Before Starting the CoC Application

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

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

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

 1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
 2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
 3. All information provided to ensure it is correct and current.
 4. Responses provided by project applicants in their Project Applications.
 5. The application to ensure all documentation, including attachment are provided.

 Your CoC Must Approve the Consolidated Application before You Submit It
 - 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.
 - 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.
 Answering Multi-Part Narrative Questions
 Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

 Attachments
 Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.
 - Attachments must match the questions they are associated with–if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
 - We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at
https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program
Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC
Application score by giving specific guidance on how to respond to many questions and
providing specific information about attachments you must upload
 - 24 CFR part 578

1A-1. CoC Name and Number: MI-510 - Saginaw City & County CoC

1A-2. Collaborative Applicant Name: United Way of Saginaw County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: United Way of Saginaw County

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

	In the chart below for the period from May 1, 2020 to April 30, 2021:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

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

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

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

1B-2.	**Open Invitation for New Members.**	
	NOFO Section VII.B.1.a.(2)	

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

(limit 2,000 characters)

Invitation to join through email, CoC website, and Collaborative Applicant website with a link to CoC services and membership application. Invitation at Community Conversation meetings held by CoC but attended by non-CoC members and at all community events and groups our members belong to. Our e-mail signature contains an invitation to join the CoC: "Become a member of the Homeless Consortium today Check us out on our website at www.scchap.org to help prevent and end homelessness."
Consortium Website: Home page "Come Join Us" box with link to CoC information, fillable application, and contact numbers.
All CoC communications are sent out via email and attachments are in PDF format. All documents uploaded to the CoC's website are in PDF format. The CoC has access to bilingual/American Sign Language translators when needed for to assist in communication with individuals and disabilities. The CoC does everything possible to ensure that communication with individuals with disabilities occurs in a manner that is best for that given individual.

A formerly homeless person serves on our Board and there is continued engagement with actively homeless persons, including youth and DV victims, through a focus group case study conducted in 2019 in partnership with Saginaw Valley State University and in the planning and implementation of our annual PIT count.

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

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

(limit 2,000 characters)

Per 1B-1, the CoC has a diverse membership. Our Board consists of 15 individuals with a current/former organizational, governmental, or lived homelessness stake in ending homelessness. Only 5 of the members are HUD CoC Program grantees. Board member affiliations range from staff of Michigan Department of Health and Human Services and the City of Saginaw to a case manager from the VA and directors from local runaway and homeless youth and DV shelters. Together, they bring a wide array of knowledge and expertise on ending homelessness.

The CoC initiated a "Community Conversation" group that meets monthly. The group service providers, colleges, police, homeless persons, case managers, public transportation, employment agency, faith-based organizations, and more. The goal is to identify gaps in services that affect homeless/at-risk persons chances of obtaining/maintaining housing. The CoC has developed an app for instant communication between community advocates and services to share resources/knowledge, current/former homeless focus groups to identify gaps and development of Trauma Informed Care training provided by Saginaw Valley State University, and a collaborative project to provide furnishings and basic need items to households transitioning out of shelters into permanent housing. Members of the CoC sit on collaborative groups in the county and state. Through these venues, members are solicited and information about the CoC is shared. CoC members bring information and ideas relating to ending homelessness back to CoC meetings. CoC staff provides data to City and County governments. The CoC is participates in the development the City's consolidated plan, which includes a homeless action plan. All CoC communications are sent out via email and attachments are in PDF format. All documents uploaded to the CoC's website are in PDF format. The CoC has access to bilingual/American Sign Language translators when needed for to assist in communication with individuals and disabilities.

1B-4.	Public Notification for Proposals from Organizations Not Previously Funded.	
	NOFO Section VII.B.1.a.(4)	

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

(limit 2,000 characters)

A public notice with an open invitation for anyone to submit projects for consideration was posted on the CoC's website on DATE HERE. E-mails referencing the website postings were sent to the full membership and collaborative body on DATE HERE, and shared with individual networks. Application, submission instructions for new and renewal projects, timelines and scoring criteria, grantee requirements and HUD allowable projects were included in the emails and also posted on the website. All application materials are in a Word document format. The opening of the competition, application process, and timeline was discussed at the September 2021 general membership meeting.

The CoC has an outcome based scoring process for scoring/ranking of projects submitted. The Grants Committee looks at service gaps and community need for renewal projects to ensure they continue to meet those needs. If a project does not meet a need/is low performing, it is reallocated to one that does. New projects must first meet and coordinate with the defined needs of the CoC and the community to be accepted, meet HUD project thresholds, and are scored for ranking based on: agency capacity, track record in serving the homeless, budget, housing performance, mainstream resource and employment assistance, match, fair housing and housing first program model. They are reviewed, scored, and ranked by our Independent Grant Review Team (IGRT) made up of local community members with expertise in the homeless needs of Saginaw County. Accepted projects are included in the Exhibit 1. In the case of a situation where the total dollar amount of applications submitted exceed the CoC's ARD, the lowest ranking projects beyond the CoC's ARD will not be excepted.

The CoC makes every effort to communicate with individuals with disabilities by using their preferred method. Information related to the CoC and grant proposals are always in electronic format and received in electronic format.

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

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 - 24 CFR part 578

1C-1.	**Coordination with Federal, State, Local, Private, and Other Organizations.**	
	NOFO Section VII.B.1.b.	

	In the chart below:	
1.	**select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or**	
2.	**select Nonexistent if the organization does not exist within your CoC's geographic area.**	

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

18.	

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

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

(limit 2,000 characters)

The CoC does not actively participate on the panel that evaluates City ESG grant requests as there would be a conflict of interest with many of the CoC agencies applying for funding. The CoC provides data, processes, and knowledge for a fair and transparent process choosing programs that align with the community's needs assessment and consolidated plans. CoC staff outlines the way in which each program type, if funded, can impact homelessness. City staff in charge of the ESG allocations sits on the CoC Board and is presented with CoC outcome measurements on their subrecipients. HMIS staff assists the City the CAPER submission.

MSHDA allows CoCs to determine its ESG subrecipients. The CoC uses the same process to score/rank MSHDA ESG applicants as it does for the HUD CoC Program competition. Final approval of subrecipients and award amounts is made by the Board before submission to MSHDA. The MSHDA ESG recipient (CoC Lead Agency) monitors subrecipients for expected outcomes. All subrecipient projects are evaluated on CoC outcome measurements. HMIS staff assists the MSHDA ESG recipient with the CAPER submission.

The CoC and the City held open public hearings to discuss community needs, gaps in services, and unmet needs. The CoC and the City developed funding strategies to better meet community needs and develop safe, affordable housing. CoC staff meets with Human Planning bodies from both the City and County to outline the roles each can play in funding programs to assist our homeless and provide data from HMIS. In concert with consultants, strategies were developed for outreach, ES and TH needs, unsheltered and chronically homeless, PSH, RRH, prevention, and affordable housing. These strategies are included in the City of Saginaw's Consolidated Plan and Action Plan. This document is the guide for future ESG funding allocations and the coordination of existing CoC/ESG homeless programs to eliminate duplication.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.B.1.c.	

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

1.	**Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.**	No
2.	**Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.**	No
3.	**Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.**	No
4.	**Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.**	No
5.	**Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.**	No
6.	**Other. (limit 150 characters)**	

1C-4.	**CoC Collaboration Related to Children and Youth–SEAs, LEAs, Local Liaisons & State Coordinators.**	
	NOFO Section VII.B.1.d.	

	Describe in the field below:
1.	**how your CoC collaborates with youth education providers;**
2.	**your CoC's formal partnerships with youth education providers;**
3.	**how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);**
4.	**your CoC's formal partnerships with SEAs and LEAs;**
5.	**how your CoC collaborates with school districts; and**
6.	**your CoC's formal partnerships with school districts.**

(limit 2,000 characters)

Our CoC collaborates with youth and education providers through linkages with the Saginaw County Youth Protection Council (SCYPC), the youth serving entity in our CoC. The SCYPC CEO is a member of the CoC board, and also sits on the Grants Committee. SCYPC staff participate in the CoC's CQI and HMIS committee. The SCYPC has held formal contracts with the LEA (Saginaw Intermediate School District-SISD) for over 20 years for several initiatives: Birth – Five; Maternal, Infant, and Early Childhood Home Visiting; and Early Head Start. The SCYPC has a long history of involvement in the SISD operated early childhood focused collaborations: Great Start Collaborative Saginaw and the Local Leadership Group. The SCYPC and other CoC shelter programs serving families with children also engages with the SISD for McKinney Vento Homeless Education Coordinator (MVEC) services for school district accommodations and through their quarterly meetings. The SCYPC CEO and the CoC Chair (CEO of Rescue Ministries of Mid-Michigan) are presenting information on shelter services for youth at the MVEC meeting on November 22, 2021. The CoC collaborates with school districts through the CoC shelter programs that serve youth (SCYPC) and families with children (Rescue Ministries of Mid-Michigan and the Mustard Seed). The local school districts refer homeless families and unaccompanied youth to the CoC shelter programs. Youth and children in the shelter programs are provided with chrome books by many of the school districts for on-line learning. The school districts are very accommodating when working with homeless youth and shelter staff. For in-person learning shelter staff make arrangements with the school districts for transportation, lunch, books, homework and other educational services that are needed. School district personnel and shelter staff work closely together to ensure the children and youth succeed in school.

1C-4a.	CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility.	
	NOFO Section VII.B.1.d.	

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

(limit 2,000 characters)

CoC shelter and other homeless programs working with families with school age children, or those serving unaccompanied minor youth work with the youth and their parent/guardian, to discuss school needs at intake. The families and youth are informed about their right to access school through the McKinney Vento Homeless Assistance Act. Arrangements are made with the school district for transportation, and to ensure youth have access to course work, lunch, and recreational programs. Shelter providers communicate with the local McKinney Vento liaison when issues arise. The shelter programs interact with the McKinney Vento liaison several times a year to sustain a collaborative working relationship. The local McKinney Vento liaison is a member of the CoC and attends CoC General Membership meetings where they interact with homeless service providers and educate on services they provide.

1C-4b.	CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.B.1.d.	

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

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years		
2.	Child Care and Development Fund		
3.	Early Childhood Providers		
4.	Early Head Start		
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)		
6.	Head Start		
7.	Healthy Start		
8.	Public Pre-K		
9.	Tribal Home Visiting Program		
	Other (limit 150 characters)		
10.			

You must select a response for elements 1 through 9 in question 1C-4b.

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Annual Training–Best Practices.	

NOFO Section VII.B.1.e.

	Describe in the field below how your CoC coordinates to provide training for:
1.	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 indicate the frequency of the training in your response (e.g., monthly, semi-annually); 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 and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

(limit 2,000 characters)

Staff from Underground Railroad, Inc. (URR), the local DV shelter, provides mandatory training at least annually to all CoC project staff and coordinated intake staff on best practices and protocols for serving survivors and safety planning. The training is provided at full CoC member meetings. URR has provided Human Trafficking and Safety Training in this venue. Staff at CoC agencies received a Trauma Informed Care training in July 2019 lead by a professor from Saginaw Valley State University. URR has also developed a Trauma Informed Care training for the CoC that includes sessions about trauma informed care, resilience and trauma, the impact of trauma, and best practices in serving survivors in our community. URR conducts an annual New Service Provider training which addresses best practices in serving survivors, and invites all CoC member agencies to participate as a refresher. The CoC Coordinated Entry policies and procedures provide specific practices in serving survivors, safety planning protocols, emergency transfers and confidentiality.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Using De-identified Aggregate Data.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your 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 survivors.

(limit 2,000 characters)

Underground Railroad, Inc. was established in 1977 as the domestic violence shelter for women and children in Saginaw County. Currently the Underground Railroad, Inc. serves all households that have experienced domestic violence, sexual assault, stalking, and human trafficking. These households receive services such as individual advocacy, crisis intervention, housing advocacy, employment advocacy, childcare assistance, and more. Underground Railroad, Inc. utilizes the HMIS comparable database, EmpowerDB, to collect all data. Underground Railroad consulted with the CoC to ensure that their HMIS comparable database was equivalent to the HMIS being used by other agencies in the CoC. The agency also sits on the CoC's Continuous Quality Improvement committee where their data is analyzed in conjunction with other agencies in the CoC. While the majority of data on victims of DV are collected by Underground Railroad, data is also provided through HMIS by other agencies with clients who identify as DV victims. All data from both sources are compared and de-duplicated.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Coordinated Assessment–Safety, Planning, and Confidentiality Protocols.	
	NOFO Section VII.B.1.e.	

	Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:	
1.	prioritize safety;	
2.	use emergency transfer plan; and	
3.	ensure confidentiality.	

(limit 2,000 characters)

The CoC maximizes client choice for housing by allowing all households receiving services to choose their own housing. All services are voluntary and not a condition of receiving other services, including housing assistance. Services are consistently and repeatedly offered to encourage participation in a safe way so that it is okay to decline the service. The service provider must respect the decision to participate or not in services. Participants have the right to confidentiality and information is shared only when authorized by the participant through a release of information or as mandated through the limitations to the confidentiality policy and law. Participants who disclose at any time that they are fleeing from domestic violence, sexual assault, human trafficking, or stalking shall be referred to the domestic violence (DV) agency in our community. The domestic violence agency shall coordinate efforts to determine the threat to the participant and safety plan with the participant. All staff at the DV agency have received training on safety planning, traumainformed care, confidentiality, and voluntary services. The CoC's emergency transfer plan extends to project participants who have experienced domestic violence, dating violence, sexual assault, and stalking. The plan considers the safety of its project participants and the ability to request a transfer is available to all participants regardless of sex, gender identity, or sexual orientation. The plan identifies participants who are eligible for an emergency transfer, the documentation needed to request the transfer, confidentiality protections, and guidance on safety and security. Coordinated intake assessments, similar to the CoC SPDAT but used exclusively for DV victims, assists in the prioritization process.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender–Anti-Discrimination Policy and Training.	
	NOFO Section VII.B.1.f.	

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

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	

NOFO Section VII.B.1.g.

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf or the two PHAs your CoC has a working relationship with–if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Michigan State Housing Development Authority	90%	Yes-HCV	Yes
Saginaw Housing Commission	5%	Yes-HCV	No

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

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

(limit 2,000 characters)

The Director of the Saginaw Housing Commission actively participates as a member of the CoC and sits on the CoC Board. We continue to be fully engaged in conversations with the Director of the Saginaw Housing Commission about options for adding a homeless preference for their public housing units available in our community. VASH vouchers administered by the PHA do have a homeless preference for veterans, and discussions are ongoing to apply those same preferences to a portion of the general preference vouchers held by the PHA. Discussions continue to be unsuccessful for set asides. The CoC is also engaged with MSHDA regarding opening up slots for PSH clients that no longer need intensive supportive services.

GET RESPONSE RE: COVID PHA FUNDING

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored–For Information Only	

	Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes

3.	**Low Income Tax Credit (LIHTC) developments**	Yes
4.	**Local low-income housing programs**	Yes
	Other (limit 150 characters)	
5.		

1C-7c.	**Including PHA-Funded Units in Your CoC's Coordinated Entry System.**	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC's coordinated entry process?	Yes

1C-7c.1.	**Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System.**	
	NOFO Section VII.B.1.g.	

	If you selected yes in question 1C-7c., describe in the field below:
1.	**how your CoC includes the units in its Coordinated Entry process; and**
2.	**whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.**

(limit 2,000 characters)

The Housing Access and Resource Agency (HARA), acting as the primary entry point for housing assistance and referrals in the CoC, is the only entity in the CoC that can sign individuals up on MSHDA's homeless preference HCV list. Additionally, the HARA makes referrals directly to many of MSHDA's project- and tenant-based units within the CoC. The HARA does not have as straight forward of a relationship with the Saginaw Housing Commission but does, none the less, make referrals for their project based HCV units. Unit availability is shared from both MSHDA and the Saginaw Housing Commission to the HARA and, subsequently, to the rest of the CoC. When applicable, the HARA provides rent and utility deposits to assist clients in obtaining housing in MSHDA and Saginaw Housing Commission units. HARA staff also works closely with MSHDA contracted housing agents to locate homeless households that are receiving an HCV voucher and assist those households with filling out documentation if needed.

1C-7d.	**Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.**	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	Yes

1C-7d.1.	**CoC and PHA Joint Application–Experience–Benefits.**	
	NOFO Section VII.B.1.g.	

	If you selected yes to question 1C-7d, describe in the field below:

1.	the type of joint project applied for;
2.	whether the application was approved; and
3.	how your CoC and families experiencing homelessness benefited from the coordination.

(limit 2,000 characters)

The Saginaw Housing Commission (PHA) submitted a collaborative application to HUD with the CoC for 21 Emergency Housing Vouchers. The Saginaw Housing Commission established formal MOUs with partnering CoC shelter programs. The Saginaw Housing Commission is allowing service fees to be used to cover the required supportive services costs. The CoC HARA (United Way of Saginaw County) acted at the central intake point for referrals, ensuring a coordinated entry process. The Saginaw Housing Commission was awarded the funding for the 21 Emergency Housing Vouchers. The CoC benefitted because we have prioritized permanent housing as an effective strategy to end homelessness. The families served by CoC shelter providers benefitted greatly. The Emergency Housing Vouchers provide them with very long-term housing stability.

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes

1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	
	Not Scored–For Information Only	

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.
PHA
Saginaw Housing C...

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

Name of PHA: Saginaw Housing Commission

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

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

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

1C-9.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	22
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	22
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.	

(limit 2,000 characters)

The Coc regularly evaluates projects to ensure a Housing First approach, prioritizing rapid placement and stabilization in permanent housing and not requiring service participation or preconditions of program participants, through annual Fair Housing training, the annual CoC competition process, CoC fair

housing and coordinated entry policies, and the on-going work on the Grant Planning and Housing Coordination committee. Legal Services of Eastern Michigan, a CoC partner and Board member, conducts annual Fair Housing trainings at CoC General Membership meetings. The CoC's Rules and Procedures for Ranking HUD Applications awards bonus points to applicants that follow a low barrier housing approach. The CoC has a Fair Housing and Equal Access policy that requires: "All recipients of CoC and ESG funded projects must comply with the nondiscrimination and equal access and opportunity provisions of the Federal civil rights laws." The CoC's Coordinated Entry workflow recommends access to appropriate housing based on homeless status and demonstrated need (SPDAT score). Regular discussion occurs with members of the Grants Planning and Housing Coordination committee on low barrier housing, fair housing, equal access to housing, and increasing the stock of permanent housing available to homeless in our community.

1C-9b.	Housing First–Veterans.	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	Yes

1C-10.	Street Outreach–Scope.	
	NOFO Section VII.B.1.j.	

	Describe in the field below:	
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;	
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;	
3.	how often your CoC conducts street outreach; and	
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.	

(limit 2,000 characters)

Pre-pandemic the CoC conducted at least annual street outreach point-in-time count efforts to reach unsheltered individuals and families and thus ensuring 100% coverage for the CoC's geographic area. Pre-pandemic, youth street outreach efforts were conducted both in the winter and the summer. Street outreached occurred in the urban, suburban, and rural areas of Saginaw County. Shelter and HARA staff , CoC members, and volunteers canvas the community to locate persons experiencing homelessness. The shelter staff conducting street outreach specialize in working with person experiencing homelessness that have the following characteristics: chronic homelessness, youth, survivors of domestic violence, mental illness and dual diagnosis, and persons exiting jail or prison. The shelter and HARA staff are experienced in interacting with persons experiencing homelessness who are least likely to request assistance (e.g. those living on the streets who do not want to enter a shelter, persons who are doubled up and moving from one place to another to avoid having to come in to a shelter). CoC and HARA staff tailor outreach efforts for these individuals by providing items they need (personal care items, socks, and blankets), seeking out homeless encampments, and canvasing

places they are likely to frequent. Outreach is also provided virtually through the websites for the CoC shelter programs. The shelter websites list the housing and supportive services available, the populations served by the shelter and the eligibility, and indicated that the shelters do not discriminate based on race, color, national origin, religion, sex, gender identification, sexual orientation, age, familial status, or disability and practice fair housing.

1C-11.	**Criminalization of Homelessness.**	
	NOFO Section VII.B.1.k.	

	Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC's geographic area:	

1.	**Engaged/educated local policymakers**	Yes
2.	**Engaged/educated law enforcement**	Yes
3.	**Engaged/educated local business leaders**	Yes
4.	**Implemented communitywide plans**	Yes
5.	**Other:(limit 500 characters)**	

1C-12.	**Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).**	
	NOFO Section VII.B.1.l.	

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of "Current."	55	43

1C-13.	**Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.**	
	NOFO Section VII.B.1.m.	

	Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.	

	Type of Health Care	**Assist with Enrollment?**	**Assist with Utilization of Benefits?**
1.	**Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)**	Yes	Yes
2.	**Private Insurers**	Yes	No
3.	**Nonprofit, Philanthropic**	Yes	Yes
4.	**Other (limit 150 characters)**		

1C-13a.	Mainstream Benefits and Other Assistance–Information and Training.	
	NOFO Section VII.B.1.m	

	Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:	
1.	systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;	
2.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;	
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and	
4.	providing assistance with the effective use of Medicaid and other benefits.	

(limit 2,000 characters)

The CoC provides information and training to CoC Program funded projects on mainstream benefits through CoC Board and General Membership meetings. CoC board members include representatives from the Saginaw County Department of Health and Human Services and Legal Services of Eastern Michigan (the representative is also the chair of the CoC Governance Committee). These Board members are very knowledgeable about changes to food stamps, SSI, TANF, and other mainstream benefits. Information is shared during "member updates" or when significant new information is available, they have a place on the agenda for updates. The majority of the shelter providers in the CoC have a representative on the CoC board, participate in CoC General Membership meeting, and participate in other CoC committees such as Grant Planning Housing Coordination. Shelter staff participate in CoC related meetings at least monthly, often two or three times a month. Shelter providers are very supportive of each other and share information on other resource with each other such as substance abuse programs, collaborations with healthcare organizations, Medicaid and other benefits. The shelter CoC members then share this information with other shelter staff.

1C-14.	Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.n.	

	Describe in the field below how your CoC's coordinated entry system:	
1.	covers 100 percent of your CoC's geographic area;	
2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
3.	prioritizes people most in need of assistance; and	
4.	ensures people most in need of assistance receive assistance in a timely manner.	

(limit 2,000 characters)

The CoC has an established Coordinated Entry policy that prioritizes assistance based on vulnerability and severity of service needs and ensures the clients who need that assistance receive it in a timely manner without discrimination. The CoC also has a Prioritization of PSH and Chronically Homeless policy that developed a prioritization process for the CoC funded PSH beds to ensure that our chronically homeless and homeless persons with disability are housed in permanent housing as quickly as possible. These processes allow the CoC to

identify service gaps and needed resources and focuses on the following basic tenants: prioritization, low barrier, housing first, client focused, fair and equal access and non-discriminatory practices. All CoC shelter and other homeless assistance providers use a version of the SPDAT (TAY SPDAT for youth and VI SPDAT for adults) or for our DV provides a similar intake tool as part of our Coordinated Entry system and this ensure that 100% of our CoC's geographic area is covered. Our CoC shelter and other homeless providers serve populations that are most in need of assistance and also least likely to apply for assistance. Our shelter and other homeless assistance providers have vast experience in working with their target populations and have comprehensive supportive services funded by entities other than HUD that allow us to provide outreach and other services individuals seek without having to come into shelter. This allows us greater access to hard to engage populations. These populations include: youth, survivors of domestic violence, veterans, individuals with mental illness, individuals with substance use disorders, and individuals coming from prison and jail. We ensure those most in need of assistance are served in a timely manner by tracking the date of initial contact, dates of intake and assessment, and dates the SPDAT or other intake assessment was completed.

1C-15.	Promoting Racial Equity in Homelessness–Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes

1C-15a.	Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

1.	People of different races or ethnicities are more likely to receive homeless assistance.	No
2.	People of different races or ethnicities are less likely to receive homeless assistance.	No
3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	No
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	No
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	Yes
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	No

1C-15b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.o.	

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	No
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	No
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	No
	Other:(limit 500 characters)	
12.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

CoC providers have diverse staff, and this is important to ensuring racial equity in the provision and outcomes of assistance. Our CoC has been working on a comprehensive training program for shelter and other homeless assistance providers. Staff from the local domestic violence shelter (Underground Railroad) created a Google Classroom training format that will be shared with CoC providers. CoC provider staff are on the frontline working with individuals experiencing homelessness, and training staff must be a priority to achieve racial equity in the provision and outcome of assistance. Training will help shelter and other homeless program staff understand the behaviors of those experiencing homelessness, warning signs of serious concerns, and help to triage the needs of these individuals. The training will increase staff's ability to cultivate positive relationships with those to be served, and the relationship between thinking, feeling, and behaviors. The CoC works to ensure racial equity in the provision and outcome of assistance by maximining client choice for housing by allowing all household to choose their own housing. All services are

voluntary and not a condition of receiving other services, including housing assistance. Services are consistently and repeatedly offered to encourage participation in a safe way so that it is okay to decline services. The CoC has an established Fair Housing and Equal Access policy that requires shelter and other homeless assistance providers to implement fair housing, nondiscriminatory practices, and compliance with Title VI of the Civil Rights Act and the Title III Americans with Disabilities Act. All CoC applicants are required to declare they adhere to Fair Housing and Low Barrier housing practices as part of the local CoC competition. Legal Services of Eastern Michigan, a CoC partner and Board member and chair of the CoC Governance Committee, provides an annual fair housing training for the CoC General Membership.

1C-16.	Persons with Lived Experience–Active CoC Participation.	
	NOFO Section VII.B.1.p.	

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

	Level of Active Participation	**Number of People with Lived Experience Within the Last 7 Years or Current Program Participant**	**Number of People with Lived Experience Coming from Unsheltered Situations**
1.	Included and provide input that is incorporated in the local planning process.	2	0
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	2	0
3.	Participate on CoC committees, subcommittees, or workgroups.	2	0
4.	Included in the decisionmaking processes related to addressing homelessness.	2	0
5.	Included in the development or revision of your CoC's local competition rating factors.	2	0

1C-17.	Promoting Volunteerism and Community Service.	
	NOFO Section VII.B.1.r.	

| | Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement 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.	Yes
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, data entry).	No
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	

1D. Addressing COVID-19 in the CoC's Geographic Area

To help you complete the CoC Application, HUD published resources at
https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

1D-1.	**Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.**
	NOFO Section VII.B.1.q.

	Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:
1.	**unsheltered situations;**
2.	**congregate emergency shelters; and**
3.	**transitional housing.**

(limit 2,000 characters)

The CoC worked with the Saginaw County Health Department to identify highly trafficked areas in the community to set up hand washing and sanitation stations. The CoC worked with the Saginaw County Health Department and Saginaw County Emergency Response department to obtain PPE for congregate emergency shelters and transitional housing staff and clients. Saginaw County Youth Protection council used ESG-CV funds to remove carpeting and install new flooring that could be more easily sanitized. The CoC designated ESG-CV funds to establish a quarantine site where infected homeless families could quarantine away from the general homeless population. ESG-CV funds were also prioritized towards rapid rehousing and homelessness prevention projects to mitigate the impending long term economic fallout of the pandemic. The United Way of Saginaw County provided AMOUNT of Eviction Diversion and AMOUNT of COVID Emergency Rental Assistance services to keep the economically impacted housed during the pandemic. Congregate emergency shelters and transitional housing providers drastically reduced their capacities, followed CDC/HUD guidance on safe housing protocols, and eliminated or limited the number of visitors and volunteers entering their facilities.

1D-2.	**Improving Readiness for Future Public Health Emergencies.**
	NOFO Section VII.B.1.q.

> Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

The CoC improved readiness for future public health emergencies by forming and strengthening relationships with entities like the Health Department, Michigan Department of Health and Human Services, and MSHDA that had the expertise to assist the agencies in developing policies and protocols that ensure the safety of homeless guests, staff, and volunteers. Through the collaboration of key stakeholders a plan for shelter/transitional housing de-congregation through reduced capacities, lengthened hotel/motel sheltering, and quicker processing of lengthened Rapid Rehousing assistance is in place for public health emergencies. Additionally, a quarantine site has been established should it ever be needed. The CoC has a process for identifying potential needs to mitigate the impact of a public health emergency for the homeless population and for shifting funding to other needs as they arise. Congregate sheltering providers now have stock of PPE on site should it need to be used in future public health emergencies. Renovations to facilities that improved the ease at which they can be sanitized will have a long lasting effect on the health of all entering those buildings. Additionally, relationships exist with local public transportation, the Health Department, and the CoC to develop procedures for transporting the homeless population to testing sites, vaccination sites, the quarantine site, and, if needed, the local hospitals.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	

	Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:
1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

MSHDA allowed CoCs to make decisions locally on how to distribute ESG-CV funds within any level of parameters that they may have set. Early in the pandemic, the CoC Board and Grants, Planning, and Housing Committee prioritized recommending projects using ESG-CV Round 1 funding that met the immediate needs of establishing a quarantine site, providing PPE, improving the sanitation of congregate sheltering facilities, and providing longer term rapid rehousing assistance to reduce the number of homeless living on the streets and in shelters. Later in the pandemic, the CoC Board and Grants, Planning, and Housing Committee prioritized recommending projects using ESG-CV Round 2 funding that provided assistance that would mitigate the long term economic impact of the pandemic. This included designating more funds towards Homeless Prevention and Rapid Rehousing projects as well as providing congregate emergency shelters with funding needed to obtain additional PPE and sanitary supplies. Throughout the entire pandemic, the CoC continued to evaluate the spending of ESG-CV funds and shift them away from responses that were no longer needed and towards projects that would meet an

immediate need. An example of this is that the CoC's quarantine site was never needed and the funds designated for this project were distributed to congregate emergency shelter providers. The City of Saginaw did not allow the CoC to have decision making power on where funds should be distributed. They do, however, have a staff member that is a member of the CoC's Board and they were present in all discussions related to the distribution of MSHDA ESG-CV funds. They were able to take information from those discussions and use them to influence their decision making on their allocation of ESG-CV funds.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	

	Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:
1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

(limit 2,000 characters)

The CoC met with representatives from the Saginaw County Health Department, Michigan Department of Health and Human Services, and Saginaw County Emergency Response team as frequent as weekly during the beginning of the pandemic to formulate a response that would ensure the safety of the staff working with the homeless population and the homeless population. Representatives from the Health Department visited congregate shelter facilities to provide recommendations on safety measures that needed to be implemented. The Health Department provided onsite COVID testing of staff and homeless guests. The Health Department provided free PPE for shelters. The close relationship developed with the Health Department allowed agencies to directly notify them of potential new cases and arrange for transportation to testing sites, vaccination sites, and, if needed, the local hospitals. As previously stated, the emergency shelter and onsite transitional housing projects drastically reduced their capacity so that they could follow the CDC/HUD's guidance on safe sleeping conditions in congregate shelters. These agencies also stopped allowing visitors and volunteers in to their facilities. Hand washing/sanitation stations were placed around the City of Saginaw in areas where the unsheltered population are known to visit. Shelters utilized ESG funds to pay for additional PPE and to replace old flooring for new flooring that could easily be sanitized.

1D-5.	Communicating Information to Homeless Service Providers.	
	NOFO Section VII.B.1.q.	

	Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:
1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

(limit 2,000 characters)

As previously stated, all housing agencies in the CoC, regardless of project type

(ES, SH, TH, RRH, PSH) met regularly with the Saginaw County Health Department, Michigan Department of Health and Human Services, and Saginaw County Emergency Response team. Much of the information regarding safety measures, changing local restrictions, COVID testing sites/protocols, and vaccine distribution sites/protocols were directly provided to the agencies during these meetings. These meetings have been the primary information flow to the agencies. Any information received via email from the Health Department, HUD, MSHDA, or the local and state governments were disseminated to the CoC Membership and Board through the CoC's email distribution lists. Additionally, there were standing agenda items to discuss these issues at both the CoC Membership and Board meetings so that the non-housing agencies in the CoC would be better able to serve their clientele should a need arise. Representatives from the Michigan Department of Health and Human Services and Veteran's Affairs sit on the CoC Board and would share any pertinent information with the rest of the group. Additionally, a representative from MSHDA attends CoC Membership meetings and would share pertinent information with that group.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

(limit 2,000 characters)

CoC shelter and other homeless providers identified eligible individuals and families experiencing homelessness for COVID-19 vaccinations through outreach efforts, and those in our shelter and other homeless programs. Shelter and other homeless provider staff provided eligible individuals and families experiencing homelessness with information on COVID-19 vaccinations and provided transportation to get the vaccinations. SCCMHA has hosted vaccination events to ensure all eligible individuals could get a vaccine if they chose to do so.

1D-7.	Addressing Possible Increases in Domestic Violence.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

The DV agency is an active member of our CoC and was included in all COVID-19 response planning. DV the DV agency was able to maintain near capacity shelter availability due to the layout of the shelter which allows for each family/individual to have their own private room. The agency was able to utilize various sources of COVID-19 funds to meet the needs of survivors. Tele-services were used to reach survivors who were not able to come into shelter. A

technology lending library was created to help insure that survivors had access to the necessary technology to access tele-services.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

The United Way of Saginaw County serves as the Housing Access and Resource Agency (HARA) for the CoC. Through this they provide short-term hotel/motel sheltering, Rapid Rehousing, and Homeless Prevention services. The CoC's coordinated entry system is a "no wrong door approach" where a household in need can show up to any shelter provider, be evaluated on our common assessment tool, and receive a referral to an appropriate provider within the CoC. The HARA as the primary agency to receive referrals for Rapid Rehousing and Homeless Prevention services. The main adjustment made by the HARA was that all intakes, assessments, and referrals are completed over the phone or using another virtual technology. Additionally, all documentation is submitted electronically via email or fax. Any form that needs a signature was initially electronically signed but we moved to "verbal" signatures once MSHDA approved them as acceptable. With their role as the HARA, the United Way of Saginaw County also administered the MSHDA Eviction Diversion Program and CERA funding to prevent evictions. Through these programs, over $6.5 million dollars has flowed through HARA to prevent evictions in Saginaw county and reduce the number of households potentially becoming homeless because of the economic impacts of the pandemic.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.a. and 2.g.	

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	09/08/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	11/05/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Used data from a comparable database to score projects submitted by victim service providers.	Yes
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	Yes
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	Yes

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	

	NOFO Section VII.B.2.d.	

	Describe in the field below how your CoC reviewed, scored, and selected projects based on:
1.	the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and
2.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,000 characters)

Submitted projects are scored based on objective metrics that include financial, housing and service performance, and HMIS data quality metrics. Projects are always ranked from highest to lowest regardless of the severity of needs and vulnerabilities of population served. All projects are scored on the same metrics but each project type has an adjusted scale that makes it easier for TH and SH projects to earn points and more difficult for RRH and PSH projects to earn points. With that being said, the only population where severity of needs and vulnerabilities is taken into account in the CoC's scoring metrics are the severely mentally ill. It is for that reason why SH has scoring scales that with the lowest thresholds to earn points in the scoring and ranking process. The CoC holds RRH and PSH projects to extremely high standards regardless of population type and their individual needs and vulnerabilities. For example, one of the reasons why projects intended entirely for DV victims don't have their own scale adjustments is because those projects have funding available from other federal and state resources that the agencies serving the general homeless population don't have access to. The CoC expects DV projects to perform to the same level as general homeless projects if they are requesting and competing for HUD CoC funds that would otherwise be used to serve the general homeless population.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	
	NOFO Section VII.B.2.e.	

	Describe in the field below how your CoC:
1.	obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;
2.	included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;
3.	rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).

(limit 2,000 characters)

The CoC strives to have a diverse membership, recruiting members with strong community connections that further our racial equity work and goals. The CoC Grants Committee is charged with making recommendations to the CoC Board on the CoC competition documents, and scoring criteria based on HUD guidelines to be used for the HUD NOFO competition. CoC projects are ranked based on the scoring criteria, and thus the Grants Committee members also are involved in making recommendations on the project ranking process. The Grants Committee has 11 members; nine are Caucasian and two are African American. The CoC Board approves the local CoC competition documents: intent to apply, application, scoring, and ranking. The CoC Board has 13

members; 10 are Caucasian and three are African American. The CoC racial disparities assessment showed those accessing permanent housing mirrored the demographics of those served in the shelter.

1E-4.	**Reallocation–Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.**	
	NOFO Section VII.B.2.f.	

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

(limit 2,000 characters)

The CoC's Grant Reallocation Policy (505) was accepted by the CoC on January 10th, 2017. The policy was developed in a manner to ensure the CoC has the ability to make outcome-based, data driven decisions on its project stock as HUD priorities and community needs change over time. All renewal applications are evaluated for project specific outcomes and their contribution to the CoC's efforts to end homelessness: HMIS outcome data (housing performance, mainstream resource and employment obtainment/change, data quality/timeliness), financial performance (housing to service budget and recaptured dollars), and the population served. Project applicants that have a project for which reallocation has been recommended will be notified in writing 15 days prior to the CoC Application deadline. All currently funded project applicants can voluntarily reallocate their project to a new one that better meets the CoC's needs by notifying the Grants, Planning, and Housing Coordination Committee Chair prior to the submission of the CoC Application. In the reallocation process, preference will be given to those agencies that voluntarily apply to reallocate.

1E-4a.	**Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.**	
	NOFO Section VII.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	No

1E-5.	**Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.**	
	NOFO Section VII.B.2.g.	

1.	**Did your CoC reject or reduce any project application(s)?**	No
2.	**If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.**	

1E-5a.	**Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.2.g.	

Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	10/26/2021

1E-6.	**Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website–which included: **1. the CoC Application;** **2. Priority Listings; and** **3. all projects accepted, ranked where required, or rejected.**	

You must enter a date in question 1E-6.

2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

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

Enter the name of the HMIS Vendor your CoC is currently using.	Bowman ServicePoint

2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

Select from dropdown menu your CoC's HMIS coverage area.	Single CoC

2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/14/2021

2A-4.	HMIS Implementation–Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

	Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:	
1.	**have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and**	
2.	**submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead.**	

(limit 2,000 characters)

The United Way of Saginaw County is the CoC and HMIS Lead; Underground Railroad Inc. is the DV housing and service provider in our CoC. CoC and HMIS Lead staff met with leadership from the DV housing and service provider to discuss CoC Interim Rule requirements that DV providers have a comparable database to the HMIS selected by the CoC. CoC and HMIS Lead staff provided the HUD-published 2020 HMIS Data Standards, Data Dictionary, Standard Reporting Terminology, and CoC APR/ESG CAPER Programming Specifications documents to the DV housing and service provider leadership so that they could pass them along to their vendor and ensure that they are meeting HUD data collection and reporting requirements. The CoC and HMIS Lead also reviewed the comparable database and HUD required reports generated from the comparable database to ensure the comparable database was in compliance of HUD regulations.

The CoC's Continuous Quality Improvement monitoring program and grant scoring and ranking metrics are based entirely on the HUD System Performance Measures. The DV housing and service provider is required to submit System Performance Measure data to the CoC and HMIS Lead on a minimum of a quarterly basis for all projects, regardless of funding. Their HUD CoC-funded projects are scored and ranked based off of these measures.

2A-5.	Bed Coverage Rate–Using HIC, HMIS Data–CoC Merger Bonus Points.	
	NOFO Section VII.B.3.c. and VII.B.7.	

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	265	40	225	100.00%
2. Safe Haven (SH) beds	6	0	6	100.00%
3. Transitional Housing (TH) beds	182	117	65	100.00%
4. Rapid Re-Housing (RRH) beds	43	0	43	100.00%
5. Permanent Supportive Housing	373	13	360	100.00%
6. Other Permanent Housing (OPH)	0	0	0	

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

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

(limit 2,000 characters)

Not Applicable: 100% bed coverage for all bed types.

2A-5b.	Bed Coverage Rate in Comparable Databases.	

NOFO Section VII.B.3.c.

Enter the percentage of beds covered in comparable databases in your CoC's geographic area.	100.00%

2A-5b.1.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.	
	NOFO Section VII.B.3.c.	

	If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,000 characters)

Not Applicable: 100% bed coverage for all bed types.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section VII.B.3.d.	

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	No

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

To help you complete the CoC Application, HUD published resources at
https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program
Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC
Application score by giving specific guidance on how to respond to many questions and
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2B-1.	Sheltered and Unsheltered PIT Count–Commitment for Calendar Year 2022	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes

2B-2.	Unsheltered Youth PIT Count–Commitment for Calendar Year 2022.	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes

2C. System Performance

To help you complete the CoC Application, HUD published resources at
https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program
Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC
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2C-1.	Reduction in the Number of First Time Homeless–Risk Factors.	
	NOFO Section VII.B.5.b.	

	Describe in the field below:
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;
2.	how your CoC addresses individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.

(limit 2,000 characters)

The VI-SPDAT is completed at intake and used by all agencies in the CoC. This tool, in conjunction with HMIS data elements regarding a client's homeless history and CoC-wide HMIS data sharing are used to identify risk factors and first time homeless persons. Shelter diversion is attempted at the time the client presents. If successful, case manager(s) follow up with the client to develop a housing plan and budget to assist them in reaching independent housing stability. Referral to mainstream providers for additional support services appropriate for overcoming their barriers/risks based on VI-SPDAT score is also made. The HARA provides homeless prevention assistance through City and MSHDA ESG funds. Homeless prevention is the CoC's first goal.
HARA Housing Specialist staff work in the shelters and process referral intakes over the phone. They meet with clients for which shelter diversion was unsuccessful and sign them up for Housing Choice Vouchers and screen them for ESG RRH short term assistance. Those that qualify are housed through the ESG RRH program. The case manager and client develop a housing plan and budget. The client is followed through the term of assistance to ensure goals and budget projects are being made and to ascertain whether or not the client will be able to maintain stability post assistance. Plans are adjusted and other mainstream supports are put in place to see the client through to housing stability. Families with children are referred to the McKinney-Vento Coordinator to ensure the family has access to their home school while in shelter. For higher need clients other housing options are explored (TH, PSH) and they are prioritized based on severity of risks/need through our ISTs. The CoC's CQI Committee is responsible for evaluating the CoC's progress on this measure.

2C-2.	Length of Time Homeless–Strategy to Reduce.	
	NOFO Section VII.B.5.c.	

	Describe in the field below:
1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,000 characters)

Housing first and low/no barrier to program philosophies adopted by all CoC member agencies. The CoC's Coordinated Entry Process, along with the VISPDAT, allows us to ensure assistance and resources are allocated effectively and easily accessible. Our housing matrix is used to accurately match needs to housing and resources.

VI-SPDAT used as coordinated intake tool across the CoC. Helps determine strengths, risk, and barriers to housing. CoC-wide HMIS data sharing assists in determining client length of time homeless (LOTH). Both assist in service prioritization and quick transitions to PH. Interagency Service Teams meet biweekly, using by-name lists to review client needs/risks, frequency and LOTH. Clients are prioritized based on risk factors, including LOTH, and appropriate housing is identified.

HARA Housing Specialist staff are at the shelters weekly and process intakes over the phone to enroll eligible clients onto HCV waitlist and screen for ESG RRH funds. Referrals to other appropriate housing solutions for the hardest to serve are made. Work closely with the local Landlord Association to house clients with the most severe barriers. Case Managers from VA visits shelters daily, along with the SSVF Coordinator, to assist homeless veterans transition to PH quickly through SSVF RRH and VASH vouchers. SSVF Prevention utilized to prevent veteran homelessness from occurring. Homeless Outreach Worker and Veteran's specialist from Mental Health visits shelters, soup kitchens, libraries, and other locations to bring folks with mental health issues and/or other disabilities into PSH.

LOTH is tracked through HMIS and our CQI program. Numbers are reported quarterly by agency and collectively as a CoC. The Grants, Planning and Housing Coordination committee oversees strategies to reduce the LOTH in our CoC. We reported on the LSA report that non-CH Adult-only households had (X days) a X day shorter average length of stay in ES than CH Adult-only households (X days).

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
	NOFO Section VII.B.5.d.	

	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

Increase PH Exits:

Fair Housing/Housing First used by all CoC members. Shelter, HARA, outreach staffs use VI-SPDAT to determine acuity, risks, barriers and housing needs, and to make appropriate housing referrals. VI-SPDAT and Coordinated Entry Process (CEP) are used to prioritize clients with highest acuity first and referred to our CH, Veterans, and Families with children Interagency Service Teams (IST). CEP allows us to quickly assist clients w/ services and housing. Every shelter is a Coordinated ACCESS Point (CAP) with trained staff to process intake, assess/prioritize clients, and refer to appropriate IST or housing option. Outreach staff visit shelters, soup kitchens, and other locations and can refer to the appropriate CAP. HARA intake staff are at all shelters weekly to sign up clients for the HCV waitlist and screen for RRH. VA Case Managers visit shelters with VA beds daily to evaluate veterans for services, PH placement, and follow up. CoC has advocated for increased ESG dollars for from City of Saginaw and has received ESG bonus dollars for RRH from MSHDA ESG.
Retain PH:
Providers do not terminate clients unless forced to do so. Termination only occurs when a lack of client cooperation or compliance makes it necessary. Reunification is attempted when possible so that the client(s) is returning to a stable PH destination. Clients are assisted with employment/mainstream services to obtain an income level that allows client to be self supporting. Individual housing plans are created with the client(s). Increased case management visits occur once the client(s) is in PH. The CoC has added new PSH, RRH, and RRY projects to our complement through reallocation of TH and SSO projects to increase subsidized PH destinations. The CQI committee is charged with monitoring these outcomes through our CQI Program.
The Grants, Planning, and Housing Coordination committee is charged with planning/reviewing new projects to CoC performance on these outcomes.

2C-4.	**Returns to Homelessness–CoC's Strategy to Reduce Rate.**	
	NOFO Section VII.B.5.e.	

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

(limit 2,000 characters)

Common factors of individuals and families who return to homelessness are identified through our VI-SPDAT used at intake and through CoC-wide HMIS data sharing. HMIS participating agencies are able to see a client's history if they have been served by another HMIS participating agency. The factors we have identified are:
-History of high utilization of crisis services (emergency rooms, jails, psychiatric facilities, etc)
-Prior homeless history, including length of time homeless, as verified through HMIS data
-Substance abuse disorder
-Criminal record
-Victims of Domestic Violence
-LGBTQ
-Chronic health, behavioral or mental health disabilities or functional

impairments requiring significant levels of support
-Families with children
-Runaway and high risk youth
-No income
Strategies implemented:
ESG funded Homeless Prevention projects are used as shelter diversion and to assist clients with rent and utility arrearages. Clients are supported by our Inter-agency Services Teams using by-name lists and prioritized by highest acuity and rehoused. Case Management is increased through longer term follow up to determine what worked and what didn't in the client's housing plan. Additional or increased supports are put in place to overcome barriers. Clients are connected to mental health services, mainstream benefits, educational opportunities to increase employment skills, parenting classes, substance abuse treatment, crisis counseling, and life skill classes. Housing plans are reviewed and adjusted to better reflect the client's ability to reach goals. Our PSH and HUD RRH projects have increased for additional subsidized housing availability. We have implemented a "No Discretionary Terminations" policy in our housing programs. The HARA intake specialist visits shelters weekly to sign clients up for the MSHDA Housing Choice Voucher wait list.
The Returns to homelessness metric is monitored by our CQI and Grants, Planning, and Housing committees.

2C-5.	Increasing Employment Cash Income-Strategy.	
	NOFO Section VII.B.5.f.	

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

(limit 2,000 characters)

Agencies within the CoC provide life skills/job readiness, including resume building, training at all shelters. The CoC has a partnership with Legals Services of Eastern Michigan/Courts to expunge client records that may prevent employment. Agencies assist clients obtain their GED by helping them pay for the classes/test. Agencies provide transportation to/from work, school, and GED classes. Bus passes are gained through the local transit authority. Childcare is provided for parents who are working or going to school. Onsite job training is provided at shelters (Classes for CNA, food service, office skills/receptionist, janitorial). Partnerships exist with union locals for access to on the job, skilled trades training (construction, Painters/Allied Trades). Partnerships exist with employers through Learn to Earn programs (McDonalds, Morley, retail, Nexteer). Our clients are eligible for the MIWorks Preferred Applicant Program - Michigan Works matches eligible clients with job opportunities.
The CQI and Grants, Planning, and Housing Coordination committees oversees our progress in increasing both the number of clients who obtain and increase their employment income.

2C-5a.	Increasing Employment Cash Income–Workforce Development–Education–Training.	

	NOFO Section VII.B.5.f.

	Describe in the field below how your 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, internships, and employment opportunities for program participants.

(limit 2,000 characters)

The CoC has executed MOA's with DHHS for all shelters to serve as MI Bridges Navigation Partners assisting client with application for cash, food, health insurance, WIC, and TANF assistance. Underground Railroad and Saginaw County Community Health Authority have increased their SOAR trained staff that assist eligible homeless clients at all shelters with accessing SSI/SSDI benefits. Case managers from the VA visit shelters weekly and assist clients with accessing benefits that they may be eligible for. The CoC, in accordance with Michigan state law, provides an HMIS ID card to homeless persons residing in projects so that they can take that along with other documentation to the Secretary of State to obtain a state ID that is needed to gain access to other documents (SSN Card) that are needed for benefit qualification (SSI/SSDI).

ADD ADDITIONAL WORK WITH MIWORKS - ASK MEJ

2C-5b.	Increasing Non-employment Cash Income.	
	NOFO Section VII.B.5.f.	

	Describe in the field below:
1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,000 characters)

The CoC has a signed Memorandum of Understanding (MOU) with the Great Lakes Bay Michigan Works! (MIWorks). The program to support the job training and employment readiness skills of homeless youth ages 18-24. CoC member agencies will provide eligible youth with information on the Workforce Innovation and Opportunity Act Program and MIWorks will provide Workforce Innovation and Opportunity Act services to eligible youth. The CoC is also pursuing a MOU with the Saginaw County Community Mental Health Authority (SCCMHA) Supported Employment (SE) Program to provide prioritized access to eligible clients of Permanent Supportive Housing projects. SCCMHA and SE have expressed interest in entering into an arrangement with the CoC. The SE program at SCCMHA has undergone recent leadership changes and the new leadership are committed to understanding the housing arena (which they are new to) prior to entering into an MOU. The SE program would provide job search, job coaching, job preparation (practice interviewing and filling out applications), and transportation to interviews and job sites. This
is a best practice program.
The CQI and Grants, Planning, and Housing Coordination committees oversees our progress in increasing both the number of clients who obtain and increase

their non-employment cash income.

3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at
https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program
Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC
Application score by giving specific guidance on how to respond to many questions and
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3A-1.	**New PH-PSH/PH-RRH Project–Leveraging Housing Resources.**	
	NOFO Section VII.B.6.a.	

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

3A-1a.	**New PH-PSH/PH-RRH Project–Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).	

1.	**Private organizations**	No
2.	**State or local government**	No
3.	**Public Housing Agencies, including use of a set aside or limited preference**	No
4.	**Faith-based organizations**	No
5.	**Federal programs other than the CoC or ESG Programs**	

You must select a response for elements 1 through 5 in question 3A-1a.

3A-2.	**New PSH/RRH Project–Leveraging Healthcare Resources.**	
	NOFO Section VII.B.6.b.	

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

3A-2a.	Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.b.	

| 1. | Did your CoC obtain a formal written agreement that includes:
(a) the project name;
(b) value of the commitment; and
(c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)? | No |
| 2. | Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider? | No |

3A-3.	Leveraging Housing Resources–Leveraging Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	

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

Project Name	Project Type	Rank Number	Leverage Type
This list contains no items			

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at
https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program
Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC
Application score by giving specific guidance on how to respond to many questions and
providing specific information about attachments you must upload
 - 24 CFR part 578

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section VII.B.1.r.	

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

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section VII.B.1.s.	

	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:
1.	**Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and**
2.	**HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.**

(limit 2,000 characters)

Not Applicable.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

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

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

3C-2.	**Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.C.	

	If you answered yes to question 3C-1, describe in the field below:
1.	**how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and**
2.	**how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.**

(limit 2,000 characters)

Not Applicable: The CoC is not requesting to designate any project to serve persons experiencing homelessness defined by other federal statutes.

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

4A-1.	**New DV Bonus Project Applications.**	
	NOFO Section II.B.11.e.	

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

4A-1a.	**DV Bonus Project Types.**	
	NOFO Section II.B.11.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing.

	Project Type	
1.	**SSO Coordinated Entry**	Yes
2.	**PH-RRH or Joint TH/RRH Component**	Yes

4A-2.	**Number of Domestic Violence Survivors in Your CoC's Geographic Area.**	
	NOFO Section II.B.11.	

1.	**Enter the number of survivors that need housing or services:**	915
2.	**Enter the number of survivors your CoC is currently serving:**	739
3.	**Unmet Need:**	176

4A-2a.	**Calculating Local Need for New DV Projects.**	
	NOFO Section II.B.11.	

Describe in the field below:

1.	**how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and**

2.	the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,000 characters)

Underground Railroad, Inc. (URR) served 1704 households from 10/1/20-9/30/21, a 22% increase over the prior year. Housing advocacy/case management sessions increased as well by 43% over the prior year and households served by Housing Programs at URR increased by 39%. The CoC utilizes a variety of housing interventions to meet the needs, however more housing services are needed. Households seeking ES at the local domestic violence shelter and denied due to capacity increased 26% during the same period. URR denied a total of 915, households from 10/1/20-9/30/21 which is a 26% increase from the prior year. Shelter stays at the DV shelter have also increased from 40 days to 83 days due to the difficulties in finding safe/affordable units and a lack of housing options. URR utilizes an HMIS comparable database collect all data provided to the Continuum. Data is also provided through HMIS by other agencies with clients who identify as DV victims. To determine the number of survivors that need housing/services, data was collected from several sources including the DV comparable database and HMIS. Data on the number requesting ES from URR as well as individuals across the CoC who identified as a DV survivor and requested housing services. While the majority of data on victims of DV is collected by URR, data is also provided through HMIS by other agencies. We are currently unable to meet the needs of all survivors due to a lack of available units that are safe/decent/affordable. Landlords currently have waitlists that are unprecedented. Open units are unwilling to take households receiving assistance, too expensive, and landlords that are unwilling to raise the standards of their units to HQS. In addition, URR is seeing an increase of calls for assistance. Underground Railroad refers to other community shelters when our capacity is exceeded. We provide advocacy, safety planning, crisis intervention and services to those currently unable to be served in housing programs.

4A-3.	New Support Services Only Coordinated Entry (SSO-CE) DV Bonus Project–Applicant Information.	
	NOFO Section II.B.11.(c)	

	Enter in the chart below information about the project applicant applying for the new SSO-CE DV Bonus project:	

1. Applicant Name	Underground Railroad, Inc.
2. Project Name	DVSSOCE

4A-3a.	New SSO-CE Project–Addressing Coordinated Entry Inadequacy.	
	NOFO Section II.B.11.(c)	

	Describe in the field below:	

1.	how the current Coordinated Entry is inadequate to address the needs of survivors of domestic violence, dating violence, sexual assault, or stalking; and
2.	how the proposed project addresses inadequacies identified in element 1. above.

(limit 2,000 characters)

The CoC has a "No wrong door"CE system & survivors regularly enter the CES via nonDV/SA APs. Goal is to ensure that survivors are met with staff who have been well-trained on trauma-informed assessment&intake practices, safety planning & DV/SA, regardless of which access point they utilize. In Saginaw only 5%of clients at non-DV shelters identified as fleeing DV&only 15%at a nonDV shelter identified as having an incident of DV/SA in their past. Given that DV/SA is the leading cause of homelessness for women& children we believe that survivors are being under-identified at nonDV shelters in SC. The VI-SPDAT is used to assess at APs, it is not trauma informed or adequate in assessing for DV/SA,often DV is disclosed late or never. Victims of DV/SA experience fear &shame&may not disclose for these&other reasons. The DVC will work with the CoC to find trauma-informed assessments to be utilized at APs to increase the likelihood of survivors self-identifying at intake.The project will implement policies, procedures&practices that better equip the CoC'sCESystem to best meet needs of survivors. URR is an access & referral point for survivors entering the CES in CoC. A FT DVCE Coordinator(DVC)will conduct yearly assessment of survivor service needs&current policies&practices related to survivors, make recommendations for strategies, new policies, procedures &practices to better equip CoC's CES & CoC providers to meet the needs of survivors. This will reduce re-traumatization & ensure survivors rights, voices&perspectives are incorporated when developing&implementing policies &practices. The DVC will provide regular training on DV/SA,safety planning& trauma-informed intake&assessment practices to staff at all CoC access points. The DVC will make this training sustainable&ensure new staff are trained quickly. Training is essential to ensuring that al lCoC projects serve survivors with sensitivity, assist them with making informed choices&in a manner that will increase the clients' safety & security.

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information.	
	NOFO Section II.B.11.	

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects–only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.	

Applicant Name
Underground Railr...

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

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2021 Priority Listing:	

1.	**Applicant Name**	Underground Railroad, Inc.
2.	**Rate of Housing Placement of DV Survivors–Percentage**	35.50%
3.	**Rate of Housing Retention of DV Survivors–Percentage**	85.42%

4A-4a.	Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Describe in the field below:	
1.	**how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and**	
2.	**the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).**	

(limit 1,000 characters)

The majority of data on victims of DV is collected by Underground Railroad in a comparable database, data is also provided through HMIS by other agencies with clients who identify as DV victims. The rate of housing placement was calculated using the rate of positive housing exit destinations for DV victims. The rate of housing retention was calculated using the rate of recidivism back to homelessness for DV victims. Both rates are an aggregation of HMIS and the DV provider's comparable database data.

4A-4b.	Providing Housing to DV Survivor–Project Applicant Experience.	
	NOFO Section II.B.11.	

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

(limit 2,000 characters)

During their shelter stay, the survivors assigned advocate assists in the creation of a survivor driven action plan that is designed to explore safety concerns, and create goals & action steps to overcome identified barriers. Survivors are assessed for housing needs upon intake into services and referred to many housing options include applying for Housing Choice Vouchers, HUD funded Housing Programs, URR Housing Programs and any others that are available. URR Housing Programs are prioritized based on intensity and barriers. A coordinated intake assessment, similar to VI-SPDAT but used exclusively for DV victims, assists in the prioritization process. The assessment is completed by the Advocacy Manager to ensure consistency of the assessment. Once completed, the survivor is given information about available housing options at that time or placed on a waitlist if there are none available. All survivors work with and advocate for supportive services and to create a survivor-driven plan designed to overcome barriers and increase housing stability, this includes safety planning, job skills workshops, childcare, benefit enrollment assistance, legal assistance and referrals to other community resources etc. The CoC CE policies and procedures provide specific practices in serving survivors, safety planning protocols, emergency transfers and confidentiality. The CoC's emergency transfer plan extends to project participants who have experienced domestic violence, dating violence, sexual assault, and stalking. The plan takes into account the safety of its project participants and the ability to request a transfer is available to all participants regardless of sex, gender identity, or sexual orientation. The plan identifies participants who are eligible for an emergency transfer, the documentation needed to request the transfer, confidentiality protections, and guidance on safety and security.

4A-4c.	Ensuring DV Survivor Safety–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Describe in the field below examples of how the project applicant ensured the safety of DV survivors experiencing homelessness by:
1.	training staff on safety planning;
2.	adjusting intake space to better ensure a private conversation;
3.	conducting separate interviews/intake with each member of a couple;
4.	working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
5.	maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and
6.	keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors.

(limit 5,000 characters)

Underground Railroad, Inc. was established in 1977 as the domestic violence shelter for women and children in Saginaw County. Currently the Underground Railroad, Inc. serves households that have experienced domestic and sexual violence. URR advocates are trained to be trauma informed and survivor-centered when creating the individualized service plans and when working with the households. All advocates have completed New Service Provider Training which includes domestic violence and sexual assault dynamics, survivor-centered advocacy, trauma-informed advocacy, safety planning, and confidentiality. Safety planning is discussed in every survivor/advocate meeting. We believe that with an increase in housing options for survivors, shelter stays

will decrease thereby reducing the length of time of homelessness and there will be an increase in positive housing destinations. In addition, once the survivor is selected for a program, Advocates offer to assist the survivor in finding safe/affordable housing that will meet the criteria of the housing program. During this time the Advocate goes on housing searches with the survivor and does walk through with the survivor if requested. The Advocate points out potential safety issues if seen and discusses safety plans specific to that unit. Once households are entered in the project, advocates will help identify housing and work with the survivor to secure safe, stable housing and can provide safety &security equipment for units such as deadbolts, security lights and cameras as needed. URR advocates meet with survivors in safe trauma-informed spaces within our safety center. The facility has a state-of-the-art security system which is monitored 24/7 by on site staff and an off-site contractor. Individuals may not enter the building without approval by a staff member at all entrances. In addition, access to the shelter part of the building is only for shelter guests. All other visitors must enter through the front business door which is as far away as we can make it to the shelter to enhance privacy and security for the shelter guests. Security features include exterior locks and alarms on doors and windows, secure parking, smoke detectors throughout the building, and appropriate fire exits. Our shelter location also has bullet proof glass for the windows to increase safety for the survivors and cameras on all exterior doors as well as the parking lot. Staff have access to portable panic alarms that they are able to wear throughout the building as well as staff are all taught how to use the alarm keypads as panic alarms. There is also a silent alarm in the shelter office and business reception. Additional confidentiality features include sound absorbing panels in all offices, conference rooms, and gathering places as well as in-ceiling speakers in the business hallways and reception to assist with noise cancelation so that staff and survivors can have safe, confidential conversations. URR is less than a mile away from the police department and hospital if any emergencies arise. We have adequate lighting throughout the building and in our parking lot. Lighting in the building has been upgraded to motion-censored.

Services provided by URR are also provided in the community. URR has 3 nondescript vehicles that are used providing services to survivors. URR has a Mobile Advocacy Safety Policy and Procedure which includes safety planning with the survivor and staff.

4A-4c.1.	Evaluating Ability to Ensure DV Survivor Safety–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

Underground Railroad is the only domestic and sexual violence agency in Saginaw county and has been providing services to survivors for 44 years. Underground Railroad is required by the State of Michigan to meet rigorous quality assurance standards set by the Michigan Domestic and Sexual Violence Treatment Board. URR is subject to a meticulous quality assurance standards review every five years which is conducted by experts in the field from across the state. URR passed its most recent standards review with 100% and zero

negative findings making it a gold standard for programming and services to survivors. URR staff go through training designed to educate staff on safety planning and helping survivors see ways to increase safety. All staff discuss safety plans with survivors when they meet. We believe that an increase of housing options available to survivors across the county, will increase survivor safety.

4A-4d.	Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:
1.	prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4.	emphasizing program participants' strengths, e.g., 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;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for parenting, e.g., parenting classes, childcare.

(limit 5,000 characters)

Underground Railroad, Inc. (URR), in Saginaw Michigan, is the only service provider in Saginaw County offering supportive services specifically for survivors of domestic violence. Our agency provides an array of direct services to thousands of individuals in Saginaw County each year. URR provides trauma-informed empowerment based services including emergency shelter, individual advocacy, 24/7 crisis line & emergency intervention services, counseling, PPO assistance and court advocacy to these victims. Services are voluntary & free of charge, our trained staff take a client-centered non-judgmental approach to working with survivors to determine and reach their individual goals.

URR staff strives to meet every survivor regardless of age where they are at in the moment. Every individual receiving services comes to us with their own unique needs and we work with them to identify their goals and a plan to meet their needs and goals. URR has resources available for survivors across the lifespan from childhood to later life, we also partner with other agencies in the community as well as provide referrals as needed to meet the needs of the individual survivor.

URR identifies and addresses the needs of diverse communities primarily through our Underserved Populations Advocate and our Community Engagement Manager. They provide outreach to people who have Limited English Proficiency (LEP), the elderly, people with disabilities, and persons who identify as gay, lesbian, bi-sexual, or transgendered. They conduct outreach to these underserved populations through community organizations or groups that serve or are connected with these different populations. Regular training for

URR direct service staff is provided to assist with promoting the understanding of diverse communities and their specific needs as well as cultural competence and nondiscrimination practices.

We recruit and hire staff that understand and exemplify our empowerment philosophy. We ensure services are client centered by keeping our mission at the center of our daily work. Every choice we make as staff, we are to think of how this impacts survivors and how it may empower them. Staff receive ongoing education and training that promotes survivor focused/voluntary services, Staff participate in ongoing supervision and coaching with their supervisors that promotes survivor focused practices and services. We regularly gather feedback from survivors about our services to ensure this through satisfaction surveys and house meetings.

Underground Railroad staff members take a survivor-centered approach to all individuals they are working with. Advocates spend time listening to survivors to determine what survivors want from engaging in services, they work with participants to develop survivor-driven individualized action plans based on the individual goals of the survivor. Supportive services offered for housing participants include 1) Advocacy/Case management (including safety planning), 2) Counseling, 3) Weekly support groups, 4) URR licensed childcare center, 5) Subsidized housing 6) Goal setting through use of a survivor-driven individualized action plan 7) Referral support within Underground Railroad, Inc. and the community 8) Childcare vouchers (for parents whose work schedules preclude them from using our Childcare Center). 9) Individual Specific Assistance: cell phone, transportation, i.e. bus tokens, help with utilities, security deposit, rent; Vouchers to be redeemed for merchandise at our resale store 10) Monthly food boxes, 11) After business hours on-call response, 12) Assistance with furnishing housing unit, 13) Advocacy for long term permanent housing and follow-up services, and 14) Supervised visitation/exchange (through court order only), and Court support services.

Advocates are experienced working with and knowledgeable of our community's resources. They share this information with survivors to help them address their goal to remain free of and safe from the assailant, remain stably housed and become economically secure. Advocacy assistance is also available from our Criminal Justice department staff with issues relating to PPOs, court advocacy to hold batterers accountable, and with Friend of the Court for child support and supervised visitation to enhance safety.

Providing trauma-informed, empowering and non-judgmental services is at the core of our organization. We provide ongoing education and training for all employees that provide a deeper understanding of these ideas and how we can incorporate them into our daily work to better serve clients. Ongoing supervision and coaching with staff focuses in part on creating an in-depth understanding of survivor's perspectives and the importance of non-judgmental language and actions when providing services

4A-4e.	Meeting Service Needs of DV Survivors–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Describe in the field below:	
1.	supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and	
2.	provide examples of how the project applicant provided the supportive services to domestic violence survivors.	

(limit 5,000 characters)

Underground Railroad staff members take a survivor-centered approach to all individuals they are working with. Advocates spend time listening to survivors to determine what survivors want from engaging in services, they work with participants to develop survivor-driven individualized action plans based on the individual goals of the survivor. Supportive services offered for housing participants include 1) Advocacy/Case management (including safety planning), 2) Counseling, 3) Weekly support groups, 4) URR licensed childcare center, 5) Subsidized housing 6) Goal setting through use of a survivor-driven individualized action plan 7) Referral support within Underground Railroad, Inc. and the community 8) Childcare vouchers (for parents whose work schedules preclude them from using our Childcare Center). 9) Individual Specific Assistance: cell phone, transportation, i.e. bus tokens, help with utilities, security deposit, rent; Vouchers to be redeemed for merchandise at our resale store 10) Monthly food boxes, 11) After business hours on-call response, 12) Assistance with furnishing housing unit, 13) Advocacy for long term permanent housing and follow-up services, and 14) Supervised visitation/exchange (through court order only), and Court support services.

Supportive services will be provided in a variety of settings by the Housing Advocate and may include home visits, office meetings, meeting at a safe location, other community service provider's locations and phone calls ensure that the participant is served the way they want. No survivor is required to participate in any supportive services activities in order to be receiving housing assistance. Housing Advocates often transport survivors to search for housing, assisting and supporting them through identifying and securing safe housing. In addition to home visits advocates will transport survivors to run errands such as grocery shop, pick up medications, attend doctors' visits etc. these types of interactions are low pressure and help advocates to develop rapport with survivors which leads to more effective advocacy. Additionally, Housing Advocates accompany survivors to court to provide support, assist with PPOs as needed and support the survivor through all steps of the legal process. Advocates are flexible in meeting the needs of survivors, if a survivor does not wish to meet with an advocate in their home or at the office then a safe alternate location can be used such as a local library. Survivors accepted into our TSH program may be coming from other area shelters and advocates can arrange to meet with survivors where they are if the survivor wishes.

Safety planning is done continually throughout a survivor's participation in Underground Railroad, Inc. services.

4A-4f.	Trauma-Informed, Victim-Centered Approaches–New Project Implementation.	
	NOFO Section II.B.11.	

	Provide examples in the field below of how the new project will:	
1.	prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;	
2.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;	
4.	place emphasis on program participants' strengths, e.g., 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;	

5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for parenting, e.g., parenting classes, childcare.

(limit 5,000 characters)

This project will serve survivors of domestic and sexual violence in Saginaw Michigan. It will provide housing assistance and supportive services needed for survivors to obtain safe and sustainable housing in our community. Households in this project will be provided with a housing advocate and encouraged to meet weekly. They will create a survivor driven individualized service plan designed to create goals and action steps to overcome barriers that the survivor faces in obtaining/remaining in permanent housing. Advocates are trained to be trauma informed and survivor centered as they work with the households. All advocates have completed New Service Provider Training which includes DV/SA dynamics, survivor-centered advocacy, trauma-informed advocacy, and confidentiality. Households with children will meet with our Youth Advocate whose role is to ensure the needs of the children and being met which include parenting classes, assistance with school enrollment, and referrals. Supportive services provided to the survivor include childcare, legal advocacy, job skills and employment workshops, budgeting assistance, benefits enrollment assistance, and transportation assistance.

We will recruit and hire staff that understand and exemplify our empowerment philosophy. We ensure services are client centered by keeping our mission at the center of our daily work. Every choice we make as staff, we are to think of how this impacts survivors and how it may empower them. Staff will receive ongoing education and training that promotes survivor focused/voluntary services, Staff will participate in ongoing supervision and coaching with their supervisors that promotes survivor focused practices and services. We will regularly gather feedback from survivors about our services to ensure this through satisfaction surveys and house meetings.

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.

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

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Too...	11/13/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	1E-1 - scchap.org	11/13/2021
1E-2. Project Review and Selection Process	Yes	1E-2 - scchap.org	11/13/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	1E-5	11/13/2021
1E-5a. Public Posting–Projects Accepted	Yes	1E-5a emails to a...	11/13/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		