will encourage these activities to increase.
- c. Focus groups with healthcare providers identified multiple opportunities for providers with mobile units (testing for various STI's, viruses and diseases; common vaccinations; education, Narcan distribution) to better serve those who are unsheltered and they are currently working to coordinate their efforts with Street Outreach to visit encampments or better locate their services.
- d. Focus groups with businesses highly affected by unsheltered homelessness have expressed both a need and a willingness to “help the homeless,” without also harming those who are unsheltered. Outreach is already working to get resource lists in their hands so that they can distribute. These businesses, all of the PLE focus group participants, and all of the PLE-CPC have indicated that there is a criminal element (violence not connected with SMI) that must be addressed to make it safe for people on the street and for the businesses that operate in areas with unsheltered homelessness. While One Roof is currently working with a group of municipal officials, some of these businesses, and the police force to identify responses that do not criminalize homelessness itself, Street Outreach will continue to work with businesses to find options for all people who are negatively affecting those businesses (accosting employees, stealing property and attempting to sell it back, damaging structures with exploding propane tanks, etc.). The One Roof Community Engagement staff member will continue to engage with neighborhoods, small businesses, new faith partners, etc. to facilitate conversations around homelessness, particularly those with the highest service needs. While every conversation will not immediately produce results - - housing, funding, space for

temporary shelter - - new partnerships will be gained and these partnerships will be used to identify people who are unsheltered, to identify new or growing encampments, and to develop compassionate, client-centric responses to people who are unsheltered.

P-4. 2. Low barrier shelter and temporary accommodations

P-4. 2. a. How data, performance, and best practices will be used to improve access to low barrier shelter and temporary accommodations. A CoC Performance Evaluation Committee reviews data elements including entry to and exit from Emergency Shelter. This work will continue to identify any non-Housing First procedures and then the CoC will work with those providers to educate, support, and use data from other HF programs as proof that HF works, all in an effort to have them lower barriers which would improve access. The CoC also has a well-publicized grievance procedure and any complaints are investigated, again all in an effort to ascertain Housing First and other client-centric processes are in place.

P-4. 2. b. How data, performance, and best practices will be used to expand access to low barrier shelter and temporary accommodations. The PLE-CPC recommended and the CoC has requested funding for a Safe Sleeping area and Day Center. The PLE-CPC group recommended that the Safe Sleeping be accessed only through Coordinated Entry referrals. Data on the project will be used to evaluate that practice and process adjustments will be made as necessary. Both the Safe Sleeping and the Day Center will utilize Housing First principles, client centric approaches and will practice Equal Access for families and the LGBTQ+ population. While the Day Center would not provide regular housing, it would serve as a location for a permanent inclement weather shelter. The CoC will continue to share positive data on outcomes and best practices, especially Housing First, with higher barrier shelters to encourage elimination of barriers, thus expanding access to temporary accommodations.

P-4. 2. c. new practices and activities that will be funded through an award under this competition. The PLE-CPC requested, and the CoC submitted new programs for a Day Center and a Safe Sleeping Area. Also recommended was a Medical Respite Unit. This CoC has had a small Respite Unit that was funded by the CDC as a pilot project, but that funding ends soon. The PLE-CPC found the statistics on that project warranted CoC funding permanently, so they made that recommendation as well. The all-peer portion of an Outreach/Support team is also new for this CoC and was highly recommended by the PLE-CPC. While One Roof currently has a four-member Street Outreach team with at least one peer, the PLE-CPC highly recommended that the size of the team should more than double, and that all of the additional members should be people with unsheltered living experience. At least one of these peers will be a Certified Recovery Support Specialist. All of these new programs will operate on best practices and will be data-informed.

P-4. 3. Permanent housing

P-4. 3. a. How data, performance and best practices will be utilized to improve the CoC's ability to rapidly rehouse, in PH, people with histories of unsheltered homelessness: The CoC will continue the work of various committees and workgroups that evaluate all parts of the CoC process including Coordinated Entry data such as length of time from CE Entry to housing referral and then length of time from housing referral to housing move in date. All of this evaluation is of course done on the project level to identify specific areas for improvement.

P-4. 3. b. How data, performance and best practices will be utilized to expand the CoC's ability to rapidly rehouse, in PH, people with histories of unsheltered homelessness. The Housing Placement Specialist will use housing outcomes to engage additional landlords by showing them that Housing First with support works. The CoC will continue to share performance data with the PHA with unused HUD funds that a Housing First approach works. The CoC will use performance data with the local PHA's to encourage "Move On" programs in all partner PHAs so that vouchers will be freed up for those with higher service needs.

P-5. Identify and Prioritize Households experiencing or having history of unsheltered homelessness

P-5. 1. Strategy for ensuring these NOFO resources reduce unsheltered homelessness: This CoC has a 4-person, full-time Street Outreach team currently, but one of the major projects being suggested in this NOFO is a large expansion of that team by adding an adjacent team made up of all peers. Multiple focus groups with PLE's suggested the submitted projects and more. The PLE-CPC has taken information from the entire planning process, including the other PLE input, and has suggested the very projects that are being submitted. These are the experts, and they will continue to be involved in the implementation and evaluation of these projects once the data begins to flow. All newly funded programs will collect at least the amount of data we now collect, and because a Day Center/ One Stop was suggested, it is likely that additional data on service needs and services utilization will be gathered. Once the programs are underway, the PLE-CPC and One Roof will examine that data for any needed changes, and to ascertain that positive housing outcomes are obtained. In addition to the data, the PLE-CPC and One Roof will conduct rolling feedback sessions/ focus groups to hear from the clients of these new programs and use that to submit program change suggestions.

P-5. 2. How CoC will adopt program eligibility processes that reduce unsheltered homelessness:

P-5.2. a. Program eligibility processes...The CoC already prioritizes and incentivizes programs that use low/no barrier eligibility to house those persons with the highest service needs, but will review the scoring and ranking process to see that this emphasis is properly scored.

P-5.2.b. Coordinated Entry processes....

P-5.2.b.1. Coordinated Entry process does not prevent a client from being added to the Priority List if they are without ID. All of the new peer outreach team will be trained in how to assist clients in accessing ID, but three would be specialists in this process and work closely with an agency that provides ID as a major part of their program. This will shorten the time spent homeless by speeding up access to benefits and housing since many benefits and housing options cannot be gained without ID.

P-5.2.b.2. The CoC will continue to work with one PHA that has 450+ units of housing yet is not HF. This preference and their requirement of proof of 90+ day sobriety and of random drug testing makes it a challenge for Street Outreach to place most unsheltered people in their housing. The CoC will continue to offer formal education on HF, will increase the amount of information from the unsheltered community to the PHA to offer real-life education on needs, and will share data that HF works. The CoC may also request additional HUD interventional Technical Assistance with this agency.

P-5.2.b.3. All clients in need of housing resources are assessed through Coordinated Entry using the suite of VI-SPDAT products although we are reviewing other tools to assess vulnerability as well. The SPDAT score combined with a prioritization score determine placement on the housing list. Unsheltered

homelessness, especially when combined with other barriers (clients with severe service needs) is already prioritized in this CoC.

P-5.2.b.4. Although the main location for CE is currently centrally located, it will move to the proposed new Day center/ One Stop thus increasing the sheer volume of people performing Assessments, and the volume of people asking for an Assessment. We believe that this “no wait” in the CE process will make it easier to engage someone immediately.

P-5.2.b.5. The CoC’s CE has an Advisory committee that suggests changes to CE based on reviews of the entire process. That committee currently has at least 1 working PLE, but as CE volume increases, we will increase that participation to ensure that the unsheltered voice is a stronger part of that evaluation.

P-5.3 How CoC will use Street Outreach to connect unsheltered with housing resources

This Continuum currently has a four-member, full-time Street Outreach Team. The requested funding to increase in SO with an entire adjunct of PLE’s. This strategy was insisted on by the PLE community planning team to greatly increase the ability of Street Outreach to connect to those who are unsheltered, particularly with the trust and support that comes from a peer.

P-5.4. Additional steps CoC is taking to ensure that those who are unsheltered can access housing and other resources in the community.

P-5.4.a. Increase access to identification: The additional Peer support/ outreach team would have specialists in accessing ID in this CoC. Since the HUD grant cannot pay for the ID itself, the expanded outreach team will start the process and then partner with another One Roof agency that has a program focused specifically on ID. That agency does not currently have the capacity to increase their ID volume, so the Peer Support/ Outreach team support is crucial.

P-5.4.b. Provide housing navigation services: One Roof has a Housing Placement Specialist team member that started with our agency less than a year ago. He has already had successes in locating landlords willing to accept clients with bad credit, felony history, and other barriers, and has worked one-on-one with unsheltered clients to assist with complicated housing histories, including at least one long-time homeless person with sex offenses. The addition of a peer outreach/ support team would be client-focused to help emotionally support an unsheltered person through the housing process, so they would work hand-in hand with the Housing Placement Specialist to increase trust, cooperation, and motivation. PLE’s have told us consistently in this Community planning process that lack of trust in someone offering housing prevents acceptance of even the most basic services.

P-5. 4. c. Provide access to healthcare and other supportive services

- a. The PLE-CPC proposed and the Continuum submitted a proposal for a day center/ one stop that would provide basic necessities such as laundry and showers. This is the first step in health for many on the streets. The plan is to have rotating mental health and physical health (medical and dental) services offered at the Day Center as well. When the services are convenient and tailored for those who are unsheltered, they are more likely to be utilized. A plan for part of this medical rotation includes physicians who understand homelessness, disabilities that come from or contribute to homelessness, and the meaning of “unable to maintain housing.” Having this type of exam on site would make application for SOAR

- benefits and certification for housing disability a much easier and more efficient process for the clients with the highest service needs.
- b. This CoC currently has a small Medical Respite unit that was started as a CDC Pilot in one of our emergency shelters. While it has proved life-saving for unsheltered persons, funding runs out early 2023. The PLE-CPC recommended that the Continuum submit a proposal to continue that project. PIT and HMIS data tells us that our unsheltered population is getting older and is largely disabled in some manner. Providing services to stop the cycle of streets to hospital to streets is a priority in this CoC. While a client is in the Respite unit they receive intensive wrap around services to connect them with housing and continuing healthcare in hopes of preventing future combinations of homelessness and medical crises. The sponsoring agency is using their current Respite data to elicit funding for a much larger program from the various local hospitals, and data from a continued Respite program would bolster those efforts to leverage additional medical services in this continuum.
 - c. Current street outreach efforts occasionally uncover someone on the streets who needs emergency medical or mental health care. As many times as not, the client in need refuses to allow the Street Outreach team to call First Responders or transport the client to the hospital/ clinic. The reasons are varied and could be anything from illicit substance abuse in the encampment to distrust of the Outreach personnel to distrust of the medical system, etc. The presence of additional peer outreach team members would assure the client in need that outreach had their best interests at heart, whether as an in-the-moment immediate need or in long-term relationship building. One of the proposed expanded peer outreach members is planned to be a Certified Recovery Support Specialist. This is another opportunity to intervene in the cycle of addiction/ homelessness/ overdose. This CoC has seen far too many deaths due to overdose in the last 2 – 3 years.
 - d. The PLE-CPC group believes that the Safe Sleeping area they have proposed will decrease deaths/ attacks/ overdoses on the streets. As of 10.16.2022 Birmingham has had 124 homicides, a 40% increase over 2021. Birmingham ranks third nationally in rate of murders with 28 homicides per 100,000 people, a rate that puts us behind only Baltimore and New Orleans. One of these murders was of an unsheltered homeless man who slept outside of an emergency shelter. His death was one of three within one block of that shelter in June 2022 with the other two being probable drug overdoses Jefferson County, the largest county in this CoC and the one with the highest rate of poverty had 68 overdose deaths in 2018. As of 8.21.2022 there have been about 350 victims of overdose, a 400% increase in just four years. The PLE –CPC advocates for those living unsheltered, reminding those who are housed that there is no safety on the streets – you are prey to others, and if you defend yourself to prevent death, you run the risk of being imprisoned for your actions. If you are unsheltered, you may well move to substances to escape the sheer trauma of being on the streets. Their list of reasons why this CoC needs a Safe Sleeping area would fill at least five of the allowed 15 pages of this Community Plan. This group emphasizes that Safe Sleeping is not just about not getting killed; they remind the housed population that if you don't sleep well you get sick, you can't recover from even a minor illness, you don't have energy to pursue anything other than simple survival, and mental illnesses are exacerbated. In addition to secure parking, tent living and micro-shelters, a multitude of supportive services will be available at the proposed Safe Sleeping. The PLE-CPC ranks a Safe Sleeping area as this continuum's highest priority.

P-6. Involving PLE's in Decision-Making and meaningful outreach

P-6. 1. Meaningful outreach efforts (SO, social media) to engage PLE's to develop a working group.

The Outreach Efforts to engage PLE's to guide the development of this Unsheltered Plan came through a media event around The World Games (TWG) and micro-shelters built by a group of architects concerned about the possibility of unsheltered persons being displaced by TWG Security Perimeters (they were not displaced in the end). At that media event, a man identified himself as being recently housed after years off and on the streets. He was passionate about the development of what he termed Transitional Housing and whatever measures necessary to move his peers off the streets into housing stability. The CoC reached out to him and asked for further conversation. After getting his guidance, One Roof put the word out on the streets through this man, Kenny; through the current Street Outreach team; and through agencies that regularly serve the unsheltered population, that we were looking for lived expertise, will pay for that experience, and will provide other support if needed for participation. We ended up with 14 respondents, but three had moved out of this CoC into permanent housing and either had no way to participate in group conversations or had been on the streets in this CoC too short of a time to feel like they could be helpful. Six didn't respond after the initial contact, and a group of five were our PLE-CPC. We also held a 2.5-hour focus group with 11 participants identified through an offenders' advocacy group. Each participant had experienced unsheltered homelessness plus lengthy jail time or extended prison incarceration. Although we invited these participants join the PLE-CPC group, none were interested at this time.

P.6.2. How PLE's with unsheltered homelessness are meaningfully and intentionally integrated into the CoC decision making process

P.6.2. a. The Governing Board plans to add additional PLE's to the decision-making process. The original intent was to add 3 – 4 dedicated Board seats for those with recent unsheltered homelessness. However, that would only be done if those representatives were fairly compensated for their time, and CoC attorneys seem to think there are IRS issues with paying nonprofit board members. The Governance Workgroup is researching other CoC's and other entities such as the National Healthcare for the Homeless for options, a process which will go much faster after all NOFO's are submitted. Until that time, a PLE ad hoc committee was created to inform the decisions of the Governing Board, and those members are paid for their time and supported in attendance to meetings with meals and transportation. For purposes of this NOFO, that PLE ad hoc committee helped determine what groups should be hosted for Focus Groups (businesses, PLE's etc). They then reviewed all of the thoughts and suggestions gathered in those Focus Groups. They used that community input plus their own lived experience to recommend what Request for Proposal should go out to solicit projects. They then reviewed, scored and ranked the submitted projects. The Governing Board reviewed their results and ratified those decisions with no alteration.

P.6.2. b. This PLE ad hoc Committee will continue in their role of informing the Board until it can be determined if this is the best process to give equal power to their input or if another option should be developed. This PLE ad hoc Committee will be an equal player in the development of future CoC projects. This group plus other PLE's will be asked to develop policies and procedures, including some type of self-policing, for both the Day Center and the Safe Sleeping if funded, and there are other items that they want to work on!

P-6.2. c. The CoC has PLE's as part of other committees making recommendations for policy and/or procedural changes including the Coordinated Entry workgroup and the HMIS workgroup.

P-6.3. How the CoC encourages projects to involve PLE's in the delivery of services

P-6.3. a. The CoC incentivizes providers through the scoring process to hire PLE's and to get both anonymous group and individual feedback from program participants.

P-6.3. b. The CoC also encourages any planning group, whether CoC-specific or not, to include those with lived experience. The CoC is pleased that PLE's participated in the 2021-2022 community planning by the Birmingham Mayor's Transition Team. It should be noted that the Transition Planning made very similar recommendations for projects as those that were recommended in this Unsheltered Planning process.

P-6.3. c. The CoC submitted, on behalf of the PLE-CPC, a request for proposal for an additional Peer Outreach and Support team. These team members will all have lived experience. The project submitted for a Day Center also includes PLE's as the majority of the staff. The current PLE-CPC has agreed to help determine the policies and procedures and self-policing for the proposed Day Center and the Safe Sleeping area.

P-6.3. d. The CoC brought a Housing First workshop and a Racial Equity workshop to the CoC membership early 2022. Each of these workshops emphasized the importance of having PLE's involved in the delivery of services. The CoC is currently looking for additional educational opportunities for this purpose.

P-6a. Lived Experience Support Letter No Narrative Needed See attached

P-7. Serving Underserved Communities and Supporting Equitable Community Development

P-7.1. CoC current strategy to identify populations in the CoC geography that have not been served by the homeless system at the same rate they are experiencing homelessness: The CoC has done and will continue to do deep dives into the data around equity. We are in an area that has little to no Indigenous and Native American persons, Asian Americans or Pacific Islanders experiencing homelessness. The CoC has a much lower rate of Latinex people who are experiencing homelessness than the rate of Latinex people who are living in the CoC. The rate of Latinex homelessness is less than 2% in the total CoC when the overall rate of Latinex people ranges from 2.6% in our least populated county to 6% and 4.3% in our largest counties. There are multiple agencies serving the LGBTQ+ community, and while there are no formal statistics on the percentage of this population that is unhoused, there is also no data to indicate gaps in services. The percentage of Black persons experiencing homelessness in the CoC is about equal to the percentage of Black persons in our CoC's largest City. While our data tells us that there are no identified disparities in how services are accessed or in outcomes, we do know that there is a larger percentage of Black persons requesting services than exists in our total CoC. A Data Workgroup is currently exploring potential new data elements to collect that might pinpoint the largest systems contributors to homelessness in this Continuum. Anecdotally that is the Alabama prison system which has Black people as 50% of its population when only 25% of Alabama is Black. The Alabama Department of Corrections (DOC) has been sued by the Department of Justice multiple times for unconstitutional conditions including almost total lack of mental health care. DOJ won every lawsuit, but the State of Alabama has complied with only one of the many judgements. That judgment involved a women's prison which is still under federal control since 2012. None of DOJ lawsuits have resulted in

compliance in the men's prisons. There is no restorative justice within the Alabama DOC. While the list of deplorable actions by the Alabama DOC is much longer than is recorded here, suffice to say that the CoC strongly believes additional data will show that the AL DOC is a major contributor to homelessness in this Continuum. We are partnered with various Offender Alumni groups, privately funded grants to address violence victims (80+ % of whom are people of color), and plans for these partnerships to increase.

P-7 2. How underserved communities in your CoC geography interact with the homeless system, including a description of those populations. One Roof has a continuous feedback loop that evaluates CE including system entry data, demographic data and outcomes data so that any identified inequities can be addressed. This CoC, primarily because of Jefferson County and the City of Birmingham, the largest entitlements in this CoC, has multiple agencies serving traditionally underserved communities.

P-7 2. a. While no formal statistics currently are gathered on LGBTQ+ people experiencing homelessness, there are strong member agencies serving and housing this community with Trans-specific emergency and permanent housing available. There is an AIDS statewide organization providing not only support services but also 92 units of housing (both RRH and PSH) in this CoC alone. Youth and LGBTQ+ populations are prioritized for this housing, and clients are not required to have an HIV+ diagnosis; housing is an important element of HIV prevention. There are multiple agencies and programs run for and by queer youth, healthcare organizations geared to the LGBTQ+ population, and there are advocacy and service programs specifically for Black or Latinx LGBTQ+ identified persons. All of these organizations partner with the CoC on various levels. The City of Birmingham consistently scores 100% of the Human Rights Campaign evaluation because of its commitment to LGBTQ+ justice.

P-7 2. b. This continuum also has multiple Black and Latinx led partner agencies with which we partner on various levels; anything from referrals to and from, to the CoC hosting these agencies for educational presentations/ workshops. Again, this CoC is grateful to have Birmingham City government that is vocal about its commitment to environmental and social justice (environmental issues most often affecting communities of color).

P-7 2. c. There is a growing list of agencies working to address prison reform, parole and probation reform, and to provide support for those leaving prison. One Roof partners with these agencies to refer to and from, to share data helpful to new funding opportunities, and to brainstorm on systemic responses to the problematic relationship between the homeless system and the prison system.

P-7 2. d. There are multiple disability-focused agencies in this CoC, and all partner with the CoC to refer clients to and from. The CoC contracts with one or more of these agencies at all times to provide ASL services, and these agencies help make certain all One Roof information is shared with the populations of those with various disabilities.

P-7 2. e. This CoC has two particular areas that are not rural by HUD definition, but they are sparsely populated, have few social services available, and at times are not only dismissive of the issue of homelessness but even hostile to the notion that affordable housing and homelessness prevention services could be good for their entire community. One Roof's Community Engagement team member works very hard to identify the grassroots organizations who are trying to offer services in these areas so that we can refer to and from and so that we can perhaps offer support to those agencies to expand their capacity to serve. One Roof is pointed in its efforts to steer all opportunities for affordable housing development their way and will continue to share the data that supports the need for that development.

The CoC is quick to engage with any developers using tax-credits or HTF dollars anywhere in the CoC, put particularly there.

P-7 2. f. We are in a geography that has little to no Indigenous and Native American persons, Asian Americans or Pacific Islanders experiencing homelessness.

P-7 3. CoC's current strategy to provide outreach, engagement and housing interventions to serve...

The CoC collects much data, acts on that data when outreach strategies are developed and updated, and continuously evaluates the effectiveness of outreach. However, we are also aware that we cannot know what we don't know... we can't evaluate data that we don't have. Therefore, we will continue to build the grassroots and tertiary relationships necessary to expand Coordinated Entry. That will provide even more data ... data that is needed to ascertain that all populations are being served with equitable housing interventions and services that address their needs with dignity and cultural competency.