

Before Starting the CoC Application

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2019 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.
6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

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1A-1. CoC Name and Number: GU-500 - Guam CoC

1A-2. Collaborative Applicant Name: Government of Guam/Guam Housing & Urban Renewal Authority

1A-3. CoC Designation: CA

1A-4. HMIS Lead: The Salvation Army

1B. Continuum of Care (CoC) Engagement

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1B-1. CoC Meeting Participants.

For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:

1. participated in CoC meetings;
2. voted, including selecting CoC Board members; and
3. participated in the CoC's coordinated entry system.

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	No	No
Local Jail(s)	No	No	No
Hospital(s)	Yes	No	No
EMS/Crisis Response Team(s)	No	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	No	No	No
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	Yes	Yes
Public Housing Authorities	Yes	Yes	Yes
CoC Funded Youth Homeless Organizations	No	No	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes

Youth Advocates	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Domestic Violence Advocates	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes	Yes
LGBT Service Organizations	Yes	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Mental Illness Advocates	Yes	Yes	Yes
Substance Abuse Advocates	Yes	Yes	Yes
Other:(limit 50 characters)			
Faith-based organizations	Yes	Yes	Yes

1B-1a. CoC’s Strategy to Solicit/Consider Opinions on Preventing/Ending Homelessness.

Applicants must describe how the CoC:

- 1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;**
- 2. communicates information during public meetings or other forums the CoC uses to solicit public information;**
- 3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and**
- 4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF. (limit 2,000 characters)**

1. The CoC continues to maintain an open-door strategy to encourage and welcome input from diverse stakeholders. To that end, the CoC holds general monthly meetings that are open to the public; participates in community outreaches; affirmatively responds to requests from the community to share information; and targets the recruitment of members and volunteers from public, private and nonprofit sectors with an interest in ending homelessness. Membership encompasses service providers, faith-based groups, formerly and currently homeless individuals, and private citizens. The CoC is organized into several committees (Advocacy and Education, Information Technology, Strategic Planning, etc), which allows members to contribute in their areas of interest and expertise.

2. The CoC holds monthly general membership meetings that are open to the public. The meetings are announced via social media, online calendars, and email. Members are encouraged to invite guests who want to give input or

share new perspectives, or who want to provide assistance to the CoC. The format for the meetings include planning, information sharing, program updates, and announcements.

3. Information gathered at meetings or other CoC events is incorporated into the CoC's planning activities. The CoC maintains its practice of collaborating with non-member groups and individuals for community events and programs. Non-member organizations contribute their expertise in educational services, housing, employment, health and mental health care, and other areas relating to homelessness.

The CoC includes representation from organizations working with individuals with disabilities. Through these members, the CoC is able to disseminate relevant information to individuals with disabilities. The CoC accommodates requests for information in accessible formats upon request. For example, hard copy formats are available for those without computer access.

1B-2. Open Invitation for New Members.

Applicants must describe:

- 1. the invitation process;**
 - 2. how the CoC communicates the invitation process to solicit new members;**
 - 3. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;**
 - 4. how often the CoC solicits new members; and**
 - 5. any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.**
- (limit 2,000 characters)**

1. An invitation is extended to a prospective member typically after an individual has expressed interest, and after having attended a general membership meeting or participated in an outreach. Once the individual has attended several meetings, understands membership requirements, and is able to fulfill the time commitment, an application form is presented. The invitation to recruit new members is also done through media outreach conducted through radio, television, and newspaper interviews. The invitation process is communicated at monthly meetings, where members are encouraged to recruit volunteers and members, requirements are reviewed, and information materials are disseminated.

This past year, the Guam Homeless Coalition (GHC) local CoC launched efforts to engage and cultivate organizations new to the GHC. This included a military officer spouses' club, a health insurance company and the local humanities organization.

2. The CoC accommodates requests for information in accessible formats upon request.

3. Recruitment is continuous and ongoing. While membership drives typically occur at the end of the fiscal year, GHC members are constantly recruiting members at outreaches, events and general meetings. Peak recruitment times are in January around the time of PIT Count and at the end of the fiscal year.

4. The GHC embarked on a media project aimed to increase awareness of the GHC and expand membership. The organization undertook a video documentary project that will serve as an outreach and recruitment tool, as well

as an instructional video. The video, which will be screened in multiple venues including at places where homeless individuals congregate such as the public library, is also meant to elicit opinions on preventing or ending homelessness. 5. The CoC has island wide outreach "Passport to Services" that provides direct assistance by various groups that provide support services to the homeless.

1B-3. Public Notification for Proposals from Organizations Not Previously Funded.

Applicants must describe:

- 1. how the CoC notifies the public that it is accepting project application proposals, and that it is open to and will consider applications from organizations that have not previously received CoC Program funding, as well as the method in which proposals should be submitted;**
- 2. the process the CoC uses to determine whether the project application will be included in the FY 2019 CoC Program Competition process;**
- 3. the date(s) the CoC publicly announced it was open to proposal;**
- 4. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats; and**
- 5. if the CoC does not accept proposals from organizations that have not previously received CoC Program funding or did not announce it was open to proposals from non-CoC Program funded organizations, the applicant must state this fact in the response and provide the reason the CoC does not accept proposals from organizations that have not previously received CoC Program funding.**
(limit 2,000 characters)

1. The CoC employed standard procedures, such as website publications, posts on social media press releases and email lists to constituents to notify the public of its intent to accept proposals. The CoC sought to broaden its efforts to notice the public, in particular, those organizations not previously funded. This year, the CoC reached out to other partners to ensure that NOFA reached organizations not previously funded. For example, the Notice was forwarded to the local State Clearinghouse, an agency that administers the intergovernmental coordination and review of certain federal activities, which then circulated it among government agencies and the Coalition Against Sexual Assault and Family Violence, which circulated it to its membership. The notices included directions on how to submit proposals, along with information about available technical assistance.

2. The Review and Ranking Committee (RRC) rates and evaluates each application to determine which programs will be included in the Competition process. RRC adheres to an evaluation tool that carefully considers applications address CoC's priorities. The Committee comprises members who do not receive CoC funding.

3. The CoC publicly announced the Request for Proposals during the GHC General Meeting on July 17, 2019 and published the RFP on July 25, 2019. Agencies who had never applied before were encouraged to submit an abstract and if proposal is feasible, they were steered to enter in esnaps. The CoC Strategic Planning Committee provided the membership with a timeline of internal deadlines. CoC contact information was given if there were questions and the CoC Lead offered to provide technical assistance for all applicants.

4. The CoC includes representative from organizations representing individuals with disabilities. Theses representatives received information on the RFP, which

was then passed on to their stakeholders.

5. The CoC welcomes proposals from agencies not previously funded.

1C. Continuum of Care (CoC) Coordination

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1C-1. CoCs Coordination, Planning, and Operation of Projects.

Applicants must select the appropriate response for each federal, state, local, private, other organizations, or program source the CoC included in the planning and operation of projects that serve individuals experiencing homelessness, families experiencing homelessness, unaccompanied youth experiencing homelessness, persons who are fleeing domestic violence, or persons at risk of homelessness.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	No
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Not Applicable
Other:(limit 50 characters)	
Faith Based Organizations	Yes

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

Applicants must describe how the CoC:
1. consulted with ESG Program recipients in planning and allocating ESG funds;
2. participated in the evaluating and reporting performance of ESG Program recipients and subrecipients; and
3. ensured local homelessness information is communicated and addressed in the Consolidated Plan updates.
(limit 2,000 characters)

1. The Salvation Army (TSA) is the subrecipient of ESG funds. The CoC consults extensively with the ESG subrecipient on planning and allocation of funds for program activities. Consultations between the CoC and TSA include how funds are allocated between rapid rehousing and homeless prevention services based on community needs, assessing gaps in services, and collaboration with other agencies on outreach events. In addition, the Collaborative Applicant sought data from both the ESG and the CoC, including Point-In-Time data, to include in Guam’s Annual Action Plan. That data helps in the development of strategies and planning for upcoming program years. For example, the CoC and ESG subrecipient confer regularly on how best to align reports --including the HMIS - for improved data collection and analysis. These consistent reports in turn, help guide the development of plans in the Annual Action Plan and the program evaluations in the Consolidated Annual Performance and Evaluation Report (CAPER). 2) The CoC participates in the evaluation and performance reporting of the ESG subrecipient by reviewing HMIS and HIC data. CoC reviews and analyzes the following ESG data: unduplicated number of persons or households prevented from becoming homeless, the unduplicated number of persons or households assisted from emergency shelters/streets into permanent housing, race, ethnicity, age, amount spent per sub-recipient and their timeliness of expenditures. Qualitative forms of assessments are done through monthly discussions between the ESG subrecipient and CoC members. This includes discussions on the most pressing needs for clients, barriers to housing, the connection to other mainstream resources, and outcomes of families and individuals upon completion of a program. 3) The Consolidated Plan and the Annual Action Plan incorporates local homeless information in all of its updates. CoC-funded programs along with ESG, are consulted during the drafting of the reports.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Yes to both

Applicants must indicate whether the CoC provided Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area.

1C-2b. Providing Other Data to Consolidated Yes

Plan Jurisdictions.

Applicants must indicate whether the CoC ensured local homelessness information is communicated to Consolidated Plan Jurisdictions within its geographic area so it can be addressed in Consolidated Plan updates.

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.

Applicants must describe:

- 1. the CoC’s protocols, including protocols for coordinated entry and the CoC’s emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and**
- 2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality. (limit 2,000 characters)**

1. The CoC’s DV service agencies implement VAWA-approved safety protocols for response to victims in crisis. This includes incorporating safety and trauma-informed practices for police response/escort, emergency transfer plan of victims and medical treatment as needed. Safety needs are addressed by providing a safe place for them to stay when they decide to leave their abuser. If they can’t find a safe place to stay they often go back to their abuser.

2. Safety needs are also addressed by keeping client information confidential as well as keeping the place of any shelter or housing for them confidential. Safety planning is also done with each client when they are placed in housing. Clients are assisted with getting a protective order if they wish to do so. The abuser is not allowed to be at their place of housing. To address physical and emotional safety needs of the DV victim, the victim may be referred by any agency directly to the Alee Shelter or VARO using victim protocols. Proper protocols under Guam CES include confidential phone-call to the victim service provider and transportation of DV victim to the service provider.

1C-3a. Training–Best Practices in Serving DV Survivors.

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:

- 1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and**
- 2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence. (limit 2,000 characters)**

1. CoC DV service providers attend workshops and training conferences coordinated or sponsored by external organizations, including the annual Social Work Conference held in March, and the annual Domestic Violence Awareness Conference held in October. Off-island trainers are brought in to provide hands-

on training and best practices, including safety planning and enhancement of protocols for DV responders. Additionally, interim trainings and workshops are attended that include topical areas such as child sexual abuse, community partnerships and engagement, and coordination among multiple agencies. Subject matter experts facilitate the trainings and incorporate best practices, along with legislative updates and other trending topics. Training encompasses various topics from mandatory reporting requirements, safety to prevention. In addition, the CoC partners with the Guam Coalition Against Sexual Assault and Family Violence, which provides technical assistance to service providers.

2. The CoC extends training to CES staff to address safety and best practices in serving survivors of domestic violence. In May, CES staff who work with DV service providers received specialized training on Coordinated Entry, which includes privacy and safety protocols.

1C-3b. Domestic Violence–Community Need Data.

Applicants must describe how the CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

Statistical data is collected and compiled from five DV service providers including the Alee Women's Shelter, VARO, Oasis treatment center, The Salvation Army and Guam Legal Services Corporation. Data includes demographics of DV survivors and their children. Qualitative data is gathered primarily from the women's shelter and treatment center and includes information such as number of protective/restraining orders, custody issues, child support and alimony, natural supports and where survivors exit to after discharge. The information is used independently by service providers to address gaps within their respective programs and collectively by all providers as part of the CoC strategic planning process to determine vulnerable populations with greatest need. Review of both quantitative and qualitative data reflect that survivors, particularly survivors of sexual assault, are requiring longer stays at the women's shelter due to their traumatic experience. Individual and counseling sessions are available if a survivor chooses. Data also shows that there are certain months in which referrals peak, requiring additional sheltering and housing for that period. Those months include August, October, and December. Additionally, the greatest need for longer option stable housing are for Chuukese survivors, primarily due to long term unemployment. Housing for this group generally includes mom and children, and require intensive case management due to multiple issues associated with the units.

***1C-4. PHAs within CoC. Attachments Required.**

Applicants must submit information for the two largest PHAs or the two PHAs with which the CoC has a working relationship within the CoC's geographic area.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g.,
FY2019 CoC Application	Page 11	09/30/2019	

			Moving On
Guam Housing & Urban Renewal Authority		Yes-Both	Yes-Both

1C-4a. PHAs’ Written Policies on Homeless Admission Preferences.

Applicants must:

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

2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

1. Although Guam’s PHA does not include Homeless Admission Preference in the policy, the question of “Are you homeless?” is included in PHA’s online housing application as well as in the list of preferences. However, the PHA does not currently track statistics of homeless individuals placed into PHA housing. During the program year, the CoC contacted the Executive Director of Guam’s PHA with a letter recommending the adoption of a Homeless Admission Preference policy. The letter contained the CoC’s best estimate of the number of homeless individuals and families placed in PHA housing, and a request to collect data of homeless admissions. More importantly, the letter requests that Guam’s PHA adopt a Homeless Preference policy in the new fiscal year.

2. Despite the absence of homelessness as priority in the policy, the PHA does remain engaged with the CoC. The PHA responds to requests for assistance whenever possible. For example, this year, when the demolition of a set of abandoned government buildings resulted in several families left to homelessness, the CoC pulled all its resources together, including contacts at the PHA, to find housing placement for the families who lived in the abandoned structures. The PHA successfully placed two families in housing, giving preference to those families with children.

The CoC will continue to advocate the PHA for a Homeless Admission Preference policy, and will follow up with the Executive Director in the coming months.

1C-4b. Moving On Strategy with Affordable Housing Providers.

Applicants must indicate whether the CoC has a Moving On Strategy with affordable housing providers in its jurisdiction.

No

1C-5. Protecting Against Discrimination.

Applicants must describe the actions the CoC has taken to address all forms of discrimination, such as discrimination based on any protected classes under the Fair Housing Act and 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.

(limit 2,000 characters)

The CoC promotes its anti-discrimination policy that helps create a culture of prioritizing safety and accessibility for all people seeking services regardless of gender, race, color, national origin, disability, or family status. Furthermore, the use of the Coordinated Entry System ensures non-discrimination because priority for assistance is based on the assessment scores of the VI SPDAT tool. Partner agencies also ensure fair access to LGBTQI clients seeking housing assistance. This includes special provisions for create safe environments at shelters.

In August 2019, CoC members participated in a Fair Housing training facilitated by visiting HUD representatives from Honolulu Field Office in Hawaii. The training covered examples of fair housing violations, as well as guidance on how to report violations. The training was well attended, and the CoC plans to offer the trainings as an annual activity.

***1C-5a. Anti-Discrimination Policy and Training.**

Applicants must indicate whether the CoC implemented an anti-discrimination policy and conduct training:

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively address discrimination based on any protected class under the Fair Housing Act?	Yes
3. Did the CoC conduct annual training on how to effectively address discrimination based on any protected class under 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing?	Yes

***1C-6. Criminalization of Homelessness.**

Applicants must select all that apply that describe the strategies the CoC implemented to prevent the criminalization of homelessness in the CoC’s geographic area.

1. Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
2. Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
3. Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
4. Implemented communitywide plans:	<input checked="" type="checkbox"/>
5. No strategies have been implemented:	<input type="checkbox"/>
6. Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>

	<input style="width: 50px; height: 20px;" type="checkbox"/>
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1C-7. Centralized or Coordinated Assessment System. Attachment Required.

Applicants must:

- 1. demonstrate the coordinated entry system covers the entire CoC geographic area;**
- 2. demonstrate the coordinated entry system reaches people who are least likely to apply for homelessness assistance in the absence of special outreach; and**
- 3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner. (limit 2,000 characters)**

1. Guam's Coordinated Entry System (CES) covers the entire geographic area. CoC members who are CES end-users are positioned throughout the entire island of Guam. . However, DV clients are not captured by the CES. Should a DV client seek assistance at a CES entry point, they will be immediately referred to one of the CoC's DV shelters or DV projects administered by the CoC. DV client information is then entered into a standalone HMIS system with the data de-identified and aggregated for reporting. Recently, a navigator has been hired to focus on the implementation of the DV survivors' CES.

2. The CE system reaches people who are least likely to apply for homeless assistance outside of special outreaches. This is demonstrated through the CoC's implementation of the "No Wrong Door" policy. Essentially, all CoC members regardless of what service they provide, will make every effort to guide clients to the necessary programs or specific agencies required to deliver assistance. Furthermore, routine monthly outreaches are conducted to engage those individuals who do not attend special outreaches. Finally, several agencies within the CoC operate 24 hours a day, seven days a week ensuring access is available at any time of the day. These organizations have CE end-users who also work 24/7.

3. The VI-SPDAT tool used by the CoC helps prioritize people most in need of assistance to ensure they receive timely assistance. The CoC's standard assessment tool is attached.

1D. Continuum of Care (CoC) Discharge Planning

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1D-1. Discharge Planning Coordination.

Applicants must indicate whether the 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. Check all that apply (note that when "None:" is selected no other system of care should be selected).

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input type="checkbox"/>
None:	<input type="checkbox"/>

1E. Local CoC Competition

Instructions

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*1E-1. Local CoC Competition–Announcement, Established Deadline, Applicant Notifications. Attachments Required.

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Yes
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

1E-2. Project Review and Ranking–Objective Criteria.

Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2019 CoC Program Competition:

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	Yes

1E-3. Project Review and Ranking–Severity of Needs and Vulnerabilities.

FY2019 CoC Application	Page 16	09/30/2019
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Applicants must describe:

1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and

2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects.

(limit 2,000 characters)

1. The Review and Ranking Committee (RRC) evaluates project applications based on HUD priorities, program performance, PIT data, APR data, population served, and audits. Severity of needs and vulnerabilities considered were the “hard to serve” population which includes serving individuals who are literally homeless and those with disability and/or no income. Additional points were also given to projects using the Housing First approach which ensures that those individuals who have the greatest challenges or barriers are offered assistance are prioritized. Projects that serve these high needs populations such as those fleeing domestic violence or hard to place individuals (chronic homeless) receive extra points in ranking system. This practice includes reallocation of lowest performing projects to meet the gaps and needs within the CoC.

2. The RRC considered alignment of the proposed projects with CoC's vision and needs identified through the Gaps Analysis when scoring applications. The following components were considered in the Project Design category: project addressed one of the priority needs identified; applicant built a case for the need; & existing housing availability for this population. In the Relative Need category; applicants justified the need to focus on vulnerable populations such as Serious Mental Illness, unaccompanied youth, victims of domestic violence or people with substance use disorders; how the project will address specific needs; if the applicant identified outcomes & performance measures that were objective, measurable, tractable; and if the project met CoC benchmarks.

1E-4. Public Postings–CoC Consolidated Application. Attachment Required.

Applicants must:

1. indicate how the CoC made public the review and ranking process the CoC used for all project applications; or

2. check 6 if the CoC did not make public the review and ranking process; and

3. indicate how the CoC made public the CoC Consolidated Application—including the CoC Application and CoC Priority Listing that includes all project applications accepted and ranked or rejected—which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the FY 2019 CoC Program Competition application submission deadline; or

4. check 6 if the CoC did not make public the CoC Consolidated Application.

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	<input checked="" type="checkbox"/>	1. Email	<input checked="" type="checkbox"/>

2. Mail	<input type="checkbox"/>	2. Mail	<input type="checkbox"/>
3. Advertising in Local Newspaper(s)	<input checked="" type="checkbox"/>	3. Advertising in Local Newspaper(s)	<input type="checkbox"/>
4. Advertising on Radio or Television	<input type="checkbox"/>	4. Advertising on Radio or Television	<input type="checkbox"/>
5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>	5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>
6. Did Not Publicly Post Review and Ranking Process	<input type="checkbox"/>	6. Did Not Publicly Post CoC Consolidated Application	<input type="checkbox"/>

1E-5. Reallocation between FY 2015 and FY 2018.

Applicants must report the percentage of the CoC’s ARD that was reallocated between the FY 2015 and FY 2018 CoC Program Competitions.

Reallocation: 29%

1E-5a. Reallocation–CoC Review of Performance of Existing Projects.

Applicants must:

- 1. describe the CoC written process for reallocation;**
 - 2. indicate whether the CoC approved the reallocation process;**
 - 3. describe how the CoC communicated to all applicants the reallocation process;**
 - 4. describe how the CoC identified projects that were low performing or for which there is less need; and**
 - 5. describe how the CoC determined whether projects that were deemed low performing would be reallocated.**
- (limit 2,000 characters)**

1. The CoC Review and Ranking Committee (RRC) conducts a transparent and objective process to review and rank all applications for renewal of existing projects and proposals of new projects. Objectives are to comply with all HUD requirements; preserve funding for high performing projects that are operated in alignment with CoC initiatives, priorities, and other best practices; and shift investments from lower performing projects to new projects that help advance our community’s goal of ending homelessness. Applicants may appeal reduction or elimination of renewal grant amount when notified that renewal project application will be re-allocated as a result of low performance. Appeals must be submitted in writing and will be heard by an appeal panel made up of the non-conflicted members of the GHC Executive Committee who did not serve on the initial review panel.

2. The ranking policy and procedure was approved by the CoC during the general membership meeting.

3. The RRC follows the written Continuum of Care (CoC) Ranking Policy and Procedure which was provided to all GHC members and is available upon request. Applicants are notified of potential reallocation during the ongoing

monitoring process. Written notification is given by the RRC to applicants who are recommended for reallocation after review and ranking.

4. The RRC reviews renewal project application narratives, Annual Performance Reports, an analysis of grant expenditures, and any other HMIS data provided at RRC request. Identified concerns are discussed with the person responsible for ongoing monitoring of the grant.

5. The RRC discusses information from all sources in consideration of HUD and CoC priorities and comes to a consensus on whether projects deemed low performing would be reallocated.

DV Bonus

Instructions

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Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

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1F-1 DV Bonus Projects.

Applicants must indicate whether the CoC is Yes requesting DV Bonus projects which are included on the CoC Priority Listing:

1F-1a. Applicants must indicate the type(s) of project(s) included in the CoC Priority Listing.

1. PH-RRH	<input checked="" type="checkbox"/>
2. Joint TH/RRH	<input checked="" type="checkbox"/>
3. SSO Coordinated Entry	<input checked="" type="checkbox"/>

*1F-2. Number of Domestic Violence Survivors in CoC's Geographic Area.

Applicants must report the number of DV survivors in the CoC's geographic area that:

Need Housing or Services	60.00
the CoC is Currently Serving	14.00

1F-2a. Local Need for DV Projects.

Applicants must describe:

- 1. how the CoC calculated the number of DV survivors needing housing or service in question 1F-2; and**
 - 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source).**
- (limit 500 characters)**

The CoC utilized data manually compiled and maintained from CoC direct providers and data from the Alee Women's Shelter, mainly qualitative data from client case management services. The identification of housing options and services is client-derived, and service plans developed reflect the action plan to achieve the goals outlined in the service plan.

1F-3. : SSO-CE Project–CoC including an SSO-CE project for DV Bonus funding in their CoC Priority Listing must provide information in the chart below about the project applicant and respond to Question 1F-3a.

DUNS Number	855033457
Applicant Name	The Salvation Army

1F-3a. Addressing Coordinated Entry Inadequacy.

Applicants must describe how:

- 1. the current Coordinated Entry is inadequate to address the needs of survivors of domestic violence, dating violence, or stalking; and**
 - 2. the proposed project addresses inadequacies identified in 1. above.**
- (limit 2,000 characters)**

The automated version of coordinated entry is still in development by Guam's contractor. Referrals and coordination of victim services is implemented through the use of a Whatsapp group for direct service providers including the Guam Police Department, Alee Shelter, and VARO. When a victim is admitted to the shelter, the social worker becomes the lead provider to coordinate navigation of the client through the various providers and treatment services, from initial shelter admission to legal services, to discharge. As the victim transitions to other housing options, the social worker maintains contact through the provision of transition case management services. The weakness in the current process is the availability of the partner provider to constantly check the Whatsapp group and respond, although a follow up telephone contact highlights the urgency of that case situation. Second, the process for compiling data as well as data validation can be challenging based on the respective data gathering techniques and maintenance of data. A functional database will allow for expedience in reporting of data for analysis.

1F-4. PH-RRH and Joint TH and PH-RRH Project Applicant Capacity.

Applicants must provide information for each unique project applicant applying for PH-RRH and Joint TH and PH-RRH DV Bonus projects which the CoC is including in its CoC Priority Listing–using the list feature

below.

Applicant Name	DUNS Number
Catholic Charitie...	855031241

1F-4. PH-RRH and Joint TH and PH-RRH Project

Applicant Capacity

DUNS Number:	855031241
Applicant Name:	Catholic Charities of the Diocese of Agana dba Catholic Social Service
Rate of Housing Placement of DV Survivors–Percentage:	2.00%
Rate of Housing Retention of DV Survivors–Percentage:	2.00%

1F-4a. Rate of Housing Placement and Housing Retention.

Applicants must describe:

- 1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and**
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)**

The data source used is primarily data from the Alee Women’s Shelter for victims of both domestic violence and sexual assault and their children. The shelter maintains both statistical data and qualitative data based on individual client service plan outcomes, including supports and case management services.

1F-4b. DV Survivor Housing.

Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing. (limit 2,000 characters)

Discharge planning is a major outcome beginning at initial admission to the women’s shelter, following assessment of the survivor’s situation and natural supports. If the survivor is already assisted with public housing or housing subsidy, a Social Worker initiates communication and updated reports to the housing authority for adjustments, including removal of the abuser from the household and/or relocation to a different site. The survivor is able to retain their housing assistance. If the survivor is not currently assisted but is on a wait list for housing assistance, the Social Worker initiates communication and updated reports to the housing authority to elevate the priority ranking of the household. This change in status generally results in a placement in public housing or receipt of a Section 8 voucher. In most cases, survivors are sheltered at the women’s shelter until permanent housing solutions have been provided.

1F-4c. DV Survivor Safety.

Applicants must describe how project applicant:

- 1. ensured the safety of DV survivors experiencing homelessness by:**
 - (a) training staff on safety planning;**

- (b) adjusting intake space to better ensure a private conversation;**
 - (c) conducting separate interviews/intake with each member of a couple;**
 - (d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;**
 - (e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;**
 - (f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and**
- 2. measured its ability to ensure the safety of DV survivors the project served.**

(limit 2,000 characters)

The safety of DV survivors is assured based on regular training of provider responders, both internally through staff meetings and unit training, and externally through workshops and conferences organized by various entities. Trauma-informed care and safety planning are generally standing topical areas. Other training topics include active shooter response training and disaster training. Additionally, safety planning is implemented at the women’s shelter through exercises in lockdowns of site and clients converging in a safe room within the site. The site is enclosed with a six feet concrete cement wall with electric gate that is monitored within the shelter and allows admission to the site. The location of the site is never disclosed including other sites used to house survivors. Intake and assessment interviews are conducted in a separate room that ensures confidentiality of survivor information. If children are admitted, the Ages and Stages Questionnaire is administered by staff to determine referrals to other child serving agencies. A service plan is mutually developed between survivor and social worker to pursue those activities and goals as expressed by the survivor. The service plan is adjusted as developments occur or upon achievement of action plans. The safety of survivors is assured through regular consults with law enforcement on improving security measures based on site walk-throughs and review of written procedures.

1F-4d. Trauma-Informed, Victim-Centered Approaches.

Applicants must describe:

- 1. project applicant’s experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors; and**
- 2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:**
 - (a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;**
 - (b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;**
 - (c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;**
 - (d) placing emphasis on the participant’s strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**

- (e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
- (f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
- (g) offering support for parenting, e.g., parenting classes, childcare.**
(limit 4,000 characters)

The Alee Shelter makes every effort to recognize clients' behaviors as more than just what is on the surface and to consider how their traumatic experiences affect decision-making and daily interactions. The Alee Women's shelter aims to support and empower victims of domestic violence and sexual assault by utilizing the principles of Trauma Informed Care. These principles focus on safety, choice, collaboration, trustworthiness, and empowerment. Once a client arrives to the shelter, she is comforted by staff in knowing she is in a safe, secure environment from her perpetrator. The location of the shelter is kept confidential with a drop-off and pick-up point away from the vicinity of the shelter. Staff and Social Workers know that a sense of security must be established upon the client's first point of entry into the shelter. Nothing else is done until the client feels safe to move forward. Once a client is comfortable to proceed, staff conducts an intake interview, which goes along with the second principle of choice. During the intake process, expectations of the shelter are read by the client. This is a clear description of standards to be followed. In addition to expectations, their rights as clients are also explained. Each client is aware that she is entitled to a positive, respectful environment during their stay at the shelter. After an intake interview is completed, the social worker schedules to meet with the client to create an Individual Service Plan (ISP). A third principle of Trauma Informed Care places great importance on collaboration. It is a partnership between client and social worker to establish goals for client and to plan on how to accomplish these goals. The ISP focuses on what the client wants access to and what to work on while at the shelter and the social worker acts as a guide in obtaining resources. Since goal-setting is a collaborative effort between the social worker and the client, establishing a trusting, working relationship is important. Trust is not only important between social worker and client but with all staff and clients. The Alee Shelter recognizes that this may take time for some more than others and we work with each client at their level. The last principle that is encouraged is empowerment. From the time a client enters the shelter, all efforts are directed towards creating a safe space and assisting clients in rebuilding their sense of confidence to advocate for themselves. One major way this is fostered is through contacting agencies in the community to obtain benefits such as housing and medical assistance. By working with clients to make calls and attend appointments with service providers, the hope is that clients will have a greater sense of empowerment and independence.

1F-4e. Meeting Service Needs of DV Survivors.

Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:

- Child Custody**
- Legal Services**

- **Criminal History**
- **Bad Credit History**
- **Education**
- **Job Training**
- **Employment**
- **Physical/Mental Healthcare**
- **Drug and Alcohol Treatment**
- **Childcare**

(limit 2,000 characters)

The large majority of survivors' seeking protection and shelter are referred to the Alee Women's Shelter. Upon admission to the shelter, an assessment is conducted by a Social Worker to establish the case situation. A service plan is mutually developed between the survivor and Social Worker that outlines the various areas of need and action plan to address those needs. The first area of need is protection, and the survivor is transported to seek legal services for protection, custody and financial supports. Concurrently, the survivor may be transported to apply for mainstream benefits such as TANF, SNAP and medical coverage if they do not have such resources. The second area of need is to establish physical and mental health of the survivor and/or children, and to transport for access to medical or mental health treatment, including coordinating for individual and group counseling sessions. If treatment is needed for drug or alcohol overuse, referrals will be made for such treatment, which may include residential placement. When these areas of need have been addressed or otherwise stabilized, the next area of need will focus on employment. This will involve the assessment of the survivor's employability status, and if there is a need for skill training to obtain marketable skills necessary for employment before any type of job search. Supports such as child care will be coordinated to enable participation in education or skill training, and eventually continue if employment is obtained. The move in to permanent housing may occur at any time while in the women's shelter if selected for public housing or is able to obtain a housing voucher. Transition housing may be an interim option if the survivor is in progress of achieving their respective goals, with regular follow-ups by a Social Worker.

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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2A-1. HMIS Vendor Identification. Bitfocus, Inc.

Applicants must review the HMIS software vendor name brought forward from FY 2018 CoC Application and update the information if there was a change.

2A-2. Bed Coverage Rate Using HIC and HMIS Data.

Using 2019 HIC and HMIS data, applicants must report by project type:

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	155	67	83	94.32%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	6	0	6	100.00%
Rapid Re-Housing (RRH) beds	90	0	90	100.00%
Permanent Supportive Housing (PSH) beds	166	0	72	43.37%
Other Permanent Housing (OPH) beds	3	0	3	100.00%

2A-2a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-2.

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

**1. steps the CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2. how the CoC will implement the steps described to increase bed coverage to at least 85 percent.
(limit 2,000 characters)**

1. The HMIS coverage rate for the Emergency Shelter, Transitional, RRH and OPH bed categories exceed 84.99%. The CoC doesn't have any Safe Haven beds in its inventory. The HMIS coverage rate for the PSH category is less than 84.99%. The low bed coverage rate for the PSH project type is due primarily to the VA's challenges with entering VASH PSH project data into the HMIS. HUD-VASH beds account for 56% of the PSH inventory. HUD- VASH PSH program enrolment information is entered into the required VA dedicated HOMES system. The CoC will continue communication with VA local/regional staff to discuss ways to get VASH program data to be entered into the local HMIS.

2. The CoC considered to have new HUD-VASH referrals go through CES, and will work with WestCare Pacific Islands (WPI). WPI manages Supportive Services for Veterans and Families (SSVF) that utilizes HMIS. The CoC will strongly encourage WPI to use VI- SPDAT for Intake process also when conducting outreaches. WPI staff usually refer homeless veterans to VA for HUD-VASH. This process will enable the CoC to capture HUD-VASH PSH data in HIC and will help increase bed coverage.

2. The CoC will consider to have HUD-VASH referrals go through CES moving forward, and will work with WestCare Pacific Islands (WPI). WPI manages Supportive Services for Veterans and Families (SSVF) that utilizes HMIS. The CoC will encourage WPI to use VI- SPDAT for Intake process as well as when conducting outreaches. WPI staff usually refer homeless veterans to VA for HUD-VASH. This process will enable the CoC to capture HUD-VASH PSH data in HIC.

***2A-3. Longitudinal System Analysis (LSA) Submission.**

Applicants must indicate whether the CoC submitted its LSA data to HUD in HDX 2.0. Yes

***2A-4. HIC HDX Submission Date.**

**Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX).
(mm/dd/yyyy)** 04/30/2019

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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2B-1. PIT Count Date. 01/25/2019

Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).

2B-2. PIT Count Data–HDX Submission Date. 04/30/2019

Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).

2B-3. Sheltered PIT Count–Change in Implementation.

Applicants must describe:

1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and

2. how the changes affected the CoC’s sheltered PIT count results; or

3. state “Not Applicable” if there were no changes.

(limit 2,000 characters)

Not Applicable

***2B-4. Sheltered PIT Count–Changes Due to Presidentially-declared Disaster.**

Applicants must select whether the CoC added or removed emergency shelter, No

transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially-declared disaster, resulting in a change to the CoC’s 2019 sheltered PIT count.

2B-5. Unsheltered PIT Count–Changes in Implementation.

Applicants must describe:

- 1. any changes in the unsheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and**
 - 2. how the changes affected the CoC’s unsheltered PIT count results; or**
 - 3. state “Not Applicable” if there were no changes.**
- (limit 2,000 characters)**

Guam has 5% increase in the unsheltered count from 727 people in 2018 to 764 people in 2019. This was due to additional number of teams and enumerators that were assigned to cover the village of Dededo that has the most number of population. During the 2018 PIT Count, eight teams were assembled to do the survey in Dededo. A total of 61 households consisting of 246 people were counted that year. For the 2019 PIT Count over 10 teams were assigned to survey in the village that expanded the geographic reach of the count. A total of 94 households consisting of 353 people were counted. The CoC strengthened volunteerism with over 300 volunteers recruited, trained, and coordinated for the PIT, with a higher number of experienced trained volunteers.

***2B-6. PIT Count–Identifying Youth Experiencing Homelessness.**

Applicants must:

Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count. No

2B-7. PIT Count–Improvements to Implementation.

Applicants must describe the CoC’s actions implemented in its 2019 PIT count to better count:

- 1. individuals and families experiencing chronic homelessness;**
 - 2. families with children experiencing homelessness; and**
 - 3. Veterans experiencing homelessness.**
- (limit 2,000 characters)**

- 1. The CoC recruited service providers and skilled outreach staff who are familiar with individuals and families experiencing chronic homelessness to be the team leaders; formerly homeless persons who identified places where they congregate and accustomed to their habits; assigned interpreters to teams that were assigned to places with diverse populations and utilized social media in communicating and consulting with all the teams and PIT headquarters.
- 2. The CoC amplified collaboration and assigned Guam Department of

Education (GDOE) to spearhead in the 2019 PIT count. GDOE officials participated as enumerators including counselors, truant officers and social workers who are familiar with homeless students and their families are likely to be found. The CoC used prior count experiences to develop methods for reaching individuals at known congregating sites, Information obtained from CoC member agencies, service providers, and an enhanced media awareness campaigns improved the count tremendously. Thus, it increased the number of volunteers in certain areas with higher homeless population.

3. The CoC increased volunteers from veteran organizations to improve count of homeless veterans such as: WestCare Pacific Islands, Department of Veterans Affairs, Guam Veterans Administration, U. S. Naval Hospital, Andersen Air Force Base, Guam Veterans Affairs Office, Guam Vet Center and retired members of the armed forces. Coordination with veterans organization started in annual Veterans Summit and By Name List was established to ensure that homeless veterans are assisted.

3A. Continuum of Care (CoC) System Performance

Instructions

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*3A-1. First Time Homeless as Reported in HDX.

Applicants must:

Report the Number of First Time Homeless as Reported in HDX.	594
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3A-1a. First Time Homeless Risk Factors.

Applicants must:

- 1. describe the process the CoC developed to identify risk factors the CoC uses to identify persons becoming homeless for the first time;**
- 2. describe the CoC’s strategy to address individuals and families at risk of becoming homeless; and**
- 3. provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)**

1. The number of first-time homeless as reported in HDX: Among those that entered ES, SH, TH, and PH programs - during FY2017 494 persons and in FY 2018 has 594 persons were identified becoming homeless for the first time. The increase is due to the number of youth assisted under the Transitional Living Program, a new project funded by HHS (TLP) that has assisted 24 persons and the Basic Center Program (BCP), an emergency shelter for the youth served 31 persons in 2018. Guma San Jose (GSJ) emergency shelter for women and families also showed an increase with the number of persons served from 366 in FY2017 to 431 in FY2018. On the other hand, the number of persons served at GSJ Expansion, transitional housing for families decreased from 80 in

FY2017 to 70 persons in FY 2018. Likewise, there was 27.27% decrease in the number of first time homeless persons who were assisted in PSH programs. In FY2017 there were 44 persons and FY2018 has 32 persons.

2. The CoC's Strategic Planning and IT Committees will evaluate risk factors that prevented individuals and households from accessing support that will be based on HMIS quarterly report.

3. The Strategic Planning Committee of the Guam Homeless Coalition is responsible to monitor the effectiveness of the current strategies as well as identify other solutions.

***3A-2. Length of Time Homeless as Reported in HDX.**

Applicants must:

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.

66

3A-2a. Strategy to Reduce Length of Time Homeless.

Applicants must:

- 1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;**
 - 2. describe how the 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 the CoC's strategy to reduce the length of time individuals and families remain homeless.**
- (limit 2,000 characters)**

1. The average length of time clients remain homeless in ES and SH decreased by 2% from 66 days to 65 days in FY2018. Average length of time clients remain homeless in ES, SH and TH remained the same at 66 days for FY17 and FY18. Our strategy to reduce length of time remain homeless engages several activities: first, homeless individuals/families are referred to the homeless shelter for immediate sheltering or other appropriate shelters including treatment centers.

2. The VI-SPDAT tool is administered to identify and prioritize individuals for housing assistance through our ESG programs. Intake staff at the CE, ESG and emergency shelter inquire the length of time since persons had stable housing and the number of homeless episodes experienced in the last 12 months or episodes of homelessness in the last 3 years. Chronic homeless individuals or families are prioritized for placement project sites or through ESG. Persons in the emergency shelter are assisted to enroll in mainstream services, secure appropriate ID and links to employment, training or education such as ESL for compact migrants who has limited English proficiency. ESG staff upon assessment assist households determined eligible for RRRH helps persons locate housing. If a person has disability, referrals are done to appropriate programs that provide housing to persons with disabilities and the organization that did the referral provide case management and support services. The goal is

rapid placement of households with long-term homelessness. We not only have linked shelters to ESG RRH programs but also have stressed CoC funded programs to practice the Housing First approach to improve housing access. 3. The Salvation Army as HMIS Lead and GHURA the collaborative applicant and lead agency that administer and oversee ESG and CoC programs are responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.

***3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX.**

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	36%
2. Report the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	92%

3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.

Applicants must:

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

(limit 2,000 characters)

1. The number of individuals and persons in families in emergency shelter for (21.9% exited to permanent destinations while 78% to temporary housing) and emergency shelter for youth (87% to permanent destinations and 13% to temporary destinations. Transitional housing (53% exited to permanent destinations and 47% to temporary destinations). RRH (89%exited to permanent destinations, 11% to other destinations as reported in HDX. The CoC's strategies to increase retention rates and exits to permanent destinations start with identifying barriers by monitoring ESG, SSVF and TH programs. Staff from the mentioned programs work with households and case managers to eliminate other difficulties that hinder housing or lead to evictions. GHURA, the

PHA and lead agency for CoC programs sees to it that participants from ESG, SSVF and TH are assisted to apply for public housing or HCV as well as HUD VASH as soon as they are admitted in temporary housing.

2. The Salvation Army's HMIS and CE Navigator will oversee the strategy to increase the rate so persons exit to permanent housing.

3. The number of individuals and persons in families in permanent housing projects, retained their permanent housing or exited to permanent housing destinations has remained unchanged for FY 2017 to FY 2018 which is 92% as reported in HDX. The CoC PH program staff address the barrier by developing relationships with landlords to enhance rental options and mediate to keep households housed. Recently, the lack of available housing on the island due to the military's overseas rental allowance also Section 8 payment standards compounded by high rents, poses a common barrier for most programs' clients.

4. The CoC's Strategic Planning Committee and GHURA as the lead agency of the CoC will be responsible for overseeing the CoC's strategy increase the rate and retain their permanent housing or exit to permanent housing destinations.

***3A-4. Returns to Homelessness as Reported in HDX.**

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	2%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	5%

3A-4a. Returns to Homelessness–CoC Strategy to Reduce Rate.

Applicants must:

1. describe the strategy the CoC has implemented to identify individuals and persons in families who return to homelessness;

2. describe the 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 the CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,000 characters)

1) The CoC identifies common factors of individuals and families who return to homelessness through information captured at intake and at exit. Interviews and other assessment tools used by agencies help inform the CoC on common factors among those returning to homelessness. For 2017 and 2018 the percentage of returns to homelessness from 6 to 12 months has remained the same at 5%. The CoC Review and Ranking Committee plans to do quarterly monitoring and evaluation of all project recipients to examine the number of clients returning to homelessness. CoC project recipients has implemented to include a level of supportive services and aftercare programs.

***3A-5. Cash Income Changes as Reported in HDX.**

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	31%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	13%

3A-5a. Increasing Employment Income.

Applicants must:

1. describe the CoC's strategy to increase employment income;
 2. describe the CoC's strategy to increase access to employment;
 3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
 4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment.
- (limit 2,000 characters)**

Homeless who are employed are supported to retain employment by providing other supports if transitional or permanent housing is not readily available. If housing is provided and stable, the individual is connected to mainstream benefits to supplement their income if eligible. Some CoC providers provide transportation for clients to attend job fairs to obtain jobs, in addition to direct job search. The labor department has also redesigned skill training opportunities through apprenticeships that would solidify an individual's skills and increase employment marketability. The community college has also implemented a 'boot camp' for the trades and is focused on those unemployed with no skills. The boot camp provides an introduction to various trades with the goal of identifying a specific trade to pursue further through training and apprenticeship. The Department of Labor remains responsible for overseeing the strategy for income growth from employment.

3A-5b. Increasing Non-employment Cash Income.

Applicants must:

1. describe the CoC's strategy to increase non-employment cash income;
2. describe the CoC's strategy to increase access to non-employment cash sources;
3. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase non-employment cash income.

1. The initial action plan for unemployed homeless is to apply for mainstream benefits of TANF or General Assistance which provides monthly financial assistance for basic needs. Unfortunately, cash benefit amounts remain fixed for the number of household members unless shelter and utility allowances are

added. For individuals who may have a permanent disability or who are elderly over 65 years, mainstream cash assistance remains the only source of non-employment income if the person is not eligible for social security disability benefits or annuity. These individuals are encouraged to also apply for SNAP benefits to supplement their financial resources. Others will find ways to make 'fast cash' generally by selling aluminum cans, vegetables, or panhandling.
 3. GHURA's Planner and Catholic Social Service will be responsible for overseeing the CoC's strategy to increase non-employment income.

3A-5c. Increasing Employment. Attachment Required.

Applicants must describe how the CoC:

- 1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and**
- 2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being.**
 (limit 2,000 characters)

The CoC promoted partnerships between the Dept. of Labor, the University of Guam (UOG), and several private and government employers in health care. The partnerships resulted in new apprenticeship and pre-apprenticeships being developed in health care, hospitality, and construction. New training programs were established at the University of Guam in Caregiver and Nursing Assistant. A pre-apprenticeship curriculum to enable participants to learn skills for entry level employment in health care settings has been created and will be offered in the near future. These programs were developed through outreach and collaboration with employers and through the CoC's partnership with the University of Guam. The CoC conducts annual homeless outreach events, Passport to Services wherein private and public organizations participate. Pacific Human Resources (PHR) is one of the private employment organizations that partners with the CoC in assisting homeless clients with employment. Other partners include Flame Tree Freedom Center, ICANN and Jamaican Grill Inc. These private businesses provides employment opportunity to persons with disabilities such as janitorial and grounds maintenance. Guam Dept. of Labor/ American Job Center keeps CoC members abreast of new jobs openings and training services available to clients.

3A-5d. Promoting Employment, Volunteerism, and Community Service.

Applicants must select all the steps the CoC has taken to promote employment, volunteerism and community service among people experiencing homelessness in the CoC's geographic area:

1. The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	<input type="checkbox"/>
2. The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery).	<input type="checkbox"/>

3. The CoC trains provider organization staff on connecting program participants with formal employment opportunities.	<input type="checkbox"/>
4. The CoC trains provider organization staff on volunteer opportunities for program participants and people experiencing homelessness.	<input type="checkbox"/>
5. The CoC works with organizations to create volunteer opportunities for program participants.	<input type="checkbox"/>
6. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	<input type="checkbox"/>
7. Provider organizations within the CoC have incentives for employment.	<input type="checkbox"/>
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	<input type="checkbox"/>

3A-6. System Performance Measures 05/30/2019
Data-HDX Submission Date

Applicants must enter the date the CoCs submitted its FY 2018 System Performance Measures data in HDX. (mm/dd/yyyy)

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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Warning! The CoC Application score could be affected if information is incomplete on this formlet.

3B-1. Prioritizing Households with Children.

Applicants must check each factor the CoC currently uses to prioritize households with children for assistance during FY 2019.

1. History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of previous homeless episodes	<input checked="" type="checkbox"/>
3. Unsheltered homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input type="checkbox"/>
5. Bad credit or rental history	<input type="checkbox"/>
6. Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

3B-1a. Rapid Rehousing of Families with Children.

Applicants must:

1. describe how the CoC currently rehouses every household of families with children within 30 days of becoming homeless that addresses both housing and service needs;

2. describe how the CoC addresses both housing and service needs to ensure families with children successfully maintain their housing once

assistance ends; and

3. provide the organization name or position title responsible for overseeing the CoC’s strategy to rapidly rehouse families with children within 30 days of them becoming homeless.

(limit 2,000 characters)

1. The CoC’s strategy to rapidly rehouse families with children within 30 days of becoming homeless that addresses both housing and service needs is done with the collaboration of CoC member organizations through referral process. The CoC works closely with Guam Dept. of Education’s Student Parent Community Engagement (SPCE) office who regularly conducts outreaches to determine home conditions of students. The strategy also involves using ESG that rapidly rehouse and prioritize families with children. ESG allocated for 75% of the ESG budget to RRH. ESG staff assist families with children to apply for public housing and Family Unification Program. Persons with disability in families, are referred to Housing First Rental Assistance Program that provides assistance to homeless individuals and families with rental and utilities assistance. The organization that do the referral are required to provide support services that serves as match which is a condition with program requirements.

2. Support services that accompany rapid rehousing are customized for the families. This could include counseling, jobs assistance and household budgeting. Case workers develop an individualized service plan that will best assist the family achieve self-sufficiency upon existing government assistance programs. Case workers may include other service providers in the case management of the client, including school social workers, to ensure needs to school-age children in the household are enrolled and their needs are addressed.

3. The organization responsible for overseeing the CoC’s strategy to rapidly rehouse families with children within 30 days of them becoming homeless is a joint effort of CoC member organizations specifically The Salvation Army that manages the ESG RRH program, Catholic Social Service that manages the only emergency shelter on island and GHURA that administers the Family Unification Program (FUP) in partnership with Child Protective Services.

3B-1b. Antidiscrimination Policies.

Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent housing (PSH and RRH)) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or - Insured Housing.

1. CoC conducts mandatory training for all CoC- and ESG-funded housing and services providers on these topics.	<input checked="" type="checkbox"/>
2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics.	<input checked="" type="checkbox"/>
3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>

4. CoC has worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within the CoC geographic area that might be out of compliance and has taken steps to work directly with those facilities to come into compliance.

3B-1c. Unaccompanied Youth Experiencing Homelessness–Addressing Needs.

Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied youth experiencing homelessness who are 24 years of age and younger includes the following:

1. Unsheltered homelessness	Yes
2. Human trafficking and other forms of exploitation	Yes
3. LGBT youth homelessness	Yes
4. Exits from foster care into homelessness	Yes
5. Family reunification and community engagement	Yes
6. Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

3B-1c.1. Unaccompanied Youth Experiencing Homelessness–Prioritization Based on Needs.

Applicants must check all that apply that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.

1. History of, or Vulnerability to, Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
3. Unsheltered Homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input type="checkbox"/>
5. Bad Credit or Rental History	<input type="checkbox"/>

3B-1d. Youth Experiencing Homelessness–Housing and Services Strategies.

Applicants must describe how the CoC increased availability of housing and services for:

1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and
 2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.
- (limit 3,000 characters)

1. Youth-serving agencies of the CoC take the lead in developing strategies to address youth experiencing homelessness. Sanctuary, which provides an array of youth services including permanent and emergency housing, has created a new youth-focused project for the upcoming year and modified its current project to serve more youth. In November 2018, Sanctuary entered into a contractual agreement with the Judiciary of Guam to provide justice-involved runaway and/or homeless youth with a community-based housing program. In June 2019, Sanctuary Inc. increased its bed capacity of its Emergency Center from 18 beds to 24 beds (12 males and 12 females). This has allowed Sanctuary to serve additional runaway homeless youth, ages 12-17. The program is funded by Health and Human Services (HHS), Office of the Attorney General of Guam, Guam’s Dept. of Youth Affairs and the Judiciary of Guam. Sanctuary also continues to operate its transition living program, funded by HHS, for homeless youth ages 16-22 including parenting or pregnant young mothers with their dependents up to 3 ages 0-9. In August 2019, Sanctuary submitted a proposal to implement a new permanent housing-rapid rehousing program for homeless youth ages 16 to 24, including pregnant and parenting youth with up to 3 dependents age 9 and younger. The proposal responds to an unmet need in the community. Guam continues to conduct outreach targeting homeless street youth, despite the small representation of homeless street youth in HMIS. They also continue to engage youth in CoC activities such as assisting in the PIT counts and providing guidance on locations for conducting future count and outreaches.

3B-1d.1. Youth Experiencing Homelessness–Measuring Effectiveness of Housing and Services Strategies.

Applicants must:

- 1. provide evidence the CoC uses to measure each of the strategies in question 3B-1d. to increase the availability of housing and services for youth experiencing homelessness;**
- 2. describe the measure(s) the CoC uses to calculate the effectiveness of both strategies in question 3B-1d.; and**
- 3. describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of both strategies in question 3B-1d. (limit 3,000 characters)**

1. The CoC documents its performance of programs to determine if objectives are met. Measures are reported at regular meetings, they enter data into HMIS and HIC, and they complete annual reports. Sanctuary also record other metrics that help determine programs’ effectiveness. Since 2016 to date, Sanctuary has provided emergency housing to a total of 57 runaway homeless youth. Sanctuary’s transitional housing, which opened in 2017, has provided shelter and support services to a total of 31 youth to date. Of the 31, four youth were transferred from the emergency shelter to the transitional program. Four parenting youth and their dependents received services through quarterly street outreaches before they finally decided to enter into the program. Earlier this year (2019), all six beds in the transitional program were fully occupied with an established wait-list of three youth waiting on an available bed. Sanctuary is in receipt of three federal housing grants that fund an emergency program, a runaway/homeless program, transitional housing and permanent/rapid rehousing program, and complies with all the reporting and data collection

requirements.

2) Basic Center and Transitional Living Programs are included in the Housing Inventory Chart. Therefore, the CoC can track the effectiveness of the programs based on their System Performance Measure. The new program(s) will be included in the Housing Inventory Chart where the CoC can also track effectiveness of the programs based on the system performance measure.

3) The CoC tracking efforts is an appropriate way to determine effectiveness because by including the programs in HIC there is transparency in their effectiveness. The CoC during its regularly scheduled meetings can provide feedback on length of stay, transition to permanent housing, income and recidivism. The CoC can assist with referral to other agencies and programs.

3B-1e. Collaboration–Education Services.

Applicants must describe:

1. the formal partnerships with:

- a. youth education providers;
- b. McKinney-Vento LEA or SEA; and
- c. school districts; and

2. how the CoC collaborates with:

- a. youth education providers;
- b. McKinney-Vento Local LEA or SEA; and
- c. school districts.

(limit 2,000 characters)

The CoC collaborates with the Guam Dept of Education (GDOE) to support the education of homeless children and youth. GDOE serves as both the SEA and LEA, and as such, is responsible for the education of students in all public elementary, middle, high schools, and secondary alternative schools. In addition, the GDOE State Agency provides funding for educational improvements for private schools and charter schools. Guam Public Law 30-50 established GDOE is a single public-school district.

1. A CoC member serves as the representative for homeless children and youth on several advisory groups. These include GDOE Advisory Panel for Students with Disabilities and the Guam Interagency Coordinating Council for Early Intervention Services to Young Children. CoC membership includes a GDOE Head Start staff member who obtains additional assistance from other GDOE divisions, including the Student Support Services Division and the GDOE Student Parent Community Engagement Project, which assists at-risk students and their families. These GDOE entities work to address issues faced by any identified homeless children in enrolling, attending and succeeding in school.

2. The CoC has done training on educational rights of homeless children and youth under McKinney-Vento and the importance of trauma-informed care. The training targeted the following: administrators of all public and private schools, faculty and staff of several preschool programs, middle and high schools, as well as students of Guam’s only public secondary alternative school, a school setting for at-risk students who are in danger of dropping out of school and who have been expelled or suspended for major offenses at public middle and high schools. GDOE also provides food commodities to augment CoC outreach efforts and food distribution through several CoC recipients.

3B-1e.1. Informing Individuals and Families Experiencing Homeless about Education Services Eligibility.

Applicants must describe policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services. (limit 2,000 characters)

The Guam Department of Education (GDOE) is represented by the Guam Head Start Program’s Social Service Supervisor who is an active CoC member. She provides information on the educational rights of homeless children from the National Center for Homeless Education to GDOE schools and CoC programs. When needed, she obtains the assistance of other GDOE divisions to support the education of homeless children and youth, specifically GDOE Student Support Services Division (SSSD) and the GDOE Student Parent Community Engagement (SPCE) Project which assists at-risk students and their families. Head Start, SSSD, and SPCE work collaboratively to ensure that the issues faced by any identified homeless children in enrolling, attending and succeeding in school, are addressed and resolved. They also share information specific to educational rights with identified homeless families as needed. The CoC is also represented in other working groups within Guam’s public-school system as the representative for homeless children, specifically the Guam Advisory Panel for Students with Disabilities and the Guam Interagency Coordinating Council for Early Intervention Services to Young Children. GDOE staff also participate in the CoC’s annual homeless community outreaches wherein information services, referrals and intake are conducted.

3B-1e.2. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

Applicant must indicate whether the CoC has an MOU/MOA or other types of agreements with listed providers of early childhood services and supports and may add other providers not listed.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
Head Start	No	Yes
Early Head Start	No	Yes
Child Care and Development Fund	No	Yes
Federal Home Visiting Program	No	Yes
Healthy Start	No	Yes
Public Pre-K	No	Yes
Birth to 3 years	No	Yes
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		

3B-2. Active List of Veterans Experiencing Homelessness.

Applicant must indicate whether the CoC uses an active list or by-name list to identify all veterans experiencing homelessness in the CoC. Yes

3B-2a. VA Coordination–Ending Veterans Homelessness.

Applicants must indicate whether the CoC is actively working with the U.S. Department of Veterans Affairs (VA) and VA-funded programs to achieve the benchmarks and criteria for ending veteran homelessness. Yes

3B-2b. Housing First for Veterans.

Applicants must indicate whether the CoC has sufficient resources to ensure each veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach. Yes

3B-3. Racial Disparity Assessment. Attachment Required.

- Applicants must:**
 1. select all that apply to indicate the findings from the CoC’s Racial Disparity Assessment; or
 2. select 7 if the CoC did not conduct a Racial Disparity Assessment.

1. People of different races or ethnicities are more likely to receive homeless assistance.	<input type="checkbox"/>
2. People of different races or ethnicities are less likely to receive homeless assistance.	<input type="checkbox"/>
3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
7. The CoC did not conduct a racial disparity assessment.	<input checked="" type="checkbox"/>

4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

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Warning! The CoC Application score could be affected if information is incomplete on this formlet.

4A-1. Healthcare—Enrollment/Effective Utilization

Applicants must indicate, for each type of healthcare listed below, whether the CoC assists persons experiencing homelessness with enrolling in health insurance and effectively utilizing Medicaid and other benefits.

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	No	No
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		
Medically Indigent Program	Yes	Yes

4A-1a. Mainstream Benefits.

Applicants must:

- 1. describe how the CoC systematically keeps program staff up to date regarding mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within the geographic area;**
- 2. describe how the CoC disseminates the availability of mainstream resources and other assistance information to projects and how often;**
- 3. describe how the CoC works with projects to collaborate with healthcare organizations to assist program participants with enrolling in**

health insurance;

4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and

5. provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy for mainstream benefits. (limit 2,000 characters)

Each homeless provider who incorporates case management services within their respective organization includes a process for connecting unemployed or low-income clients to mainstream benefits such as TANF, SNAP, Medicaid and state-funded Medically Indigent Program. These resources serve to provide assistance for basic needs and medical needs as other services are navigated. A Social Worker or Community Aide generally has primary responsibility for initiating this connection, including assisting with obtaining required documents necessary to establish eligibility and completing the application form. For individuals who may be ineligible for federally funded mainstream benefits, the Social Worker will still connect the individual to MIP for medical coverage. Additionally, the hospitals have social service units comprised of social workers who also connect inpatients to such benefits, especially for Medicaid or MIP benefits to address medical conditions and treatment, including assisting with completing the application forms. The Guam Homeless Coalition has provided financial assistance for the payment of identifications required for various purposes, including mainstream benefits, as well as contacts and follow-up with external, off-island entities for those documents. Any changes to program funding or eligibility criteria are reported to CoC members via email and formally at the monthly coalition meetings. Program personnel are generally invited to provide a presentation at the monthly meetings. GHURA remains the organization responsible for overseeing the CoC's strategy for mainstream benefits.

4A-2. Lowering Barriers to Entry Data:

Applicants must report:

1. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	8
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	6
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	75%

4A-3. Street Outreach.

Applicants must:

1. describe the CoC’s street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;

2. state whether the CoC’s Street Outreach covers 100 percent of the CoC’s geographic area;

3. describe how often the CoC conducts street outreach; and

4. describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)

The CoC continues to conduct a variety of outreach activities for both individual and large group levels. The individual outreaches are generally based on referrals of street homeless received of new faces at different sites. An available team from any of the CoC providers may be dispatched to make connections. A new process is implemented wherein such individuals are encouraged to visit The Salvation Army for navigation assistance to various services. Bus passes are provided to such individuals for the transportation to TSA. Individual outreaches are conducted 100% within the island territory. The larger group outreaches are generally coordinated with other NGOs and government partners to include health screens, immunizations, HIV/STD testings, and availability of staff from mainstream and employment programs. These outreaches are held at community parks, mayor’s offices or community centers, as well as in a roving, mobile clinic. Street homeless are picked up from specified locations for transport to these outreaches, as well as clients residing in emergency shelters. These outreaches are publicized on different CoC provider websites, Facebook, and mayor’s offices, and flyers are distributed to street homeless. Street outreaches are conducted at least monthly at known sites where homeless congregate and at the only homeless kitchen located in the central capital village of Hagatna. The primary strategy employed by the CoC is to remain connected to the street homeless and provide continuous assurance of availability to assist should the homeless decide they want to be sheltered. The CoC has added interpreters to translate information about available services for those who may not understand the English language well enough to communicate.

4A-4. RRH Beds as Reported in HIC.

Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2018 and 2019.

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	66	90	24

4A-5. Rehabilitation/Construction Costs–New Projects. No

Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting \$200,000 or more in funding for housing rehabilitation or new construction.

4A-6. Projects Serving Homeless under Other Federal Statutes. No

Applicants must indicate whether the CoC is requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other federal statutes.

4B. Attachments

Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
_ FY 2019 CoC Competition Report (HDX Report)	Yes	GU500 2019 HDX Co...	09/26/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners’ Preference.	No		
1C-4. PHA Administrative Plan Homeless Preference.	No	Letter to PHA Fro...	09/29/2019
1C-7. Centralized or Coordinated Assessment System.	Yes	Coordinated Entry...	09/27/2019
1E-1.Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.	Yes	Notice of Project...	09/27/2019
1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.	Yes	Project Rejected_...	09/27/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	Public Posting_Lo...	09/29/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	FY 2019 CoC Compe...	09/27/2019
1E-4.Public Posting–CoC-Approved Consolidated Application	Yes	FY2019 Public Pos...	09/27/2019
3A. Written Agreement with Local Education or Training Organization.	No	University of Gua...	09/29/2019
3A. Written Agreement with State or Local Workforce Development Board.	No		
3B-3. Summary of Racial Disparity Assessment.	Yes	GU500 Racial Equi...	09/26/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No		
Other	No	Coordinated Entry...	09/27/2019
Other	No		

Other	No		
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Attachment Details

Document Description: GU500 2019 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: Letter to PHA From GHC_RE: Homeless Preference

Attachment Details

Document Description: Coordinated Entry Assessment Tools

Attachment Details

Document Description: Notice of Projects Accepted

Attachment Details

Document Description: Project Rejected_Empowered Together_Posting

Attachment Details

Document Description: Public Posting_Local Competition

Attachment Details

Document Description: FY 2019 CoC Competition_Published

Attachment Details

Document Description: FY2019 Public Posting-CoC-Approved Consolidated Application

Attachment Details

Document Description: University of Guam_Training

Attachment Details

Document Description:

Attachment Details

Document Description: GU500 Racial Equity Analysis Tool

Attachment Details

Document Description:

Attachment Details

Document Description: Coordinated Entry_Policies and Procedures Draft

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/17/2019
1B. Engagement	09/26/2019
1C. Coordination	09/30/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/22/2019
1F. DV Bonus	09/26/2019
2A. HMIS Implementation	09/23/2019
2B. PIT Count	09/23/2019
3A. System Performance	09/30/2019
3B. Performance and Strategic Planning	09/29/2019
4A. Mainstream Benefits and Additional Policies	09/26/2019
4B. Attachments	09/29/2019

Submission Summary

No Input Required

2019 HDX Competition Report

PIT Count Data for GU-500 - Guam CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	1085	852	854	875
Emergency Shelter Total	105	87	124	102
Safe Haven Total	0	0	0	0
Transitional Housing Total	7	0	3	9
Total Sheltered Count	112	87	127	111
Total Unsheltered Count	973	765	727	764

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	55	64	66	84
Sheltered Count of Chronically Homeless Persons	0	0	0	0
Unsheltered Count of Chronically Homeless Persons	55	64	66	84

2019 HDX Competition Report

PIT Count Data for GU-500 - Guam CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	158	117	120	112
Sheltered Count of Homeless Households with Children	23	17	25	21
Unsheltered Count of Homeless Households with Children	135	100	95	91

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	33	21	24	14	23
Sheltered Count of Homeless Veterans	7	6	4	4	5
Unsheltered Count of Homeless Veterans	26	15	20	10	18

2019 HDX Competition Report
HIC Data for GU-500 - Guam CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	155	67	83	94.32%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	6	0	6	100.00%
Rapid Re-Housing (RRH) Beds	90	0	90	100.00%
Permanent Supportive Housing (PSH) Beds	166	0	72	43.37%
Other Permanent Housing (OPH) Beds	3	0	3	100.00%
Total Beds	420	67	254	71.95%

2019 HDX Competition Report

HIC Data for GU-500 - Guam CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	52	54	70	73

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

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC		21	11	12

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC		108	66	90

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Summary Report for GU-500 - Guam CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more “metrics” used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

RESUBMITTING FY2018 DATA: If you provided revised FY2018 data, the original FY2018 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and “save” before closing.

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	508	508	607	66	66	65	-1	59	59	56	-3
1.2 Persons in ES, SH, and TH	508	508	623	66	66	66	0	59	59	57	-2

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	517	551	666	109	170	165	-5	60	78	78	0
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	517	551	682	109	170	165	-5	60	78	78	0

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY 2017	FY 2018	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	0	0	0	0		0	0		0	0		0	
Exit was from ES	169	108	10	2	2%	12	6	6%	11	12	11%	20	19%
Exit was from TH	0	0	0	0		0	0		0	0		0	
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	102	105	1	2	2%	0	4	4%	4	2	2%	8	8%
TOTAL Returns to Homelessness	271	213	11	4	2%	12	10	5%	15	14	7%	28	13%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	852	854	2
Emergency Shelter Total	87	124	37
Safe Haven Total	0	0	0
Transitional Housing Total	0	3	3
Total Sheltered Count	87	127	40
Unsheltered Count	765	727	-38

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	512	512	628	116
Emergency Shelter Total	512	512	612	100
Safe Haven Total	0	0	0	0
Transitional Housing Total	0	0	24	24

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	32	30	40	10
Number of adults with increased earned income	5	4	0	-4
Percentage of adults who increased earned income	16%	13%	0%	-13%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	32	30	40	10
Number of adults with increased non-employment cash income	1	1	4	3
Percentage of adults who increased non-employment cash income	3%	3%	10%	7%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	32	30	40	10
Number of adults with increased total income	6	5	4	-1
Percentage of adults who increased total income	19%	17%	10%	-7%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	28	28	16	-12
Number of adults who exited with increased earned income	3	3	5	2
Percentage of adults who increased earned income	11%	11%	31%	20%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	28	28	16	-12
Number of adults who exited with increased non-employment cash income	7	7	2	-5
Percentage of adults who increased non-employment cash income	25%	25%	13%	-12%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	28	28	16	-12
Number of adults who exited with increased total income	9	9	7	-2
Percentage of adults who increased total income	32%	32%	44%	12%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	476	476	562	86
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	92	92	89	-3
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	384	384	473	89

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	588	594	708	114
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	92	100	114	14
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	496	494	594	100

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2018 (Oct 1, 2017 - Sept 30, 2018) reporting period.

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

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	16	18	2	-16
Of persons above, those who exited to temporary & some institutional destinations	0	0	0	0
Of the persons above, those who exited to permanent housing destinations	0	0	0	0
% Successful exits	0%	0%	0%	0%

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

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	540	538	577	39
Of the persons above, those who exited to permanent housing destinations	261	266	205	-61
% Successful exits	48%	49%	36%	-13%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	91	90	97	7
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	83	83	89	6
% Successful exits/retention	91%	92%	92%	0%

2019 HDX Competition Report

FY2018 - SysPM Data Quality

GU-500 - Guam CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports in order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

2019 HDX Competition Report

FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	79	84	88	88	22	21		6	104	160	153	147			108	66				
2. Number of HMIS Beds	49	79	83	83	22	21		6	57	81	75	75			108	66				
3. HMIS Participation Rate from HIC (%)	62.03	94.05	94.32	94.32	100.00	100.00		100.00	54.81	50.63	49.02	51.02			100.00	100.00				
4. Unduplicated Persons Served (HMIS)	536	565	512	612	56	49	0	24	106	109	108	108	0	0	226	194	58	58	2	2
5. Total Leavers (HMIS)	450	502	420	525	42	37	0	17	40	45	33	28	0	0	184	103	0	2	2	2
6. Destination of Don't Know, Refused, or Missing (HMIS)	21	44	0	0	0	1	0	0	0	1	4	0	0	0	3	4	0	0	2	2
7. Destination Error Rate (%)	4.67	8.76	0.00	0.00	0.00	2.70		0.00	0.00	2.22	12.12	0.00			1.63	3.88		0.00	100.00	100.00

2019 HDX Competition Report

Submission and Count Dates for GU-500 - Guam CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/25/2019	

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/30/2019	Yes
2019 HIC Count Submittal Date	4/30/2019	Yes
2018 System PM Submittal Date	5/30/2019	Yes



Angelina-Marie C. Lape
Chairperson

Vacant
Vice-Chairperson

Lou Hongyee
Treasurer

Edimund Wengu
Secretary

Diana Calvo
Member-at-Large,
Direct Service Provider

Margaret Hattori-Uchima
Member-at-Large,
Indirect Service Provider

Anthony Cruz
Member-at-Large,
Homeless Representative

September 6, 2019

Ray Topasna
Executive Director, Guam Housing and Urban Renewal Authority
117 Bien Venida Avenue
Sinajana, GU 96910



RE: Homeless Preference Admission Policy
PHA Data on Previously Homeless Tenants

Dear Mr. Topasna,

The Guam Homeless Coalition (GHC) believes GHURA's Public Housing Authority can play a key role in ending or reducing homelessness on our island. It is the hope of the GHC that GHURA's PHA can contribute substantially in our efforts to combat homelessness by not only providing housing, but data and expertise as well.

Specifically, GHURA's PHA can help by strategically utilizing waiting list preferences to target the community's most vulnerable population – homeless families and individuals. The GHC strongly encourages Guam's PHA to adopt a **homeless admission preference policy**, which other jurisdictions have similarly done to address homelessness. To this end, the GHC would be happy to meet with you to discuss how other communities have successfully implemented their homeless admission preference policies.

In further support of this effort, the GHC humbly requests that GHURA help strengthen Guam's ability to measure its impact. This can only be done through the collection of reliable data. Currently, GHURA's PHA does not collect data on how many of its tenants were previously homeless. The only available statistics come from referring agencies such as the Department of Integrated Services for Individuals with Disabilities and Guam Behavioral Health and Wellness Center, who make referrals to the Mainstream and NED housing voucher programs. There remains a larger group of unaccounted formerly homeless individuals and families served by the PHA. Thus, the GHC respectfully calls upon GHURA to help collect valuable data that can inform planning decisions for all relevant agencies and organizations.

The GHC welcomes further discussion with you on our requests. We thank you for your time and attention to these matters, and look forward to speaking with you soon. Please do not hesitate to contact me at (671) 475-0484 or at amscruz@gdoe.net.

Sincerely,

Angelina - Marie C. Lape

Angelina-Marie C. Lape
Chairperson, Guam Homeless Coalition



Angelina-Marie C. Lape
Chairperson

Vacant
Vice-Chairperson

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Member-at-Large,
Indirect Service Provider

Anthony Cruz
Member-at-Large,
Homeless Representative

September 3, 2019

Ramona McManus, Executive Director
Elim Pacific Ministries

Re: Results of Review and Ranking for FY2019 CoC Program Competition

Dear Ms. McManus,

Thank you for submitting a renewal application to the Guam Homeless Coalition (GHC) for the Empowered Together Permanent Supportive Housing (PSH) project as part of the FY 2019 Continuum of Care (CoC) Program Competition. Competition.

All applications were reviewed by the Review and Ranking Committee (RRC) comprised of GHC members representing agencies and organizations which do not receive CoC funding. Typically, the RRC reviews information provided by applicants in the areas of Project Performance, Experience and Organizational Commitment, Relative Need, Project Design and Effectiveness, and Financial Management. Consideration is also give to HUD and CoC program priorities and mandates.

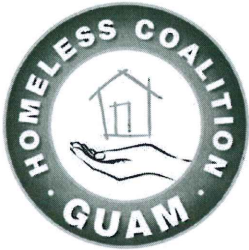
Please be advised that the RRC has recommended that funds from Empowered Together be reallocated to a new program. While the committee agrees that there is a need for supportive services for homeless persons with substance abuse issues, your proposed project does not meet current HUD and GHC thresholds. Specifically, your organization has not demonstrated effective use of federal funds including satisfactory drawdowns and performance for existing grants as evidenced by regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.

We thank you for taking the time and effort to develop and submit your proposal. If you have any questions or concerns, please do not hesitate to contact me at 300-1588 or via email at amscruz@gdoe.net. Again, thank you for your interest in the Continuum of Care and your continued efforts to address homelessness on Guam.

Sincerely,

Angelina - Marie C. Lape

ANGELINA-MARIE C. LAPE
GHC Review and Ranking Committee Leader
Guam Homeless Coalition Chairperson



Angelina-Marie C. Lape
Chairperson

Vacant
Vice-Chairperson

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Member-at-Large,
Indirect Service Provider

Anthony Cruz
Member-at-Large,
Homeless Representative

Date: September 3, 2019

To: All Project Applicants

From: Chairperson, Guam Homeless Coalition
GHC Review and Ranking Committee Leader

Subject: Results of Review and Ranking for FY 2019 Continuum of Care (CoC) Program Competition

To Whom It May Concern:

The Guam Homeless Coalition (GHC) is pleased to announce the results of its review of all project applications submitted under the FY 2019 CoC Program Competition.

Rank	Type	Organization	Programs	Totals	RRC Recommendations
1	RENEWAL	Catholic Social Services	Gai Animas	96.03%	Maintain current funding
2	RENEWAL HMIS	The Salvation Army Guam	HMIS	95.83%	Maintain current funding
3	RENEWAL	The Salvation Army Guam	Coordinated Entry System	94.81%	Maintain current funding
4	NEW	Sanctuary Inc. of Guam	Guma Manhoben	93.55%	Approved at requested funding level
5	RENEWAL	GHURA	Housing First Rental Assistance Program	90.69%	Maintain current funding
6	RENEWAL	Catholic Social Services	Y Jahame	90.14%	Maintain current funding
7	RENEWAL	Guma Mami Inc.	Guma Mami Inayek	85.17%	Maintain current funding
8	RENEWAL	Elim Pacific Ministries	Empowered Together	81.76%	Reallocate full funding

All applications were reviewed by the Review and Ranking Committee (RRC) comprised of GHC members representing agencies and organizations which do not receive CoC funding. Typically, the RRC reviews information provided by applicants in the areas of Project Performance, Experience and Organizational Commitment, Relative Need, Project Design and Effectiveness, and Financial Management. Consideration is also given to HUD and CoC program priorities and mandates. Note that the final decision on selected project applicants and funding levels is determined by HUD.

The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts to quickly re-house homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless individuals and families; and to optimize self-sufficiency among those experiencing homelessness.

We thank you for taking the time and effort to develop and submit your proposal. If you have any questions or concerns, please do not hesitate to contact me at 300-1588 or via email at amscruz@gdoe.net. Again, thank you for your interest in the Continuum of Care and your continued efforts to address homelessness on Guam.

Sincerely,

ANGELINA-MARIE C. LAPE
GHC Review and Ranking Committee Leader
Guam Homeless Coalition Chairperson

Cc: Catholic Social Services, Elim Pacific Ministries, GHURA, Guma Mami Inc., Sanctuary Inc. of Guam, The Salvation Army Guam



For Immediate Release

Contact: Amor Say, GHURA

Telephone: (671) 475-1406

Email: amsay@ghura.org

REQUEST FOR PROPOSALS FOR THE FY2019 CONTINUUM OF CARE (COC) PROGRAM

Sinajana, GU (July 25, 2019) The Guam Housing and Urban Renewal Authority (GHURA), as the collaborative applicant of the local Continuum of Care (CoC), together with the Guam Homeless Coalition, is soliciting proposals for U.S. Housing and Urban Development's (HUD) FY 2019 Continuum of Care Notice of Funding Availability (NOFA).

This solicitation of proposals is to ensure that Guam submits a funding recommendation for CFDA 14.267, Funding Opportunity Number FR-6200-N-25. This competition is open to any agencies and organizations that will address the following FY 2019 CoC Program goals of ending homelessness:

- a. Rapid rehousing individuals and families experiencing homelessness;
- b. Rehousing of persons fleeing domestic violence, dating violence, sexual assault, and stalking;
- c. Rehousing of youth while minimizing the trauma and dislocation caused by homelessness; and
- d. Promoting access and effective utilization of mainstream programs by individuals and families experiencing homelessness; and optimizing self-sufficiency among those experiencing homelessness.

To apply, please submit an abstract that includes the following:

- 1) Needs Assessment – Why is this work important and necessary? What data supports your statements?
- 2) Project Description – What do you intend to do? How are you going to do the work?
- 3) Budget

Abstracts should not exceed three (3) pages. The deadline to submit is before 5PM, August 14, 2019. All submissions and questions should be emailed to Amor Say at amsay@ghura.org.



For Immediate Release

Contact: Amor Say, GHURA

Telephone: (671) 475-1406

Email: amsay@ghura.org

REQUEST FOR PROPOSALS FOR THE FY2019 CONTINUUM OF CARE (COC) PROGRAM

Sinajana, GU (July 25, 2019) The Guam Housing and Urban Renewal Authority (GHURA), as the collaborative applicant of the local Continuum of Care (CoC), together with the Guam Homeless Coalition, is soliciting proposals for U.S. Housing and Urban Development's (HUD) FY 2019 Continuum of Care Notice of Funding Availability (NOFA).

This solicitation of proposals is to ensure that Guam submits a funding recommendation for CFDA 14.267, Funding Opportunity Number FR-6200-N-25. This competition is open to any agencies and organizations that will address the following FY 2019 CoC Program goals of ending homelessness:

- a. Rapid rehousing individuals and families experiencing homelessness;
- b. Rehousing of persons fleeing domestic violence, dating violence, sexual assault, and stalking;
- c. Rehousing of youth while minimizing the trauma and dislocation caused by homelessness; and
- d. Promoting access and effective utilization of mainstream programs by individuals and families experiencing homelessness; and optimizing self-sufficiency among those experiencing homelessness.

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- 3) Budget

Abstracts should not exceed three (3) pages. The deadline to submit is before 5PM, August 14, 2019. All submissions and questions should be emailed to Amor Say at amsay@ghura.org.



SCHOOL OF HEALTH
Office of the Dean

September 28, 2019

Guam Homeless Coalition
PO Box 3241
Hagatna, GU 96932

Dear GHC Continuum of Care:

The University of Guam has recently established several new training programs that may be of benefit to your clients in need of employment. We have a Caregiver Training program that enables those who complete, to have the skills necessary to assist clients in need of care in their homes and in elder care settings. We also have a pre-apprenticeship training program, in coordination with the Guam Dept. of Labor. The pre-apprenticeship program includes coursework on job readiness, interview skills, health workforce skills such as first aid certification and basic life support. The pre-apprenticeship is designed to provide entry level skills for those interested in working in a health care setting.

We realize that many of your clients may not be interested in employment in the health care setting, so we are also developing a pre-apprenticeship course that includes job readiness and employability skills that are applicable to non-health care fields. The pre-apprenticeships courses are 6 to 12 week sessions and require the applicant have a high school diploma or GED, and has documented ability to work in the United States.

As a partner in the Guam Homeless Coalition, the UOG School of Health offers it's support to establish training opportunities for GHC clients, including those in permanent supportive housing. We fully support the Coalition in the goal to prevent and end homelessness. Employment training and skills acquisition is one of the keys to prevention of homelessness. We look forward to moving ahead to plan for these training opportunities.

Sincerely,

Margaret Hattori-Uchima, PhD, RN
Dean, School of Health

CoC Racial Equity Analysis Tool

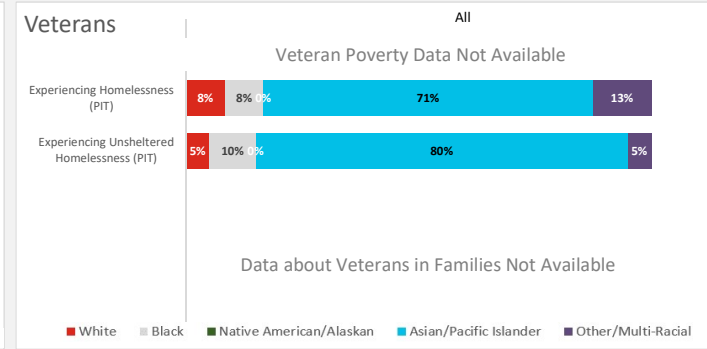
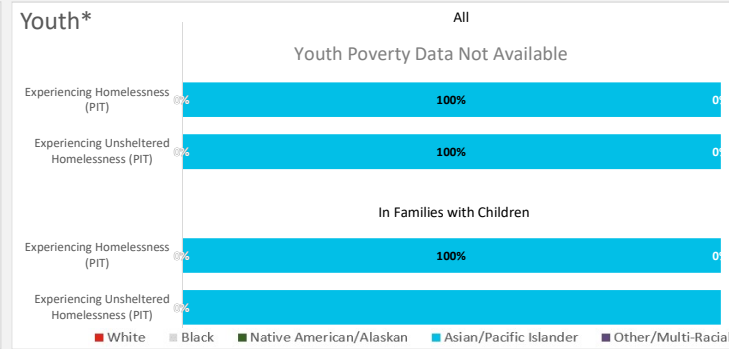
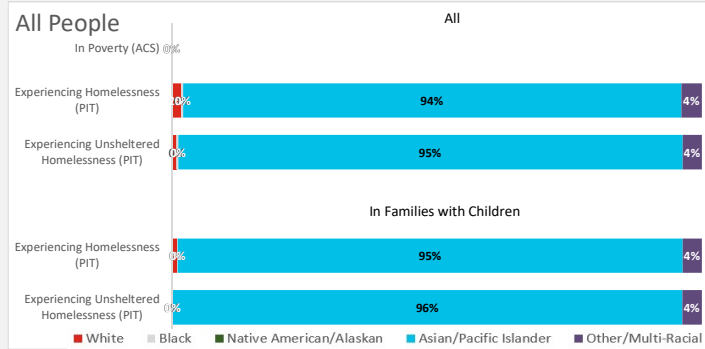
Homelessness and poverty counts at the CoC and State level

Select your CoC

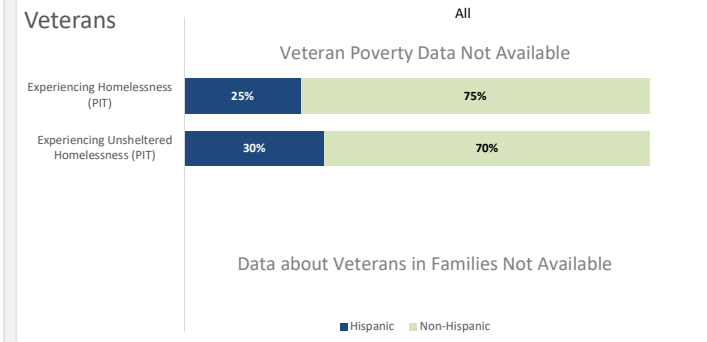
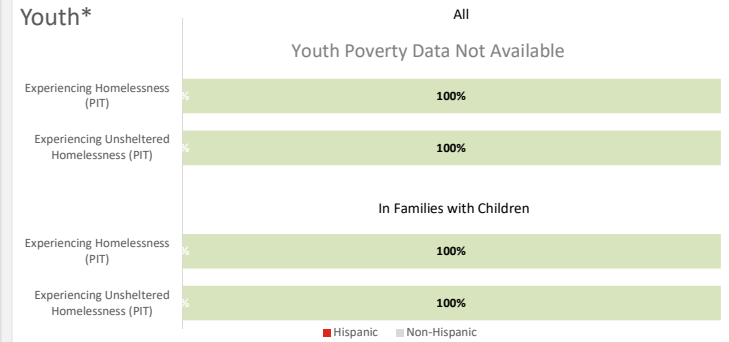
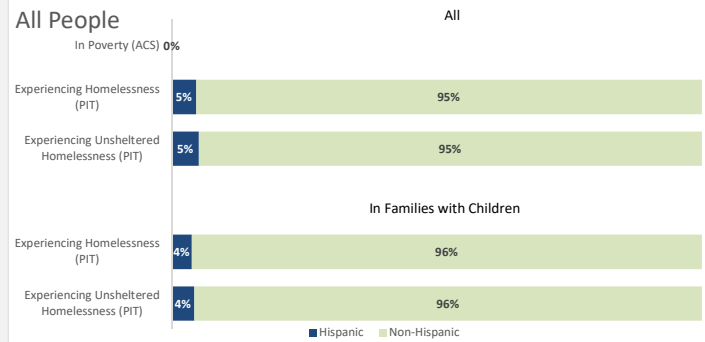
GU-500

Guam CoC

Distribution of Race



Distribution of Ethnicity



*Youth are individuals under the age of 25 who are unaccompanied or parenting.

*Youth experiencing homelessness is limited to unaccompanied and parenting youth persons under 25.

CoC Data

Race and Ethnicity	All (ACS) ¹				In Poverty (ACS) ¹				Experiencing Homelessness (PIT) ²				Experiencing Sheltered Homelessness (PIT) ²				Experiencing Unsheltered Homelessness (PIT) ²			
	All		In Families with Children		All		In Families with Children		All		In Families with Children		All		In Families with Children		All		In Families with Children	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
All People	#N/A		#N/A		#N/A		#N/A		852		637		87		70		765		567	
Race																				
White	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	15	2%	6	1%	9	10%	6	9%	6	1%	0	0%
Black	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	3	0%	1	0%	0	0%	0	0%	3	0%	1	0%
Native American/Alaskan	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Asian/Pacific Islander	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	801	94%	607	95%	73	84%	62	89%	728	95%	545	96%
Other/Multi-Racial	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	33	4%	23	4%	5	6%	2	3%	28	4%	21	4%
Ethnicity																				
Hispanic	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	39	5%	24	4%	0	0%	0	0%	39	5%	24	4%
Non-Hispanic	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	813	95%	613	96%	87	100%	70	100%	726	95%	543	96%

State Data

Race and Ethnicity	All (ACS) ¹				In Poverty (ACS) ¹				Experiencing Homelessness (PIT) ²			
	All		In Families with Children		All		In Families with Children		All		In Families with Children	
	#	%	#	%	#	%	#	%	#	%	#	%
All People	#N/A		#N/A		#N/A		#N/A		852		637	
Race												
White	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	15	2%	6	1%
Black	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	3	0%	1	0%
Native American/Alaskan	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	0	0%	0	0%
Asian/Pacific Islander	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	801	94%	607	95%
Other/Multi-Racial	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	33	4%	23	4%
Ethnicity												
Hispanic	#N/A	0%	#N/A	0%	#N/A	0%	#N/A	0%	39	5%	24	4%
Non-Hispanic	#N/A	100%	#N/A	100%	#N/A	100%	#N/A	100%	813	95%	613	96%

Youth <25	#N/A		NOT AVAILABLE				8	7	1	1	7	6	
Race	#N/A		NOT AVAILABLE				8	7	1	1	7	6	
White	#N/A	0%	--	--	--	--	0	0%	0	0%	0	0%	
Black	#N/A	0%	--	--	--	--	0	0%	0	0%	0	0%	
Native American/Alaskan	#N/A	0%	--	--	--	--	0	0%	0	0%	0	0%	
Asian/Pacific Islander	#N/A	0%	--	--	--	--	8	100%	7	100%	1	100%	
Other/Multi-Racial	#N/A	0%	--	--	--	--	0	0%	0	0%	0	0%	
Ethnicity	#N/A		NOT AVAILABLE				8	7	1	1	7	6	
Hispanic	#N/A	0%	--	--	--	--	0	0%	0	0%	0	0%	
Non-Hispanic	#N/A	0%	--	--	--	--	8	100%	7	100%	1	100%	
Veterans	#N/A		NOT AVAILABLE				24	NOT AVAILABLE	4	NOT AVAILABLE	20	100%	NOT AVAILABLE
Race	#N/A		NOT AVAILABLE				24	NOT AVAILABLE	4	NOT AVAILABLE	20	100%	NOT AVAILABLE
White	#N/A	0%	--	--	--	--	2	8%	1	25%	1	5%	
Black	#N/A	0%	--	--	--	--	2	8%	0	0%	2	10%	
Native American/Alaskan	#N/A	0%	--	--	--	--	0	0%	0	0%	0	0%	
Asian/Pacific Islander	#N/A	0%	--	--	--	--	17	71%	1	25%	16	80%	
Other/Multi-Racial	#N/A	0%	--	--	--	--	3	13%	2	50%	1	5%	
Ethnicity	#N/A		NOT AVAILABLE				24	NOT AVAILABLE	4	NOT AVAILABLE	20	100%	NOT AVAILABLE
Hispanic	#N/A	0%	--	--	--	--	6	25%	0	0%	6	30%	
Non-Hispanic	#N/A	0%	--	--	--	--	18	75%	4	100%	14	70%	

Youth <25	#N/A		NOT AVAILABLE		#N/A		NOT AVAILABLE		8	7
Race	#N/A		NOT AVAILABLE		#N/A		NOT AVAILABLE		8	7
White	#N/A	0%	--	--	#N/A	0%	--	--	0	0%
Black	#N/A	0%	--	--	#N/A	0%	--	--	0	0%
Native American/Alaskan	#N/A	0%	--	--	#N/A	0%	--	--	0	0%
Asian/Pacific Islander	#N/A	0%	--	--	#N/A	0%	--	--	8	100%
Other/Multi-Racial	#N/A	0%	--	--	#N/A	0%	--	--	0	0%
Ethnicity	#N/A		NOT AVAILABLE		#N/A		NOT AVAILABLE		8	7
Hispanic	#N/A	0%	--	--	#N/A	0%	--	--	0	0%
Non-Hispanic	#N/A	0%	--	--	#N/A	0%	--	--	8	100%
Veterans	#N/A		NOT AVAILABLE		#N/A		NOT AVAILABLE		24	NOT AVAILABLE
Race	#N/A		NOT AVAILABLE		#N/A		NOT AVAILABLE		24	NOT AVAILABLE
White	#N/A	0%	--	--	#N/A	0%	--	--	2	8%
Black	#N/A	0%	--	--	#N/A	0%	--	--	2	8%
Native American/Alaskan	#N/A	0%	--	--	#N/A	0%	--	--	0	0%
Asian/Pacific Islander	#N/A	0%	--	--	#N/A	0%	--	--	17	71%
Other/Multi-Racial	#N/A	0%	--	--	#N/A	0%	--	--	3	13%
Ethnicity	#N/A		NOT AVAILABLE		#N/A		NOT AVAILABLE		24	NOT AVAILABLE
Hispanic	#N/A	0%	--	--	#N/A	0%	--	--	6	25%
Non-Hispanic	#N/A	0%	--	--	#N/A	0%	--	--	18	75%

Sources:

¹ American Community Survey (ACS) 2011-2015 5-yr estimates; Veteran CoC data comes from the ACS 2015 1-yr estimates; Total youth in the American Community Survey is a rollup of race estimates of all persons under 25.

² Point-In-Time (PIT) 2017 data

Note: Race estimates of individuals in families with children are based on the race of the householder.



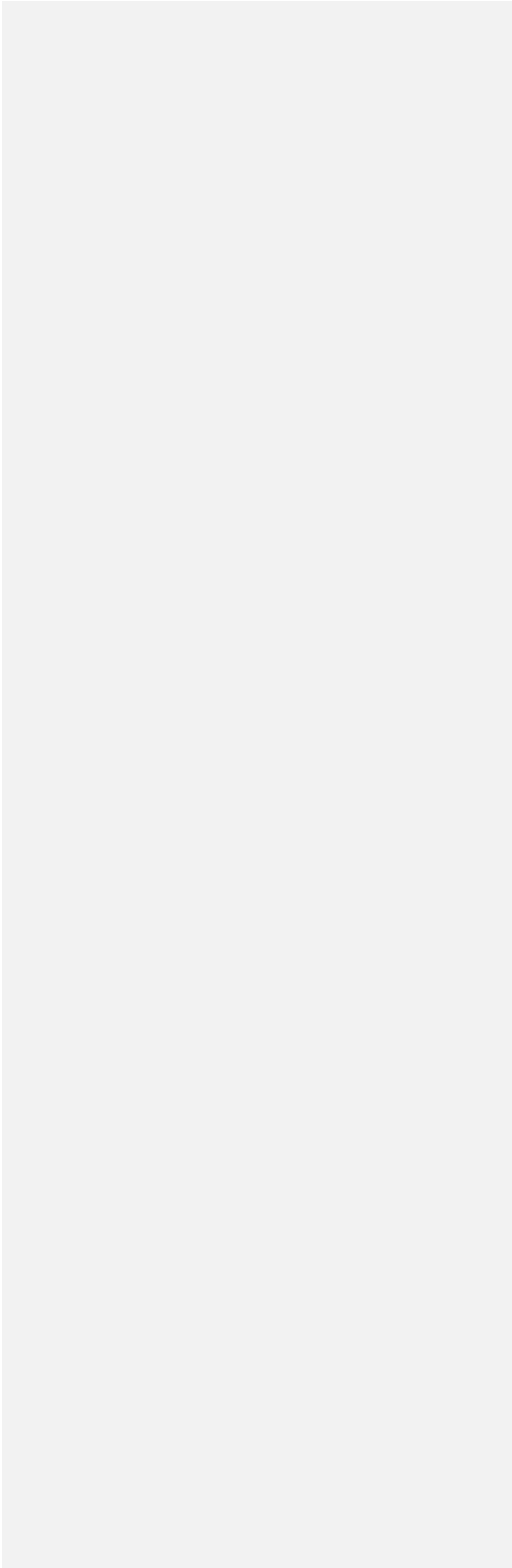
Guam Homeless Coalition Continuum of Care Coordinated Entry System

Policies and Procedures

Table of Contents

- I. Executive Summary..... 2
- II. Access to Services 2
- III. Assessment Tool and Severity of Service Needs 5
- IV. Homeless Categories..... 6
- V. Prioritization..... 7
- VI. Referral to Projects Error! Bookmark not defined.
- VII. Serving Persons Fleeing From Domestic Violence13
- VIII. Addressing the Wait List14

DRAFT



Executive Summary

The Guam Continuum of Care (CoC), also known as the Guam Homeless Coalition (GHC), is required to establish a *Coordinated Entry System (CES)*. These mandates can be found in the CoC Program Interim Rule, 24 CFR Part 578. The purpose of establishing a Coordinated Entry process is to highlight the importance of making the process easy for homeless persons to access services, assess their needs, and prioritize the housing and services needs based on these needs. The Coordinated Entry System Policy and Procedures (CESPP) is developed for all local CoC programs and the Emergency Solutions Grant (ESG) to be participants of this process and to adhere to the coordinated entry system set in place.

The CESPP will identify the roles and responsibilities of all parties involved and ensure all parties follow the same process of prioritizing households based on their assessed needs. These roles and responsibilities will be identified through a Memorandum of Understanding between the CoC-funded and ESG service provider and the Guam Homeless Coalition. The GHC Executive Committee will be responsible for the implementation and oversight of the CESPP. Revisions to the CESPP will be recommended through the GHC general membership meeting which occurs on the 3rd Wednesday of every month. Any revisions must be approved by a **majority vote**.

The GHC has reviewed HUD's Coordinated Entry Policy Brief published on February 2015 and has highlighted key points of an effective coordinated process.

Access to Services

Fair and Equal Access - The coordinated entry process ensures that all persons have *fair and equal access* to housing and services regardless of where or how they present themselves for help. Fair and equal access means homeless persons seeking services can easily access the coordinated entry process whether by phone, in person, or some other method, such as through direct outreach by service providers. Providers must comply with all federal statutes including the Fair Housing, title VIII of the Civil Rights Act of 1968, and the American with Disabilities Act.

Housing First - This Coordinated Entry process is a *Housing First* oriented process such that homeless persons are housed quickly without preconditions or service participation such as participating in substance abuse treatment services.

Person-Centered – Guam's CoC practices a person-centered coordinated entry process that incorporates participant choice such as location and type of housing, level of services, and other options that households can participate in making decisions.

Access Points

The following are access points to the coordinated entry process.

CoC Programs

Persons seeking homeless assistance can access the coordinated entry process through Guam's CoC-funded entities. CoC programs are responsible for identifying staff responsible for conducting the assessment and referrals of homeless persons who present themselves for assistance.

-)] **Catholic Social Services (CSS)** – the CSS, a non-profit, faith-based organization, manages two CoC-funded permanent supportive housing programs, namely the CARIDAD Supportive Services Program and the Y Jahame Permanent Housing Program.
 - o Physical address: 234A U.S. Army Juan G. Fejeran St., Barrigada
 - o Telephone: (671) 635-1441

-)] **Elim Pacific Ministries** – Elim is a non-profit, faith-based organization that manages a CoC-funded transitional housing program, namely the Oasis Empowerment Center, and one permanent supportive housing program, namely the Empowered Together.
 - o Physical address: 556 E. Marine Corps Dr., East Hagatna
 - o Telephone: (671) 646-4601

-)] **Sanctuary, Incorporated** – Sanctuary is a non-profit organization that manages a permanent supportive housing program, namely the Forrester's Refuge program.
 - o Physical address: 406 Mai Mai Road, Chalan Pago
 - o Telephone: (671) 475-7101

-)] **Guam Behavioral Health and Wellness Center (GBHWC)** – GBHWC is a government entity that manages a permanent supportive housing program, namely the Guma Hinemlo program.
 - o Physical address: 790 Gov. Carlos G. Camacho Road., Tamuning
 - o Telephone: (671) 647-5440

-)] **Guam Housing and Urban Renewal Authority (GHURA)** – GHURA is a government entity that manages a permanent supportive housing program, namely the Housing First Rental Assistance Program.
 - o Physical address: 117 Bien Venida Avenue, Sinajana
 - o Telephone: (671) 475-1406/1408

ESG Program

-) **The Salvation Army (TSA)** – TSA is a non-profit, faith-based organization that provides rapid re-housing and homeless prevention services.
 - o Physical address: 155003 Corsair Avenue, Tiyan
 - o Telephone: (671) 477-3528/9

Veterans

-) **Westcare’s Supportive Services for Veterans and their Families (SSVF)** – provides assistance to veterans and their families who are homeless or at-risk of becoming homeless.
 - o Physical address: 222 Chalan Santo Papa, Suite 207 Reflection Center, Hagatna
 - o Telephone: (671) 989-0234/5

Emergency Services

Persons seeking emergency shelter can obtain services through the island’s available emergency shelter programs. Regardless of whether the coordinated entry intake office or staff are unavailable due to established operating hours, homeless persons can still access the shelter to the extent that shelter beds are available. Persons who are provided shelter beds will be assessed through the coordinated entry process when intake staff are available during the hours of operation.

Emergency Shelters

-) **Guma San Jose (GSJ)** – this shelter is managed by the Catholic Social Services to provide beds for male individuals and families.
 - o Physical address: 234A U.S. Army Juan G. Fejeran St., Barrigada
 - o Telephone: (671) 635-1441
-) **Co-Ed Emergency Shelter**- this shelter is managed by the Sanctuary, Incorporated to provide temporary shelter to children ages 17 and below.
 - o Physical address: 406 Mai Mai Road, Chalan Pago
 - o Telephone: (671) 475-7101
-) **US Vets Emergency Shelter** – this program is managed by the U.S. Vets, Hawaii to provide shelter beds for homeless male veterans who have been honorably discharged from the military.

Commented [AM1]: US Vets, Nate Masunuari is a member of the GHC but is no longer with US Vets. Maryann w/ US Vets has not signed the GHC membership app. An email was sent to Maryann requesting her participation in the GHC, CES, and HMIS.

Protective Shelters

- J) **Alee 1 (Women’s Shelter)** – provides emergency/protective shelter for victims of family domestic violence & sexual assault. The shelter serves women, with or without, children, who are in crisis from family domestic violence & sexual assault.
 - o Telephone: (671) 648-5888
- J) **Alee 2 (Children’s Shelter)** - an emergency receiving home for children ages birth to seventeen who are victims of abuse and/or neglect.
 - o Telephone: (671) 648-5888

Assessment Tool and Severity of Service Needs

CoC and ESG programs must utilize the Vulnerability Index (VI), the Service Prioritization Decision Assistance Tool (SPDAT), herein attached as “**Exhibit A**”. The VI-SPDAT or VI-F-SPDAT is utilized to determine the level of chronic status as well as the medical vulnerability faced by homeless individuals and families and serves as an intake and case management tool. This standardized assessment tool will identify the severity of needs rather than basing prioritization of housing and services by a specific diagnosis or disability type.

Severity of Service Needs

Households assessed with the greatest needs are prioritized for any type of housing and homeless assistance available in the CoC, including Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), and other services. Furthermore, persons are prioritized for housing and services based on the eligibility criteria for each respective program.

Persons who have been identified as having the most severe service needs means an individual for whom at least one of the following are true:

1. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; or
2. Significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing; or
3. Vulnerability to illness or death; or
4. Risk of continued homelessness; or
5. The extent to which people, especially youth and children, elderly, and families are unsheltered; or
6. Vulnerability to victimization, including physical assault or engaging in trafficking or sex work.

Commented [AM2]: This was added to reflect that each program has their eligibility criteria and will thus accept households based on their program design.

Commented [AM3]: The CoC needs to decide what factors to consider when determining persons with the most severe service needs

Homeless Categories

The following are the criteria for defining homeless.

Category 1: Literally Homeless

- (1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
- i. Has a primary nighttime residence that is a public or private place not meant for human habitation;
 - ii. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs); or
 - iii. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Category 2: Imminent Risk of Homelessness

- (2) Individual or family who will imminently lose their primary nighttime residence, provided that:
- i. Residence that will be lost within 14 days of the date of application for homeless assistance;
 - ii. No subsequent residence has been identified; and
 - iii. The individual or family lacks the resources or support networks needed to obtain other permanent housing

Category 3: Homeless Under Other Federal Statutes

- (3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
- i. Are defined as homeless under the other listed federal statutes;
 - ii. Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homelessness assistance application;
 - iii. Have to experienced persistent instability as measured by two moves or more during the preceding 60 days; and
 - iv. Can be expected to continue in such status for an extended period of time due to special needs or barriers

Category 4: Fleeing/Attempting to Flee DV

- (4) Any individual or family who:
- i. Is fleeing, or is attempting to flee, domestic violence;
 - ii. Has no other residence; and
 - iii. Lacks the resources or support networks to obtain other permanent housing

Prioritization

This section discusses the prioritization of households according to program type – Permanent Supportive Housing (PSH), Continuum of Care Rapid Re-Housing (RRH) Program, Emergency Solutions Grant (ESG), and Transitional Housing (TH). As discussed earlier, prioritization to any of the programs types below will be dependent on the eligible criteria of each respective program.

Permanent Supportive Housing (PSH) Programs

One of the purpose of the CESPP is to ensure people with the most severe needs and levels of vulnerability are prioritized for housing and services. It is HUD’s policy that persons who are experiencing chronic homelessness are prioritized for PSH.

Eligibility – Households must fall into the following categories of homelessness for assistance in PSH projects.

-) Category 1: Literally Homeless
-) Category 4: Fleeing/Attempting to Flee DV

Prioritization – Households who meet the Category 1 homeless definition will be prioritized based on the following populations. GHC has identified these populations based on the island’s goal to end homelessness, the *Opening Doors: Federal Strategic Plan to Preventing and Ending Homelessness*, and HUD’s guidance on prioritizing chronic homeless households for housing and services. The prioritization of eligible households for PSH projects as per GHC’s coordinated assessment system:

1. VI-SPDAT or VI-F-SPDAT score is equal to or higher than 10
2. Length of time homeless. Persons living in a place not meant for human habitation, a safe haven, or in an emergency shelter must be at least 12 months. Furthermore, persons who have experienced at least for occasions of homelessness living in a place not meant for human habitation, a safe haven, or in an emergency shelter over a period of 3 years where the cumulative total of the occasions must total 12 months.
3. In the event of a tie, the following criteria should be used:

- a. Age, with the elderly being the higher priority
- b. Families with children
- c. Have all documents in place

Rapid Re-Housing Programs (RRH)

Eligibility: Under the CoC RRH program, individuals and families are eligible if they meet the following categories of homelessness:

-) Category 1: Literally Homeless
-) Category 4: Fleeing/Attempting to Flee DV (where the individuals for family also meets the criteria for Category 1)

Prioritization:

Of the eligible households who fall under the Category 1 definition of homeless, the following populations will be prioritized for RRH. GHC has identified these populations based on the island's goal to end homelessness, the *Opening Doors: Federal Strategic Plan to Preventing and Ending Homelessness*, and HUD's guidance on prioritizing chronic homeless households for housing and services. The following populations have been prioritized for rapid re-housing for individuals and families.

1. VI-SPDAT or VI-F-SPDAT score is 5- 10
2. Household's total annual income must NOT be more than 30% of the Area Median Income for Pacific Islands;
3. Households must have sustainable income to continue monthly rent and utility payments upon deadline of the program assistance. Households who are unemployed at time of the application must have the ability and access to gainful employment;
4. Household does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place that would make the household homeless as defined in HEARTH Act.

Determining Financial Assistance:

The project sponsor must determine the amount and type of assistance that the individual or family will need to (re)gain stability in permanent housing.

1. Definitions:

- a. Short-term – 1 to 3 months financial assistance
- b. Medium-term – 4 to 24 months financial assistance

2. Each household can only receive up to 24 months rental and/or utility assistance.

Once the household receives up to 24 months rental and/or utility assistance, the household cannot receive assistance for a period of 3 years.

Commented [AM4]: Amor/FSC please verify...

3. Rental Assistance Available

a. Required Documents:

- i. Lease Agreement
- ii. HP&RR Rental Payment Request
- iii. Landlord's current Business License
- iv. Tenant Payment Ledger
- v. Authorization Letter (if an individual other than the landlord signs HP&RR forms on behalf of the landlord)

b. HP&RR Staff Responsibilities before providing rental assistance

- i. HP&RR Staff must verify that household's monthly rental payments meet HUD's Fair Market Rent provided under 24 CFR part 888 and complies with HUD's standard of rent reasonableness, as established under 24 CFR 578.
- ii. If household needs to relocate into a new unit, then the HP&RR Staff would need to conduct a housing inspection to make sure the unit meets HUD's Fair Market Rent provided under 24 CFR part 888 and complies with HUD's standard of rent reasonableness, as established under 24 CFR 578.

4. Financial Assistance Available

- a. Security deposits (up to 2 months)
- b. First and last month's rent
- c. Property damage
- d. Utility deposits, a one-time fee paid to utility companies

Transitional Housing Programs

Substance Abuse Treatment Programs

Eligibility: Currently, the only transitional housing programs available are 6-month substance abuse treatment programs for single adult males and females. Eligible individuals must meet the following categories to be eligible for the available transitional housing programs.

-) Category 1: Literally Homeless
-) Category 2: Imminent Risk of Homeless
-) Category 4: Fleeing/Attempting to Flee DV

Prioritization: In addition to meeting the eligible categories of homeless, individuals will be prioritized based on the following criteria:

1. Programs have their own eligibility criteria – must be an adult (18 years and older) with a substance abuse disorder
2. VI-SPDAT score of 0 – 10

Eligible Units

Housing Quality Standards

CoC programs receiving leasing funds and units paid for under the CoC RRH and ESG must meet Housing Quality Standards (HQS). Furthermore, programs can allow for families to rent a unit that is smaller than the size indicated on the family's voucher, as long as the unit meets HQS space standards (i.e. no more than two persons per living/sleeping room). Standards cover the following areas:

-) Sanitary facilities
-) Food preparation and refuse disposal
-) Space and security
-) Thermal Environment
-) Illumination and electricity
-) Structure and materials
-) Interior Air Quality
-) Water Supply
-) Lead-based paint
-) Access
-) Site and neighborhood
-) Sanitary condition

) Smoke detectors

Modifications to Provide Accessibility

Under the Fair Housing Act of 1988, an owner/landlord must not refuse the request of a family that contains a person with a disability to make necessary and reasonable modification to the unit. Such modifications are at the family's expense. The owner/landlord may require restoration of the unit to its original condition if the modification would interfere with the owner or next occupant's full enjoyment of the premises. Security deposits may not be increased because of such modifications being made. However, the owner/landlord may negotiate a restoration agreement that requires the family to restore the unit and, if necessary to ensure the likelihood of restoration, may require the tenant to pay a reasonable amount into an interest bearing escrow account over a reasonable period of time. The interest in any such account accrues to the benefit of the tenant. Owners/landlords must submit to the project sponsor any restoration agreement or escrow account for review and to maintain a copy in the program participant's file. The owner/landlord may also require reasonable assurances that the quality of the work will be acceptable and that any required building permits will be obtained.

Lastly, any modifications to units must meet all applicable HQS requirements and conform to the design, construction, or alteration of facilities contained in the UFAS and the ADA Accessibility Guidelines (ADAAG)[28 CFR 35.151(c) and Notice 2003-31].

Rent Reasonableness

Determining rent reasonableness is applicable to programs receiving rental assistance funds such as the CoC Housing First Rental Assistance Program and the Emergency Solutions Grant program. The purpose of rent reasonableness is to ensure that a fair rent is paid for each unit rented under the CoC and ESG program taking into consideration the location, size, type, quality, amenities, facilities, management and maintenance of each unit. HUD regulations define a reasonable rent as one that does not exceed the rent charged for comparable, unassisted units in the same market area. HUD also requires that owners not charge more for assisted units than for comparable units on the premises.

Homeless Management Information System (HMIS) – programs participating in the CES must utilize the HMIS to conduct the assessment. In the event a hard copy of the assessment form is used, the data collected must be entered into HMIS **within 5 business days**. Furthermore, all households regardless of their Domestic Violence status, have the right to refuse to disclose

their information in HMIS and have the right to refuse to allow the CoC to share their information among providers within the CoC. Service providers cannot refuse services to program applicants and program participants who refuse to disclose their information in HMIS or refuse to allow the CoC to share their information among service providers. In some instances, programs may require some information to determine eligibility for housing or services, or to assess needed services. For these circumstances, the information must be collected but not entered into HMIS but must be retained in a separate paper file or closed database.

Release of Information – Any information that can be used to identify a particular individual is protected personal information. HMIS end users must consider the following as protected personal information of an individual and his or her relatives, employers, or household members:

-) Names
-) All geographic subdivisions smaller than a village, for example street address
-) All elements of dates (except year) directly related to an individual, including birth date, admission date, discharge date, and date of death
-) Telephone numbers
-) Social Security numbers
-) Medical record numbers
-) Vehicle identifiers and serial numbers, including license plate numbers
-) Device identifiers and serial numbers
-) Any other unique identifying number, characteristic, or code

The following measures must take place before information can be released:

1. A Release of Information (ROI) form must be signed by a client upon intake (even to low-barrier shelters) before any information (such as Social Security Number) can be shared. This form will be combined with the written consent form. A copy can be found in the appendix.
2. All HMIS Participating Agencies will be required to follow all current data security practices detailed in the Policies and Procedures manual, and adhere to the ethical data use standards, regardless of the location where agency users connect to HMIS.
3. The client will have access on demand to view, or keep a printed copy of, his or her own records contained in the HMIS.
4. A privacy notice shall be prominently displayed in the program offices where intake occurs.

Protocol for Rejecting Referrals:

ESG and CoC funded-programs are mandated to participate in the CES and must accept all eligible referrals. Any referrals rejected must meet the CoC documented policies and procedures, especially for programs that show vacant beds. Mandated programs will fill all vacancies through referrals made through the CES. Other housing and service projects will accept referrals that meet the eligible criteria of their program.

1. Program staff must document the reasons for not accepting the referral.
2. Households must be notified by writing if they are denied for housing assistance and must identify alternate services available in the community within 5 days of applicable program staff rejecting the referral.
3. Households must be notified of their right to appeal the decision and must submit a letter requesting a hearing before the **Executive Committee/Board Members** within 10 days from receipt of the denial letter.

Serving Persons Fleeing From Domestic Violence

Guam's Coordinated Entry System allows for the full participation of victim service providers. To address the physical and emotional safety needs of the victims, a separate access point is identified at the following locations:

1. Catholic Social Services – Alee Shelter
2. **Oasis Empowerment Center - STOP**

However, should a victim present themselves at a non-victim service provider, the participant should still be able to be assessed for services and have full access to available services. To ensure the physical and emotional safety needs of the victims are addressed, victim service providers will provide relevant training to non-victim service providers to ensure victims are properly assisted.

In the event the household is determined to be at risk of harm during the assessment process, the entry staff conducting the assessment should refer the household to a victim service provider using proper protocols established for victims. Proper protocols under this CES include:

1. Confidential phone-call to the victim service provider
2. Transporting the household to the nearest victim service provider

Service providers, regardless if they are identified as a victim service provider, must ensure the safety and security of participants by allowing for safe and unmarked housing and must adhere to local and federal guidelines or best practices.

Commented [AM5]: Identify applicable laws

Servicing Homeless Youth

To address the needs of homeless youth, a separate access point is identified at the following location:

1. Sanctuary, Incorporated

However, should a youth present themselves at a non-youth service provider, the participant should still be able to be assessed for services and have full access to available services.

Addressing the Wait List

Participants are prioritized for housing based on the assessment and prioritization criteria identified for PSH, Transitional Housing, and Rapid Re-Housing. For projects at full capacity, persons prioritized for housing should be prioritized for other available housing resources. Other than the listed Continuum of Care-funded programs, persons who are prioritized as having the most need must be referred to the following programs:

1. Emergency Solutions Grant
2. Guam Housing Corporation – Emergency Housing

Transitioning Participants:

Participants who no longer need high level of services should be transitioned to other forms of housing assistance.

-) Assess current participants using VI-SPDAT or VI-F-SPDAT
-) Partner with DOL to assist participants in obtaining employment
-) Ensure participants are referred and have secured mainstream services