

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 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 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 2023 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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: AR-501 - Fayetteville/Northwest Arkansas CoC

1A-2. Collaborative Applicant Name: Northwest Arkansas Continuum of Care

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Northwest Arkansas Continuum of Care

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC's geographic area:	

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

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	No
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	Yes	Yes	Yes
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.				
35.				

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

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	
	Describe in the field below how your CoC:	
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;	
2.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).	

(limit 2,500 characters)

1. We host an annual membership drive each summer and have an ongoing open invitation process for new members. The CoC membership invitation process is open to the public and communicated via the following methods: COC website, a listserv composed of 325 stakeholders, bi-monthly General Membership, CoC committee meetings and other community meetings. As a precautionary measure in response to the continued presence of COVID-19 in our community and to increase accessibility for those with transportation or other barriers, meetings are held virtually, via Zoom.

2. We disseminate invitation materials in a variety of formats, including accessible electronic documents on our website. All electronic formats can be increased in size or accessed with speech-to-text software. Stakeholders can call 211 to speak to someone if the electronic options do not meet their needs. Recordings of trainings are hosted on our website and shared via the list serve in the event that interested parties are unable to attend in-person training. All Zoom meetings are closed-caption enabled. Our CoC Board includes a certified sign-language interpreter who provides translation services upon request.

3. The CoC extends new member invitations to groups inclusive of the populations that are reflected in the homeless community, including, but not limited to, Black, Latino, Marshallese, LGBTQ+, families, youth, veterans, persons with disabilities, and other cultural and ethnic subpopulations. Current CoC member organization staff and potential new members serving culturally and ethnic specific communities experiencing homelessness in the geographic area provide input to address equity in the invitation process through participation in the CoC's membership, community collaboration and meetings of our Diversity, Equity, and Inclusion committee. Additionally, homeless and formerly homeless persons are encouraged to join the CoC throughout the street outreach and coordinated entry processes. Two formerly homeless board members provide input to inform the invitation process. Homeless service providers are asked to identify current and former clients for new membership and to provide input to inform the invitation process. For example, our entire street outreach team is made up of individuals with recent (since 2016) lived experience.

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

	Describe in the field below how your CoC:
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. We solicit expertise from a broad array of organizations and individuals, including those with lived experience, to achieve our mission to prevent and end homelessness. Input is solicited through general membership and community collaboration meetings, topic-focused group meetings, one-on-one conversations with members and other community stakeholders, surveys, and via the CoC website. Our membership comprises 33 housing, homelessness, and mainstream services member organizations and individuals with diverse representation reflective of our community. The CoC membership is responsible for CoC governance that impacts funding determinations, strategic planning, coordinated entry and ongoing development of the local crisis response system through the election of persons to serve on the CoC Board of Directors. Committees are provided with the opportunity to respond to proposed policies and procedures prior to a vote on policies and procedures by the CoC Board of Directors. The only requirement for voting status is membership of the CoC is a commitment to ending homelessness in our region through completion of the membership application, which is available on the COC website year-round. Inclusivity is a priority of this CoC – all meeting materials are made available in PDF and member organizations serving culturally specific populations assist with translation, where necessary.
2. All minutes are posted on our website. It contains all minutes from all the general membership meetings including results pertaining to membership votes. We provide the link during every membership meeting in the event that someone does not see the link on the invites.
3. Any electronic documents can be increased in size or converted using text-to-speech software. Stakeholders can call 211 to speak to someone if the electronic options do not meet their needs.
4. Interested are able to communicate directly with the membership during public meetings. The Board and various committees are charged with considering suggested improvements and new approaches to their work with the public and with the membership. Committee membership is open to all members, creating a direct pipeline for the introduction of new ideas.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	
	Describe in the field below how your CoC notified the public:	
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications—the process;	
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and	
4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.	

(limit 2,500 characters)

1. The Local NOFA was posted on 07/29 & 8/5/2023 in the Arkansas Democrat Gazette, via email to the CoC's 325 person listserv, and website posting, notifying the public that the CoC was accepting proposals from all eligible organizations, including new applicants. We inform potential applicants they do not have to have received previous CoC funding in order to apply in each of those various posting methods. We received 7 applications for new projects this year.
2. The CoC hosted an informational session on 07/20/23 to encourage project applications from organizations not previously receiving CoC program funding. This session was recorded and distributed to the listserv immediately afterwards as well as posted on the CoC website and through social media. The session covered the application process and was open to questions during the session and through one-on-one technical assistance and support both before and after the session.
3. During the information session, potential applicants are informed of the CoC review process to determine which organizations will be selected. As part of the application packet, potential applicants were provided with the NOFA scoring rubric, which was created by the volunteer and unbiased rank & review committee and approved by the CoC Board.
The Rank & Review committee reviewed new & renewal projects, with reallocation considerations, scored and ranked projects for inclusion in the NWA CoC Application. Proposal scores and rankings were based on the local needs/gap analysis, FY 2023 NOFO, and objective scoring rubric, all of which were widely distributed and available on the CoC website.
4. All electronic documents can be increased in size or converted using text-to-speech software. Stakeholders can call 211 to speak to someone if the electronic options do not meet their needs. All Zoom meetings have closed-captions and interpreters for sign language, Marshallese, and Spanish are available upon request.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.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 the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Nonexistent
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

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

(limit 2,500 characters)

1.The CoC participates in statewide ESG subrecipient meetings, assists with funding opportunity advertisement, and has ongoing consultation with ESG subrecipients in planning and allocating ESG funds. The CoC supports the ESG subrecipient application process through letters of good standing for CoC members' project proposals for ESG activities. The CoC consults with cities in our region and member agencies regarding activities to best meet the needs of the CoC, identifying agencies most likely to have capacity to implement an effective, cost-efficient ESG project. The NWA CoC and its member agencies leverage funding opportunities to expand and create new services- shelter, street outreach, homelessness prevention, and rapid rehousing- covering our entire region to effectively serve those at risk of losing their housing and for those experiencing homelessness in our community. The CoC provides support to ESG subrecipients with technical assistance and training, upon request, for effective grant administration.

2.The CoC conducts ESG project reviews of system performance metrics such as length of time homeless, returns to homelessness and first time homeless via our HMIS. We also review the number of people served and data quality. The CoC plans to increase the number of on-site reviews for file upkeep and confidentiality in the coming year.

3. The CoC provides the PIT and HIC count data along with other,region-specific homeless reports to the consolidated plan jurisdictions in the CoC's region annually (April 2023, most recently). Regional reports provide demographic and other supporting information of those experiencing homelessness, including veterans, unaccompanied youth, and school-aged children and first time homeless.

4. Information was provided from the Executive Director of the CoC to all four cities addressing homelessness in our geographic area. As there are four different consolidated plans, information was also offered through the Point In Time count graphics, powerpoint slides, and raw data broken down by major city to reflect the needs of the homeless as they were identified in each consolidated plan.

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

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

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

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	No
3.	Local Education Agency (LEA)	No
4.	School Districts	Yes

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

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

(limit 2,500 characters)

The CoC has formal MOUs with Teen Action Support Center, Arkansas Department of Human Services, and the Fayetteville Housing Authority (FHA). The MOU with FHA is for the administration of a Fostering Youth to Independence (FYI) project and meets the requirements of PIH Notice 2019-20 (HA). This project provides housing and support services for eligible youth who are at least 18 years and not more than 24 years of age; have left or will leave foster care within 90 days, in accordance with a transition plan described in section 475(5)(H) of the Social Security Act at age 16 or older; and are homeless or is at risk of becoming homeless as these terms are defined at 24 CFR 578.3 and 24 CFR 576.2.

The CoC has established a Youth Council Workgroup made up of youth education providers and housing providers in the CoC's geographic region. The Workgroup holds meetings monthly with the goal of cultivating resources and expanding a Youth Council to inform the CoC's work to prevent and end youth homelessness. Members meet to discuss relevant topics and formulate pathways for access to housing, educational, and mainstream services. This is a very strong partnership with the local school districts in our area. Representation from a majority of the schools make up a large percentage of this committee. We are working toward formal MOUs with SEAs and LEAs.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section V.B.1.d.	

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

(limit 2,500 characters)

The NWA CoC's Written Standards meet HUD's requirements and address CoC expectations for all projects. Individuals and families are informed of their eligibility for services by both the provider and the homeless liaison or social worker at the school. The Educational Liaison standard is included in our Written Standards, requiring projects that serve households with children to designate a staff person as the homeless liaison who ensures that children are enrolled in school and connected to appropriate services in the community, including early childhood projects such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney Vento education. This standard promotes better access and outcomes within our system.

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

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

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

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

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

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

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

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1.The CoC's two domestic violence service provider member organizations, Peace at Home Family Shelter and the Northwest Arkansas Women's Shelter, participate in Coordinated Entry Committee meetings and ensure that survivors' needs are represented in the development of the coordinated system of care across our region. Coordinated Entry staff addresses safety, confidentiality, and best practices at monthly Coordinated Entry Committee meetings. Over the past year, the coordinated entry committee successfully worked with the domestic violence providers to create a system that ensures all domestic violence survivors have the same opportunities for housing as anyone on the by-name list. We accomplished this by creating a side-by-side by-name list where when any housing opportunities come available, a percentage of those units are available for the DV organizations to be housed through an ESG or PSH grant. This parallel process allows for a lottery system devised by each DV organization to maintain the privacy and confidentiality of clients. It also allows for deidentified clients to be included in case conferencing without putting clients or their advocates in jeopardy. When establishing this process, both DV member organizations, coordinated entry members, and NWA CoC staff consulted with the National Network to End Domestic Violence and the National Resource Center on Domestic Violence to learn about best practices of other CoCs across the nation and explore appropriate options for the CoC.

2. Our two domestic violence service providers present on safety and trauma-informed care at least annually to CoC community meetings. They review the unique safety issues for survivors of domestic violence and trafficking and address trauma-informed, victim-centered best practices and planning protocols. The CoC also works closely with Hub of Hope, a local organization providing services to trafficking survivors and assisting with training needs for any agency that has clients experiencing any type of domestic violence and/or sex trafficking. All trauma-informed care training is provided for all agencies, as many clients present with a variety of barriers that may or may not be linked to any type of domestic abuse.

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

Our two domestic violence service providers present on best practices at least annually to CoC community meetings. All such training is provided to all agencies, as many clients present with a variety of barriers that may or may not be linked to any type of domestic abuse. DV service member organizations Peace at Home Family Shelter and Northwest Arkansas Women's Shelter are both members in good standing with the Arkansas Coalition Against Domestic Violence and as such, all of their project staff members have received extensive training facilitated by the Coalition on the best practices for safety and planning protocols in domestic violence service provision. Some current and future training topics for CoC members serving survivors of domestic violence include: assessing individual safety needs in a client-centered and trauma-informed manner, understanding the dynamics of domestic violence, recognizing the role of DV specific organization and opportunities for collaboration, and the empowerment model and client-centered choices. The NWA CoC also uses national resources from the National Network to End Domestic Violence to inform policies and strategies related to serving survivors of domestic violence. Our coordinated entry committee, who must participate in the annual best-practices training, meets once a month to review policies and procedures for housing individuals and families. This group provides guidance to the weekly case conferencing group to make sure that we are following safety protocols and victim-centered practices when housing people using the prioritization guidelines that were established by the committee. Coordinated entry members include the CoC staff and representatives from all housing organizations including the DV shelters.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
	1. safety planning protocols; and	
	2. confidentiality protocols.	

(limit 2,500 characters)

The CoC has a set of policies and protocols to address safety planning and confidentiality protocols which align with the National Network to End Homelessness Domestic Violence policies. These policies require members to have formal emergency transfer plans, individualized safety plans for each participant, and strict confidentiality policies and practices. The CoC also relies on the formal policies of our DV providers, who provide housing and emergency shelter resources such as Peace at Home and NWA Women's Shelter (NWAWS), both of which are CoC members.

One agency does emergency relocations. They typically relocate approximately 20 families a year with that program that program includes installation of security systems, changing locks, or adding other security measures to reduce the need for DV survivors to constantly relocate. Together, DV providers support approximately 50 families with security upgrades annually.

The CoC Coordinated Entry committee continues to update the coordinated entry system as it relates to survivors of domestic violence and trafficking to ensure confidentiality and safety for all clients and their family members. Part of that process continues to include an 'opt-out' and de-identification process for survivors to protect their personal information and records from public view.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below:

1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.

(limit 2,500 characters)

The de-identified aggregate data source(s) for the NWA CoC are the information entered by our two DV shelters and the data from the NWA Center for Sexual Assault. Both agencies are able to upload their information to be utilized by HUD. The CoC also utilizes domestic violence data from both national, state and local sources such as the CDC's National Intimate Partner Violence and Sexual Assault Survey. At a national level, the CoC reviews reports from the National Network to End Domestic Violence, the National Coalition on Domestic Violence, and the Violence Policy Center. For state level trends, the CoC uses data from Arkansas Coalition Against Domestic Violence on domestic violence, sexual assault and stalking. Locally, the CoC primarily uses 3 sources of data- (1) ESG CAPER report; (2) PIT and HIC count annual data, questions surrounding DV are data points on the PIT Survey and are reported to the CoC, HUD and other constituents for future planning; and (3) direct input from DV organizations. Additionally, through our coordinated entry system, all participants on the BNL have received a community assessment (VISPDAT) which includes questions surrounding intimate partner violence, including appropriate diversion to domestic violence service providers. Both DV service providers provide data to the CoC from their respective databases for both annual strategic planning and NOFA development. The CoC has offered a parallel By Name List process for prioritizing housing that is respectful of safety and security for those participants. These data sources allow us to track community needs.

The de-identified aggregate data from the national, state, and local sources described above is utilized to evaluate how to best meet needs related to domestic violence and homelessness by assessing the demographics of need compared with the demographics of individuals receiving services, the demand for specific services compared to the CoC's capacity to provide those services, as well as an understanding of the needs that accompany DV victimization and experiences of homelessness and how to more effectively connect survivors with the services they need to reduce barriers unique to them as an individual.

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:

1.	whether your CoC has policies and procedures that include an emergency transfer plan;
2.	the process for individuals and families to request an emergency transfer; and
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.

(limit 2,500 characters)

Our CoC coordinated entry policies and procedures include an emergency transfer plan.

A tenant requesting an emergency transfer must expressly request the transfer in writing to the housing provider (HP) in accordance with the procedures. The HP may request documentation to support the request but no new application for housing is required, they are allowed to transition in-place.

The HP will assess the request and work with the landlord to expedite the request. All information provided by the tenant is protected by a limited timeframe release of information disclosure. The tenant is urged to take all reasonable precautions to guard their families safety during the transfer process. Each agency is required to show knowledge of the VAWA transfer at monitoring. In addition, CoC providers are encouraged to contact CoC staff when assistance is needed in connecting to other CoC's with a transfer request. In accordance with all existing voucher programs, the CoC follows the practice found in the "Tenant & HOME Agreement" in direct correlation to the VAWA Act; we"Allow for an internal emergency transfer to another available and safe unit in the development by any tenant or other lawful resident of a HOME-assisted unit who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. In such cases, the transferring tenant(s) may transfer to the new unit without having to undergo an application process and will, in all other respects, be treated as an in-place tenant."

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC:

1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

(limit 2,500 characters)

CoC policies and procedures ensure that all survivors of DV have access to all housing and services available in our geographic area. Our policy prioritizes safety & access to housing/services for persons experiencing DV, including transferring to other communities. CoC coordinated entry protocols incorporate the DV/Mental Health/Veteran hotlines, 2-1-1 & local police departments to provide 24-hr access to DV services. Emergency shelters prioritize victims that are in immediate danger, offering safety planning & crisis intervention as first steps. If the emergency shelters are full, shelters may arrange for a hotel, connection to outreach advocates, or other safe & accredited DV specific services outside of the area until space becomes available. Victims that are not in imminent danger, but seeking help to flee a violent relationship, are connected with outreach advocates that provide DV/SA specific housing & other resource programs, as well as non-DV options. Domestic violence services assist with safe, confidential, & victim centered planning. If a household is willing to be identified and put on the By Name List, an assessment is completed by an outreach coordinator to assist with connecting the household to the proper services. Both DV shelters also utilize ESG and private funding to assist households in obtaining safe housing in the fastest yet safest way possible.

Each major city has now created a CIT (Crisis Intervention Team) which now allows for diversion for victims rather than immediate incarceration for domestic issues. Local police can call the hotline to expedite responses in emergency situations. All calls are screened for lethality & imminent danger to determine next steps.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
2.	accounted for the unique and complex needs of survivors.	

(limit 2,500 characters)

Member organization, Peace at Home, provides feedback and guidance from those with lived experience to the CoC. Peace at home ensures that survivors with a range of lived experience are involved in the development of policy and programs by having survivors serve on the board of directors (one survivor of domestic violence who also experienced homelessness and one childhood survivor of domestic violence who experienced doubling up), the leadership staff (one survivor and one childhood survivor who experienced doubling up), and program staff (additional adult survivors of domestic violence). Peace at Home celebrates that individuals with lived experience are present in the volunteers and staff at all levels of the organization. Additionally, Peace at Home provides feedback surveys and opportunities so that clients who have most recently engaged in services can provide immediate insights to improve programs. Survivors who choose to participate in focus groups are compensated for their time. This information is shared with the CoC board, which approves policy changes when necessary.

Client feedback and survey response mechanisms are available in English and Spanish and an individual survivor's identity is never shared without their consent. Forms allow clients to indicate their chosen pronouns and their communication preferences.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+—Anti-Discrimination Policy and Training.	
	NOFO Section V.B.1.f.	

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

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

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

(limit 2,500 characters)

We collaborate with Cocoon NWA, an agency that works with LGBTQ+ youth ages 18-24 who are experiencing homelessness. The CoC's DEI committee has gone through several workshops and is now in the process of creating training opportunities for our membership. Cocoon NWA has specific trainings available for case managers and other front-line workers on trauma-informed care, intersectionality, and the barriers that those in the LGBTQ+ communities face. We are making those trainings available to CoC organizations this year.

The CoC DEI Committee has sought out information from underserved populations to ensure the CoC anti-discrimination policy is comprehensive and clear. This policy is strictly enforced and followed by the CoC; we ensure that each project agency has a current comprehensive anti-discrimination policy that aligns with the CoC's policy. The DEI Committee continues to monitor the social climate and works to develop a scaffolding that not only states the views of the Continuum of Care but also allows for the same verbiage to be adopted by member agencies. Along with this scaffolding of information, the DEI committee is providing more training in a variety of venues with the major objective of addressing anti-discrimination, family separation, & equal access to LGBTQ+ households. The CoC has been awarded a grant to hire a trainer to develop and provide more frequent training and consultation options. The CoC conducts annual monitoring of each project to confirm they have compliant anti-discrimination policies in place. The DEI Committee is tasked with reviewing policies for compliance with the CoC's anti-discrimination policies, evaluating compliance, & enforcement of those policies.

Complaints made by clients regarding discrimination are sent to the CoC Executive Director and the CoC Board Executive Committee. Complaints that warrant a fair housing violation are turned over to HUD via a Fair Housing & Equal Opportunity Complaint. Any person who makes a complaint is still eligible for services & is not retaliated against. Clients with discrimination complaints may be transferred to a similar project to ensure their housing stability

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.	
	NOFO Section V.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Fayetteville Housing Authority		Yes-Both	Yes
Siloam Springs Housing Authority		No	No

You must enter information for at least 1 row in question 1C-7.

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.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 2,500 characters)

1. There are 3 public housing authorities in our geographic area. Only one PHA (the largest one, The Fayetteville Housing Authority (FHA), offers homeless preference slots and emergency housing vouchers. The Fayetteville Housing Authority (FHA) is the largest provider of housing assistance and rental subsidies in Northwest Arkansas and is a CoC member agency actively involved in the community's goal of ending homelessness. FHA participates in community meetings, coordinated entry, Veteran & non-veteran case conferencing, and the CoC's Landlord Engagement Committee. FHA's jurisdiction encompasses all of Washington county, with the exception of Springdale city limits, for public housing and vouchers. VASH vouchers include Washington and Benton counties. FHA's housing assistance includes 194 public housing units & 52 Project-Based rental units. Voucher assistance includes 130 VASH, 480 Housing Choice, and 40 Mainstream vouchers, 25 Fostering Youth to Independence Vouchers, and 56 Emergency Housing Vouchers. FHA offers a preference for families that are homeless. FHA allocates 10% of new vouchers and 10% of new public housing openings to the CoC administered according to the CoC coordinated entry policy. With FHA's award of EHV vouchers, FHA, NWA CoC, and other community members revised coordinated entry policy and procedures for the EHV's to ensure equitable access and leverage housing and supportive services for those most vulnerable. FHA prioritized EHV's for domestic violence, sexual assault, and human trafficking survivors with a parallel process. The NWA CoC is responsible for case-conferencing in order to make appropriate referrals according to the coordinated entry priority policies, which includes chronicity, length of homelessness as well as the additional variables identified in the community assessment.

The other two PHAs in our CoC (Springdale and Siloam Springs) do not offer homeless preference slots. The NWA CoC continues to foster relationships with these housing authorities with the goal of assisting them in the implementation of a homeless preference. Both are very small, understaffed agencies who are hesitant to take on the additional administrative burden of a homeless preference at this time.

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 Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.	Foundations with housing LLCs	Yes

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	Yes
8.	Other Units from PHAs:	
	EHV	Yes

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

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

	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
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored—For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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	If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
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PHA	
Fayetteville Hous...	

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

Name of PHA: Fayetteville Housing Authority

1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	12
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	12
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

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

(limit 2,500 characters)

For the competition, all projects are evaluated in the Access and Evaluation and Project Specific standard categories. Currently all new and renewal projects are following the Housing First model.

2. The CoC utilizes HUD's Housing First Assessment Tool and the United States Interagency Council on Homelessness's Housing First Checklist to evaluate CoC funded projects to ensure projects adhere to the recommended best practice standards of the Housing First Model. In both tools, projects are evaluated on the following standards: Access to programs is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions. Programs or projects do everything possible not to reject an individual or family on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that are interpreted as indicating a lack of "housing readiness." People with disabilities are offered clear opportunities to request reasonable accommodations within applications and screening processes and during tenancy and building and apartment units include special physical features that accommodate disabilities. Supportive services emphasize engagement and problem-solving over therapeutic goals. Participation in services or compliance with service plans are not conditions of tenancy, but are reviewed with tenants and regularly offered as a resource to tenants. Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some tenants' lives. Substance use in and of itself, without other lease violations, is not considered a reason for eviction. Tenants in supportive housing are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements. Every effort is made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if a tenancy is in jeopardy. Whenever possible, eviction back into homelessness is avoided. 3. While HUD's more intricate tool is used on an annual basis as part of an audit of all agencies, the USICM's checklist is one that case managers and auditors can keep with them as a quick reference guide. If at any time, an agency's assessment results in non-compliance

1D-3.	Street Outreach—Scope.	
	NOFO Section V.B.1.j.	

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

4. how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

Our street outreach team has grown substantially over the last year. Currently, we are finishing up a Street Outreach ESG-CV grant. We will begin the 2023-2024 ESG street outreach grant soon. This new funding will allow for the purchase of items to hand out to clients and will pay the team to continue to expand their efforts as the number of unsheltered homeless continues to grow. Each person on this team has recent lived experience and fully understands many of the barriers that individuals/families go through when they are experiencing homelessness. The team is diverse, ensuring that when encountering and serving an unsheltered individual, the person who will present with the least amount of trauma is available for the client. .

Yes, street outreach covers 100% of our geographic area.

Street outreach happens on a daily basis and our soon-to-be-hired HMIS coordinator will support their data needs, including improvements in the by-name list, on a daily basis.

The outreach team has created a map of all of the camps. This map is updated on a weekly basis as people move and as more camps are located. We have a hotline number for outreach so that people can receive services as quickly as possible. The information obtained from these calls is disseminated throughout the team and the closest outreach team will meet the client where they are at if it is safe. If not, they will meet at a nearby parking lot or park. The team provides "go" bags for each person that contains water, snacks and some essentials to hold them over until they can get to a day center or to an emergency shelter. On a weekly basis, the outreach team provides hot meals that are brought to the camps and given to anyone who needs it. All intakes are completed on site and referrals are made to emergency shelters, DV shelters or day centers. As the relationship builds, the client will be assessed for the by-name list and will be added to our case conferencing and coordinated entry case load. The clients are checked on throughout the week to ensure connection to both mainstream resources and other resources needed while staying in places not meant for human habitation. Referrals are made to the VA when the client is a veteran. Either SSVF or HUD-VASH programs assist the veteran in getting short and long term services both in housing but also in mental health and physical health care.

1D-4. Strategies to Prevent Criminalization of Homelessness.

NOFO Section V.B.1.k.

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes

4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		
	Engaging foundations	Yes	Yes

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.I.	

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	100	49

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section V.B.1.m.	

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1. The NWA CoC disseminates timely, relevant information on mainstream resources to our CoC member organizations for program participants through email updates and at General Membership and Community Collaboration meetings. The CoC facilitates presentations from a variety of mainstream service providers at CoC meetings to share information on available resources, eligibility requirements and access to services. Some CoC members provide office space to bring mainstream services, including Food Stamps, Medicaid, TANF, and SSI to program participants, eliminating the transportation barrier. Many CoC members provide mainstream services, including but not limited to, substance abuse, mental health, disability, food, legal aid, and transportation services. These agencies provide service updates to other members at CoC meetings. In addition, in the event of time-sensitive information, the NWA CoC disseminates updates at the request of members. The CoC systems analyst works with all of our housing agencies to collect and track accurate information on client's status with mainstream benefits in HMIS so that we can identify shortcomings and areas for improvement. HMIS data allows case managers and other front-line workers to direct clients to the mainstream resources that are available in the community.

2. The Community Clinic, a community healthcare organization and CoC member, provides on-site health services and program assistance in enrolling in health insurance through a mobile unit. The NWA CoC facilitates coordination between the Community Clinic and other CoC member agencies. CoC member agency case managers providing housing and homelessness services assist program participants with application and the effective use of Medicaid and other mainstream benefits. The Outreach team and the VA along with other area organizations promote and connect households to resources that promote and provide the assistance needed to help individuals sign up for SSI/SSDI. Outreach and \ SOAR certified staff assist in this process as well.

3. We support all street outreach team members in becoming SOAR certified. Individual agencies support their staff in these efforts.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section V.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

We have a new non-congregate shelter in our CoC, consisting of 20 pods suitable for individuals or couples. Other non-congregate initiatives have included renting a four-bedroom home and securing short-term hotel accommodations. However, due to the skyrocketing cost of rentals (the majority in our area are over FMR) and hotel accommodations (approximately \$80/night) in our service area, these strategies can only provide short-term emergency occupancy. Rent costs have increased 44% over the last three years. Income has not changed during this same time period. Per a study done by Fayetteville's long term housing analysis, there is an increase in population of 4% which translates to approximately 4,000 people a year. These are the severe barriers to non-congregate shelter in our area, but we are hopeful that our community will continue to invest in creative solutions such as the new pod shelter.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
	1. develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
	2. prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

As a result of COVID, our community continues to strengthen our partnerships with public health agencies, enabling us to respond to and prevent the spread of infectious diseases. We have developed the capacity to quickly pivot our homeless response system to effectively respond to and serve those experiencing or at risk of experiencing homelessness in our community when needed. Through collaboration, coordination, and partnership we assess, project, and plan for the likely impacts of cessation of key measures, including rental assistance, increasing capacity through non-congregate settings, and other policies on homelessness. Through communication and partnership, stronger links have been created between the homelessness assistance, healthcare, educational, childcare, child welfare, TANF and other mainstream support systems.

We continue to improve our system based on and deep partnerships with allied sectors, particularly healthcare system partners. Housing programs created systems for the unsheltered, including sanctioned camps where people can stay in the event of an outbreak. Community service health organizations can bring in their mobile units to provide medication and vaccinations as needed. Our outreach team also creates referrals to health providers such as community clinics and Mercy health. Providing clean blankets, socks and underwear also helps to control some of the illnesses brought on by weather related issues such as cold temperatures and rain.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC:	
	1. shared information related to public health measures and homelessness, and	
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- | | |
|----|---|
| 2. | facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants. |
|----|---|

(limit 2,500 characters)

The CoC relays new health guidance from the VA, the Health Department, HUD & other federal agencies regarding healthcare directly to the CoC via listserv & CoC meetings. Agencies are required to contact the Health Department if an outbreak of any kind were to occur. After that contact is made and if there are any instructions provided by the Health Department, the agency relays the outbreak information to the CoC, especially if it impacts the ability of the project to serve clients or if it changes their service delivery model. CoC will convene meetings, as necessary, to address the larger community needs. CoC leadership works closely with the Community Clinic, Mercy & Northwest Hospitals, the VA Hospital, & the Health Department to screen participant health to prevent the spread of infectious disease & provide vaccination clinics for COVID-19 boosters, the flu, HEP-A/B, & other diseases as needed. CoC agencies have access to the healthcare providers to connect individuals and households to access other medical care, including screening for TB & providing vaccines for those experiencing homelessness. Members from the Health Department and area clinics regularly attend CoC meetings.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
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	NOFO Section V.B.1.p.	
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	Describe in the field below how your CoC's coordinated entry system:	
--	--	--

- | | |
|----|---|
| 1. | covers 100 percent of your CoC's geographic area; |
| 2. | uses a standardized assessment process; and |
| 3. | is updated regularly using feedback received from participating projects and households that participated in coordinated entry. |

(limit 2,500 characters)

1. The CoC's coordinated entry system covers 100% of our geographic area through multiple regional access points positioned throughout the region. Our street outreach team covers all 4 counties in the CoC's geographic region, including the rural counties of Madison and Carroll. These locations are strategic in our region to be available where persons may present for one or more of their needs, including food, clothing, showers, and housing assistance. To create new and support existing regional access points, the CoC's CE collaborates with members and partners offering ongoing training.

2. The CoC Coordinated Entry system uses a standardized assessment process. Each client is given a triage assessment called the ViSPDAT, which generates a score indicating their level of vulnerability. This score allows the case conferencing team to determine the best route for the client, whether that be rapid rehousing or permanent supportive housing. The assessment also assists in determining disabilities or access to mainstream benefits such as social security, disability, etc. Clients that score an 8 or above are directed towards permanent supportive housing while a client under 8 is directed towards rapid rehousing or possibly some type of diversion. Diversion works well when there is family or community support in another area that we can assist the client to move to so that they can not only have organizational support but also have family/friend support during their time of need.

3. Because our street outreach team is made up of individuals with lived experience, both the team and clients give a great deal of feedback about barriers in the coordinated entry system. Thanks to their feedback, we now incorporate those who are being released from incarceration in case conferencing and planning so they receive services before they are released and become homeless.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
	1. reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
	2. prioritizes people most in need of assistance;	
	3. ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
	4. takes steps to reduce burdens on people using coordinated entry.	

(limit 2,500 characters)

To reach those who are least likely to apply for services, The NWA CoC seeks out churches, civic organizations and day centers to point them to connection points throughout the area. Churches, legal aid advocates, community partners are asked to share 211 connections with people who seek out their services. If a person decides that they want services, we ask that the organization working with the client get in touch with our street outreach team so that services can begin through case conferencing, assessments and outreach. Clients are assessed for vulnerability and triaged accordingly. As these individuals are harder to reach, typically outreach will not hand off the client but rather will work with them longer until a solid relationship is established between the client and the next service provider. These clients are eligible for permanent housing according to their vulnerability and the availability of permanent housing options. These individuals tend to be chronic and the hardest to house. More intense outreach and case management is started at the very beginning to ensure that they are housed as quickly as possible. We are always working to remove barriers and reduce the burden our coordinated entry process places on clients. Our street outreach workers are available to meet clients where they are and they are trained to proceed at the pace dictated by the client, providing accessibility modifications along the way.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

The NWA CoC actively markets housing and services in our area in an effort to reach all who are experiencing homelessness. All flyers and publications about services and events are sent through listserv and through our social media platforms. All services are promoted on our website. We also review all options during committee meetings and membership meetings to increase word-of-mouth spread of the information. All members of the CoC commit to public awareness activities including events put on by local agencies such as the VA's Domestic Violence month of activities. Our street outreach team promotes services through word-of-mouth with both potential clients and allies in the community, such as local churches and community organizations. Local groups such as For the Love food truck and a group from the University take the opportunity to use food as a method by which to talk about services open to the public. These meals are free and target the homeless populations in our area. During the meal, any announcements are made to all who attend.

All clients are given documents that explain their participant rights, including fair housing and civil rights.

The CoC has policies and procedures to identify impediments to fair housing. All clients are notified of their right to register concerns and complaints with the CoC, which will then follow standard procedures, up to and including reporting violations to HUD if necessary. Our board includes a legal aid attorney who reviews all complaints and supports clients through the process of reporting fair housing violations.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	06/30/2023

1D-10a.	Process for Analyzing Racial Disparities—Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

	Describe in the field below:
1.	your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

Our coordinated entry case management process includes analyses of outcomes for racial disparities. These front-line staff are charged with bringing these disparities to the DEI committee for review and response. They have discovered that people of color are more likely to answer the ViSPDAT honestly when the questions are asked by another person of color, creating a potential barrier to needed resources if we fail to offer a diverse front-line staff to support clients of color.

While we are currently gathering anecdotal evidence, we hope to have the capacity to create a more rigorous analysis process in the near future. In preparation, in June 2023, together with the Department of Social Work at the University of Arkansas, the CoC conducted a racial equity analysis of our community utilizing data from the local 2023 PIT and HIC counts, census.gov, and data from the University and the state about the population of Arkansas. Critical racial disparities were uncovered- the Black & Marshallese population experienced homelessness at a rate five times higher and poverty at a rate two times higher than the general population; the Hispanic population experienced poverty at a percentage rate two times higher in comparison to the general population; Black Veterans experienced homelessness at a rate five times higher than general population; and Other/Multi-Racial youth population experienced homelessness at a 40% increase in comparison to the percentage rate of the general population.

NW Arkansas has the highest density of Marshallese people in the world outside of the islands. Traditionally, the Marshallese community avoided accessing services by doubling up by finding ways to avoid becoming homeless. However, this year's racial equity analysis showed that the Marshallese population are experiencing homelessness at a staggering rate. There are a few barriers that can account for many of the homeless issues. For example, even though the Marshallese population are citizens, they do not qualify for SNAP benefits. Also, their health issues are increasing due to the aftereffects of the bombing of the Marshall Islands; research has shown that the Marshallese suffer from disproportionate incidence of chronic diseases, including obesity, cardiovascular disease, and diabetes. Language barriers prevent many from working and their rent continues to rise.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	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.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

In response to the findings of our June 2023 analysis of racial disparities and reports from our street outreach team, the CoC developed targeted strategies to address disparities, including empowering the Diversity, Equity, and Inclusion Committee to review and improve our programs, policies, and procedures and to develop a strategic plan. Other Strategies tasks include community education on the disparities in our homeless response system, and the disproportionate continued impact of COVID-19 on communities of color. The dissemination of information is provided through a quarterly DEI newsletter and training from the DEI for our CoC members. The DEI committee conducted a survey to determine the DEI training needs of our members and the results showed the need for training especially for case managers and front line workers. Other strategies executed include the evaluation of CES policies and procedures specifically around access and prioritization. Coordinated Entry Emergency Housing Vouchers have prioritization policies to address inequities. DEI is taking a leadership role in addressing structural racism through informational scaffolding to ensure that leaders and front-line staff are utilizing trainings as they come available. The CoC will continue promoting equitable access to services and equitable outcomes throughout all systems within the CoC and in collaboration with our community.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below:

1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and
2.	the tools your CoC uses.

(limit 2,500 characters)

The CoC's outreach team, in conjunction with coordinated entry, continues to use a data tracking tool we developed to be used alongside the by-name-list. This tool records race, age, gender, family structure and barriers that might not otherwise be seen through the ViSPDAT. In the event that there are multiple names with the same ViSPDAT score, the case conferencing tool is used to see if the individual meets the threshold of CoC priorities including 1. Is the individual a person of color (BIPOC), 2. Does the person identify with the LBGTQIA+ community, 3. Is the individual a veteran that does not qualify for VA housing services? As an individual or household is screened for a housing program or is connected with a housing organization, all notes are included in the database and on the assessment tool. Data continues to be collected and connections continue to be made through outreach and the coordinated entry team.

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

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

(limit 2,500 characters)

The Coc actively recruits those with lived experience of homelessness for volunteer opportunities, committee seats, and board roles. To do so, we advertise on social media at least quarterly and we engage in targeted outreach through diverse means, including relationship-building opportunities such as shared meals. The engagement team will encourage targeted individuals and families to view CoC opportunities as a platform for initiating and shepherding positive changes in the CoC and its effects on those experiencing homelessness. We seek to gather information from those with lived experience and once trust is built and interest is piqued, we place these stakeholders in formal positions that allow them to influence decision making and lead change.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	26	26
2.	Participate on CoC committees, subcommittees, or workgroups.	2	2
3.	Included in the development or revision of your CoC's local competition rating factors.	1	1

4.	Included in the development or revision of your CoC's coordinated entry process.	2	2
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1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

Multiple CoC organizations provide professional development and employment opportunities to individuals with lived experience of homelessness. Goodwill provides employment and professional development through a paid job-training program. Divaology provides life skills and educational development for individuals with lived experience and often works directly with the probation and parole officers to assist with finding educational and professional development opportunities for those who have been incarcerated. Workforce Development also provides paid educational and job skills training for individuals.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below:

1.	how your CoC routinely gathers feedback from people experiencing homelessness;
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)

Gathering feedback from people experiencing homelessness and from people who have received assistance through the CoC/ESG programs is a priority for the CoC. We have developed a feedback form that is sent to all individuals experiencing homelessness through Google Forms. Feedback is also requested and gathered as part of case management and through outreach sessions provided by outreach groups. Feedback is disseminated to the various committees such as DEI or the Executive Committee.

Each agency is responsible for looking over the feedback and changing their agency's policies if a change is needed. Feedback from the agencies is sent to the Executive director of the CoC to send out to other agencies as they adjust their programs as necessary.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	

	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:
1.	reforming zoning and land use policies to permit more housing development; and
2.	reducing regulatory barriers to housing development.

(limit 2,500 characters)

In 2022 & 2023, the Executive Director of the CoC participated in a workgroup to determine rezoning and policy changes for one of our major cities. This workgroup spent time determining if zoning changes could be made to allow for more properties to be built on existing land to increase housing stock. This group also looked at reducing regulatory barriers to housing development for the same city. This resulted in an allowance for more compact, innovative housing (smaller homes, tiny homes, cottages, etc.)to be built. The changes also allowed for more multi-level apartments, which provide space for the mid-range working class in our area. As the need for affordable housing continues to grow, we hope that more communities in the CoC will adopt similar changes.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	07/29/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition—meaning the date your CoC published the deadline.	07/29/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	
	You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

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

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes

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

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	135
2.	How many renewal projects did your CoC submit?	5
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

1. The CoC first evaluated the gap/needs analysis conducted in 2023 relative to the current available resources in the community to house individuals experiencing homelessness and compared these resources with the needs of the individuals on the BNL within the context of current environmental factors, COVID-19 pandemic impact and racial disparities. This analysis provided the basis for ranking and selecting projects to address the severity of needs and vulnerabilities. Needs identified for prioritized ranking included permanent supportive or rapid rehousing with utilization of healthcare resources, additional non-CoC funding resources, identification/removal of barriers faced by communities of color, inclusion of those with lived experience, and education/advocacy/engagement with policymakers and the criminal justice system. 2. This analysis is in alignment with FY 2023 NOFO funding priorities that were shared with the community and member organizations, prior to release of the local competition. The data examined included demographics (race, age, gender) of those active on the BNL in addition to responses on the VI-SPDAT assessments as well as chronicity (including disability status), length of time homeless and sheltered status, health care services, measures of safety, including self-report of human trafficking and domestic violence victimization of the individual and the CoC's Racial Equity Analysis. 3. While the data of the individual's assessments provided a clear picture of the barriers that an individual faces, state and local data also exposed barriers for the entire homeless population. For example, Fayetteville's long term housing report indicated that to keep up with the population, it will take building 1,843 units a year to meet the 4% growth (4,000 people per year). Rental amounts have increased 44% over the last 21 years while income has not met that same percentage of growth. For a person who qualifies as low income they must make a minimum of \$17.72 an hour just to meet the costs of housing. For those that are unable to work and receive social security, their monthly payments are closer to \$888 a month which is \$5.55 an hour equivalent. This data continues to point to the issue of not being able to house people quickly thus increasing the length of time homeless while also adding to barriers due to trauma of being outside, racial disparities and social constraints. 4. Bonus points were awarded to projects addressing these priorities.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	

Describe in the field below:

1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.

(limit 2,500 characters)

Input was obtained from the CoC's Diversity, Equity, and Inclusion (DEI) Committee in determining the rating factors used to review projects. The DEI Committee is charged with coordinating a community response to advance equitable and inclusive solutions to close disparities in our homeless response system and is composed of individuals with lived experience and of different races, specifically representative of those over-represented in our local homelessness population. DEI Committee objectives outlined in the CoC's strategic plan include information gathering of community and system diversity, conducting an annual equity analysis, engaging diverse voices through hosting a listening session, and assessing and facilitating DEI education and training needs of CoC members.

2. The CoC's Rank and Review Committee is charged with the development and execution of the review, selection, rating, and ranking process for the local NOFO, with board approval. The Committee includes five voluntary and unbiased persons from the community including representatives of different races.

3. Projects were rated and ranked on promoting racial equity with bonus points awarded for projects demonstrating the identification and/or removal of barriers to participation faced by persons of different races and ethnicities, including those with lived experience.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	

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

(limit 2,500 characters)

The Rank and Review/Monitoring and Evaluation Committee annually monitors each CoC grant recipient and completes a report to the CoC Board. The findings of the monitoring and evaluation report are used by the committee to determine whether a recommendation is made to the CoC Board to reduce or reallocate a project's funding. The committee considers fiscal responsibility, compliance with program guidelines, performance, outcomes and use of best practices when making a recommendation. The Board considers the Monitoring and Evaluation Committee's recommendations for renewed, reduced or reallocated funding. Each project is evaluated based on the extent to which the project is necessary and addresses the CoC's priorities identified in the NWA CoC Strategic Plan to End Homelessness and funding priority listing. Criteria considered in a decision to renew, reduce or reallocate a project/project type include: Alignment with the NWA CoC Strategic Plan to End Homelessness and funding priorities; alignment with federal and state goals to end homelessness; rank and review committee's report findings including fiscal responsibility, compliance with program guidelines and performance; HMIS Data Quality Report Card; meeting the CoC Project Performance Outcome Standards; consideration of unspent CoC funds; consideration of impact on the Consolidated Application score; and the project's compliance with the CoC's Policies and Procedures. If the Board endorses the recommendation to reduce or reallocate funding, the grantee is notified by the Board and a notice of funding availability (NOFA) will be widely distributed in the community to redistribute the reallocated funds. The details of the NWA CoC NOFO are based on the current HUD CoC Competition NOFO.

- 2 No low-performing or less-needed projects were identified this year..
 3. There were no reallocations of low-performing or less needed projects during this year's local competition.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/12/2023

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	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. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/12/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank—if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/25/2023
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/25/2023
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2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Enter the name of the HMIS Vendor your CoC is currently using.	Wellsky
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Statewide
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/27/2023
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2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;	
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2022 HMIS Data Standards; and	

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

(limit 2,500 characters)

1.Both the NWA CoC and the HMIS lead through Pulaski County understand the importance of ensuring DV housing. The two domestic violence service programs in the CoC region, Peace at Home Family Shelter and the Northwest Arkansas Women's Shelter, are members of the CoC and actively participate in CoC efforts and activities to accomplish our mission of ending homelessness in Northwest Arkansas. Both programs utilize a HUD/HMIS comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards. Peace at Home Family Shelter utilizes the Osnium software and the Northwest Arkansas Women's Shelter utilizes Community Solution Apricot software for data management. Both domestic violence programs agree to submit de-identified aggregated system performance measures data to the CoC and HMIS lead. 2.Peace at Home, a DV housing and service provider in the CoC utilizes Osnium, which is a FY 2022 HMIS Data Standards HUD-compliant comparable database. 3.The NWA CoC is compliant with the 2022 HMIS Data Standards.

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

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

Enter 2023 HIC and HMIS data in the chart below by project type:

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	200	43	146	92.99%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	45	15	30	100.00%
4. Rapid Re-Housing (RRH) beds	49	6	43	100.00%
5. Permanent Supportive Housing (PSH) beds	203	0	90	44.33%
6. Other Permanent Housing (OPH) beds	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 V.B.3.c.

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:

- steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
- how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1.A total of 168 beds listed in our region are not included as beds with HMIS coverage (156 VASH vouchers (PSH) and 12 shelter beds (ES) 6 contracted by the VA Coalition). VA contracted agencies in our region do not contribute to the local HMIS data system for tracking clients, but their HIC numbers are included, causing our coverage rates to appear lower than they actually are. Inclusion of these beds in the calculation increases the CoC's bed coverage rate to 92.8% PSH and 100% in ES. The CoC is in conversation with our local Veteran's Administration about their plan for HMIS implementation in the near future. To increase the utilization beds in PSH, we will continue to work with the VA to input the HMIS data or to assist us in providing a bridge of data from the HOME VA database to the HMIS database.

The CoC's goal is to continue to maintain these rates above 85% over the next 12 months with strategies: 1) Provide education to current/potential HMIS participating agencies on the use of data to generating community-wide data to inform program planning 2) Engage & encourage HMIS participation with non-HMIS participating shelter/housing service agencies sharing the benefits of HMIS participation- scalable systems, information and resource sharing, funding leverage, and collaboration among service providers 3) Explore technology funding resources to support participation in HMIS 4) Facilitate training for HMIS users and administrators to promote use of technology.

2. The NWA CoC is participating in a joint task force with the CoCs from across the state to establish better shared understanding and plan to maintain a more comprehensive data set through HMIS. Using ESG funds, the NWA CoC has hired a part-time HMIS coordinator for our region. In the coming year, this position will assist us in more accurately tracking bed utilization by ensuring that all beds are accounted for in HMIS.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	
Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?		Yes

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Enter the date your CoC conducted its 2023 PIT count.	01/27/2023
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2B-2.	PIT Count Data—HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/27/2023
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2B-3.	PIT Count—Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.

(limit 2,500 characters)

1. In planning for our PIT, the CoC solicits input from the 10 youth-serving organizations (including emergency family shelters, emergency and transitional DV family shelters, and school districts) and from individuals who work with unaccompanied youth. We provided training to providers (and community volunteers) on the PIT (and related HIC) and these included multiple youth homeless serving organizations.
2. We contact school social workers, law enforcement, and local government in communities throughout our four counties for guidance on locations. Our street team is also a valuable source of information. CoC members and partners include youth-serving organizations, several of whom provided volunteers for the PIT count.
3. No youth experiencing homelessness participated as counters this year.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
	3. describe how the changes affected your CoC's PIT count results; or	
	4. state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

1. This year, we made the following changes regarding the sheltered count: 1) began using HMIS data to assist in data validation, deduplication, and quality, 2) more closely coordinated with shelter management to increase the percentage of guests counted, 3) changed day of count from a Thursday to a Friday to increase the number of volunteers, 4) redesigned our observation form to discourage inappropriate usage and increase quality of data when used, and 5) improved items regarding disabling conditions (improving the establishment of chronicity).
2. This year, we made the following changes regarding the unsheltered count: 1) Closer coordination with day centers, 2) changed day of count to increase volunteers, 3) surveyed local government, law enforcement, and schools to identify sites, 4) involved two outreach programs in counting, 5) increased the number of teams conducting unsheltered counting, 6) decreased officer escorted enumeration, 7) coordinated with the owner of a property that allowed unhoused individuals to camp, 8) involved unhoused individuals in enumeration, 9) redesigned observation form to discourage inappropriate usage and improve quality when used, and 10) improved assessment of chronic by improving disability items.
3. While we assume a true increase in the number of individuals experiencing homelessness, these changes increased the overall number of counted individuals as well as key groups (unsheltered and chronic). We also decreased our reliance on observation forms and increased the % of full interviews.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless--Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
2.	describe your CoC's strategies to address individuals and families at risk of becoming homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

An environmental scan with emphasis on the continued impact of COVID-19, analyzed data from the BNL, and feedback from members and community partners was also completed to determine causes of first-time homelessness. The top risk factors in our region were identified as: lack of affordable housing, unemployment, poverty, mental illness and the lack of needed services, and substance abuse and the lack of needed services. Inflation is putting more individuals and families at risk of first-time homelessness. These risk factors are centered at all levels, from case conferencing through committee and board meetings.

2. CoC strategies include growing diversion practices to help immediately identify alternate housing, arrangements, connections with services, and financial assistance to resolve housing crises; Use of data on the characteristics of households in shelter to develop criteria for targeted prevention assistance; Identification and leverage of all relevant mainstream services; Improved Discharge planning for people exiting systems of care and institutions; Incorporation of provider-level policies and procedures aimed at promoting long term housing stability; Promoting landlord/provider communication about program participants who are at risk of losing their housing and support for landlords to resolve housing or lease issues before they escalate. For families who are at risk of homelessness, our ESG homeless prevention grant can be of assistance, but there are barriers to maximizing its use.. Barriers include the income requirement (not being at 30% AMI or below), landlords who are not willing to work with our grantees, refusing to accept payments from o sources besides the tenant, and the increase in overall expenses that families are experiencing. Our goal is to supplement through benevolence (increased rental assistance through churches and civil groups), ESG HP grant funds, and City Block grant funds. In addition to rental assistance, housing providers and health providers provide case management to support individuals and families before they face eviction.

3. The Northwest Arkansas Continuum of Care's executive director and data analyst are responsible for overseeing our 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.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	

In the field below:

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

(limit 2,500 characters)

The NWA CoC's strategy entails a three-prong approach:

Outreach services are provided proactively to those who are newly homeless, quickly connecting them to existing re-housing services before their living situations worsen and their time spent homeless lengthens. Outreach workers are trained in the "housing problem solving" approach to assess and address the barriers the person faces to accessing housing quickly. Outreach workers utilize flexible funds and utilize community resources. The organization "Diva and Dudes Community Outreach" plays the lead role in the outreach portion of the strategy.

Emergency shelter programming prioritizes newly homeless people staying at the shelter for intensive, housing-focused intervention. Shelter staff utilize "housing problem solving" techniques to connect people to potential living situations which may exist in their own support network. Shelter staff are abreast of low-cost, low-barrier housing options in the area. Shelter staff work on housing, transportation, and employment goals concurrently with individuals to increase the likelihood of the person achieving stability in their home. The organization "Salvation Army of Northwest Arkansas" plays the lead role in the emergency shelter portion of the strategy.

Supportive shelter is the CoC's intervention which prioritizes services for individuals with the longest length of homelessness in our community. The CE Committee identifies those on the "by name list" with the longest lengths of time homeless and refers them to the Supportive Shelter. Supportive shelter offers a low-barrier shelter model with more robust onsite support services to help people with health, mental health, and behavioral health support needs succeed in shelter and be able to utilize re-housing services. The Housing specialist works hands-on to liaise with crisis stabilization services, health care and mental health care providers, and permanent supportive housing programs. This intervention reduces the overall length of homelessness in the CoC by targeting the smaller group of people whose length of homelessness is over one year. The organization "New Beginnings NWA" plays the lead role in the supportive shelter portion of the strategy.

Our CE committee utilizes the by-name list to identify individuals and families with the longest lengths of time homeless.

3. The NWA CoC's Executive Director oversees this strategy.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section V.B.5.d.	
	In the field below:	
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;	

2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

The CoC prioritized exits to permanent housing.. Strategies for increasing exits to permanent housing vary by type of program.

For emergency shelters or those that work with outreach, the CoC's strategy begins with an attempt at diversion. If the person has family or community support in another area, we help them get back to their family. With the rising cost of rent, financial support may overcome a barrier and allow the person who is experiencing homelessness to sleep on a family member's couch. Another strategy that the CoC has started using is shared housing. A housing provider holds the lease and makes sure that all of the payments are made while the tenants contribute what they can. The provider also provides case management and employment assistance through job search to assist the person in becoming self-sufficient.

For those in transitional housing or rapid rehousing, case management can assist the client in determining what resources they need to achieve stable housing and how to get them, including SNAP, insurance, social security and/or disability. Case management can also assist clients in finding and securing employment. Because for both transitional and rapid rehousing clients, monetary support will eventually end, training in budgeting and saving is a vital strategy..

2. Strategies the CoC employs to increase successful exits to/retention in permanent housing destinations: Expand the number of PH units available through outreach to new landlords and cultivating long-term relationships with owners and managers. Replicate proven landlord- recruitment strategies, which draw on effective marketing and engagement efforts. Offer landlord payments or damage insurance funds. Partner with local PHAs to prioritize housing subsidies for people who are chronically homeless and create preferences for people experiencing homelessness. Support people in PH by linking mainstream healthcare, mental health, employment, or family services to housing subsidies. Replicate strategies using Medicaid and TANF to scale PH interventions for individuals/families; Establish funding priorities to fill gaps & expand high performing permanent housing projects; Provide trainings and technical assistance on re-housing best practices.

3. The NWA Continuum of Care is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	

In the field below:

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

(limit 2,500 characters)

1. When individuals and families return to homelessness, their status on the by-name list changes from "housed" to "active." This status change alerts for the case conferencing team to prioritize them and seek out resources to attempt to rehouse as quickly as possible. For those who are incarcerated and may become homeless again upon release, the local CIT (Crisis Intervention Team) runs weekly reports for those marked "inactive" on the by-name list who will be released from our county jails. A member of the outreach team will video chat with the client to determine housing needs upon release. Diversion strategies are used if appropriate. If diversion is not a solution, the client will be moved back to active on the by-name list and be added to the case conferencing discussions.

2. Our strategies to decrease rate of returns to homelessness include: Right-size assistance through maximizing the number of households placed in housing using the housing barriers assessments to match households with the most appropriate level of assistance; Implement a phased assessment process which identifies households who are eligible for diversion resources at all Coordinated Entry Regional Access Points; Use data on the characteristics of households in shelter to develop criteria for targeting prevention assistance. Identify all relevant services available in the community to determine what prevention assistance should be provided by the homeless system and where mainstream resources should be leveraged. Build strong partnerships with mainstream providers and have them help identify households at risk, facilitate referrals to and from the homeless system, support participants in permanent housing, and improve discharge planning for people exiting systems of care and institutions; Housing-Focused Case Management barrier assessment to housing and support households, or link them to providers, to address barriers to permanent housing. Provide support to create a housing plan, resolve rental screening barriers, search for housing, negotiate lease terms, and mediate family conflict. Promote long-term stability by helping people who have been re-housed to connect with community-based resources and employment, understand their tenant rights and responsibilities, and develop plans for responding to future housing crises.³The CoC's executive director and data analyst are responsible for overseeing our strategy for reducing the rate by which someone returns to homelessness.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	
	In the field below:	
1.	describe your CoC's strategy to access employment cash sources;	
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.	

(limit 2,500 characters)

The CoC's strategy to increase employment income includes the creation of an Employment & Income Subcommittee with the mission to increase the employment of individuals experiencing homelessness. The committee reviews the past 3 years of performance, sets employment goals for the next 3 years, and monitors progress monthly for the homeless assistance system, as well as each individual CoC and non-CoC funded projects in the jurisdiction. They also identify and provide technical assistance, training, and consultation to the system and provider community. Within our CoC, there are several employment training programs, including Goodwill and Workforce Development, which provide paid job training to qualifying homeless individuals.

2. CoC programs work with mainstream employment agencies to connect program participants with employment opportunities and workforce skills development. First Employment, Goodwill, and Workforce Development all partner with case managers in CoC agencies to ensure clients are receiving tailored employment training that will result in increased employment opportunities and income. These programs offer hard skills and soft skills training in sectors that are active in our community.

3. The NWA Continuum of Care is responsible for overseeing your CoC's strategy to increase income from employment.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section V.B.5.f.	
	In the field below:	
	1. describe your CoC's strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 characters)

When a client has completed the assessment for vulnerability, we assess what mainstream benefits they have or still need. If a client does not have non-cash employment income, our case managers help qualifying clients apply for these services and to help them gain all of the documents needed for application purposes. The CoC also works with housing agencies and emergency shelters to establish and develop partnerships with mainstream organizations who provide SSI, SSDI, SSA, Food Stamp, and TANF services to promote access and application assistance for program participants. Street Outreach team members are encouraged to become SOAR certified. The CoC hosts trainings for CoC members on how to access non-employment, cash benefits. We market these opportunities to all clients when they receive any services and hope we will be allowed to support them in the pursuit of non-employment income..

Overall performance is overseen by the ED of the CoC.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

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

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

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

Project Name	Project Type	Rank Number	Leverage Type
Peace at Home Pro...	PH-RRH	6	Housing

3A-3. List of Projects.

1. What is the name of the new project? Peace at Home Project Restore

2. Enter the Unique Entity Identifier (UEI): LN3EUDU177W3

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your CoC's Priority Listing: 6

5. Select the type of leverage: Housing

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component 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.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

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

(limit 2,500 characters)

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

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

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

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

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.I.(1)(c)	

1.	Enter the number of survivors that need housing or services:	27,747
2.	Enter the number of survivors your CoC is currently serving:	1,887
3.	Unmet Need:	25,860

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

(limit 2,500 characters)

We contacted the Arkansas Crime Information Center to determine the number of Domestic Violence incidents in Washington, Benton, Madison, and Carroll counties in 2022. There were 22,105 arrests made as a crime against a person/domestic violence. The CDC's Intimate Partner Violence Survey showed an incident rate of 27,747 for Northwest Arkansas. This is the number we used for Element 1. Please be aware this number is based solely on the times when the violence escalated to the point that police were called - which is not all-encompassing. Moreover, many DV survivors utilize personal resources to get the help and support they need - and may not be seeking shelter services and may avoid contacting the police. We next examined what is currently happening with our local shelters.

CDC's Intimate Partner Violence Survey, which states that 8.9% of women and 4.9% of men will experience adverse impacts from domestic violence in a given year. By using the adult population of Northwest Arkansas (about 402,125 split evenly m/f), it would be 27,747 survivors. The equation for this being –

Number of Survivors In Need = (Annual Incidence Rate w/ Adverse Impact for Women*Adult Women Population) + (Annual Incidence Rate w/ Adverse Impact for Men*Adult Men Population) = 17,895 and 9,852 = 27,747. From the same report, the number of people in need of housing support as a result of domestic violence in their lifetime for Northwest Arkansas is closer to 13,872. 5.5% for women and 1.4% for men.

Due to confidentiality, we do not know how many of these calls are repeat calls for the same incident. To calculate our estimate, we relied on data collected by the Arkansas Crime Information Center (ACIC). ACIC is the state agency responsible for providing information technology services to law enforcement and other criminal justice agencies in Arkansas.

We are seeking three grants in order to better meet the needs of all survivors. Barriers in meeting the needs of all survivors include capacity issues at victim service and non-victim service organizations, an extremely competitive rental market in our region,, and a culture of silence about domestic violence that prevents individuals from seeking support.

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

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

Applicant Name
Peace at Home
Hub of Hope
Legal Aid

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

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

1.	Applicant Name	Peace at Home
2.	Project Name	Home Restored
3.	Project Rank on the Priority Listing	6
4.	Unique Entity Identifier (UEI)	LN3EUDU177W3
5.	Amount Requested	\$52,348
6.	Rate of Housing Placement of DV Survivors-Percentage	16%
7.	Rate of Housing Retention of DV Survivors-Percentage	90%

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

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

Last year we were able to support 120 clients with some form of housing assistance (non-shelter) and we had 764 requests for housing assistance (non-shelter). This rate is calculated based on the housing assistance call log and records of housing financial assistance in our database.

For rate of housing retention –For that program in 2022
Had a destination at exit - 82%
Of those with Exit
Return to Homelessness (emergency shelter) - 10.5%
Stable Permanent Housing - 42%
Moving in with friends or family - 47%

The data source for all of this is the HMIS comparable database we use and the housing assistance call log.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;	
3.	determined which supportive services survivors needed;	
4.	connected survivors to supportive services; and	
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

Last year, Peace at Home Family Shelter received 764 requests for housing support or assistance, but we were only able to provide short- and medium-term housing assistance to 120 households, approximately 15.7% of requests for housing support. Last year, 72% of exits from the medium-term housing assistance program at Peace at Home had completed the program, retaining housing over the 24-month period. Of known exit destinations, 78% of clients avoided a return to homelessness. This data comes from the HMIS comparable database used by Peace at Home, WS and the housing assistance call log record. Without additional funds, the percentage served will likely decrease in futures years as time limited sources of funding become unavailable. It is critical to provide additional housing support to survivors of domestic violence in our area who need it. "Peace at Home helps connect survivors of domestic violence receiving housing assistance to appropriate supportive services both within Peace at Home and with other agencies in the community. The advocate working with a client will talk to them about their unique needs and goals and discuss the potential supports that are available to them, including: legal services, counseling, transportation, medical advocacy, clothing vouchers, etc. All services are voluntary, victim-centered, and free of charge for clients. Peace at Home will use a Housing First model for the proposed project in order to quickly help survivors move into safe housing in the community.

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

(limit 2,500 characters)

Survivor-Centered Supports – Safety and Confidentiality
 Peace at Home engages in ongoing safety planning with all clients and ensures that staff members are trained in understanding domestic violence lethality and recommended safety precautions/preparedness plans. All Peace at Home staff members are required to go through basic advocacy training provided by the Arkansas Coalition Against Domestic Violence which includes extensive training on safety planning with survivors of domestic violence. Intakes and case management conversations with survivors of domestic violence are always held in a private space to ensure confidentiality. Our survivor-driven programs mean that the survivor themselves decide what their needs are for safe permanent housing. By operating a housing assistance program that supports survivors in finding housing in the neighborhoods and areas they would like to live in through financial rental assistance, the Home Restored program has the maximum amount of geographic flexibility to ensure survivor safety. For Peace at Home's emergency shelter, the location is kept confidential, and no one is allowed into the Peace at Home building without signing a confidentiality agreement. Security cameras and 24-hour staff help monitor the building to help keep survivors in shelter safe.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects. NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.	

(limit 2,500 characters)

Peace at Home regularly evaluates the effectiveness of its programs at ensuring the safety of DV survivors by both providing current and exiting clients opportunities to give feedback on the services and support they received and by regularly receiving updates on national best practices for program designs and needs from the Arkansas Coalition Against Domestic Violence, National Coalition Against Domestic Violence, National Network to End Domestic Violence. During the course of the proposed project, Peace at Home hopes to improve safety of survivors by offering more medium-term assistance to clients than has been available in the past.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects. NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by: 1. prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs; 2. establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	

3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

Survivor-Centered Supports – Trauma Informed Advocacy
 Peace at Home's approach is rooted in trauma-informed empowerment, recognizing the competence of domestic violence survivors, and respecting their autonomy in decision-making. We equip clients with comprehensive information and community resources, allowing them to set their own goals and make informed choices. Peace at Home programs follow the best practices in trauma-informed survivor centered approaches state and national organizations. All staff members receive training on the topic of trauma-informed services. Peace at Home's Home Restored program specifically engages in trauma informed survivor centered supports by prioritizing client choice in permanent housing and eliminating barriers to rapid assistance, minimizing power imbalances by eliminating unnecessary rules, providing clients information about the dynamics of domestic violence on an individual basis and through peer-to-peer support groups, strengthening the parent/child bond through appropriate supports and advocacy, and conducting all services through a culturally competent lens that emphasizes the individual strengths of the survivor.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.	

(limit 5,000 characters)

Addressing Needs

Peace at Home's programs are specifically designed to meet the unique needs of survivors of domestic violence. In addition to financial rental assistance and financial assistance for housing needs as well as supportive services to support permanent housing, Peace at Home has multiple programs within our organization that address the complex safety needs of survivors, including: Legal Services Program – providing legal representation and legal advocacy for orders of protection, divorces, child custody, and other legal matters related to the experience of domestic violence.

Counseling – professional trauma-informed counseling for survivors of domestic violence and their children in both group and individual sessions.

Medical Advocacy – financial assistance, education, and advocacy to support the medical needs of survivors of domestic violence.

Additionally, advocates provide support accessing mainstream benefits, childcare, job training, credit repair, and drug/alcohol treatment as appropriate.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(e)	

Describe in the field below examples of how the new project(s) will:

1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish 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.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

The new project from Peace at Home will prioritize placement and stabilization in permanent housing consistent with participants wishes and stated needs by creating an atmosphere where the advocate supports and provides resources, but the client is the key decision maker in all things. As a tenant based rental housing assistance program, clients will choose where their housing is located and the type of housing that best fits their needs with support from their advocate. The program does not use any punitive interventions and clients will not be denied access to supports because of their choices about how to engage with Peace at Home and what supports to participate in. Peace at Home operates on an empowerment model that emphasizes the strengths of all clients. Clients work toward their own individualized and self-asserted goals. Staff have all received extensive training on trauma-informed care as well as communicating about domestic violence and trauma to clients in an appropriate manner that best fits the clients needs, which could include support group conversations about life after abuse or written materials on the impacts of trauma. Staff members receive ongoing professional development including trainings in the past year on understanding and working with veterans and transgender individuals. Clients are provided with peer support groups offered weekly in English and Spanish, all voluntary. Additionally, survivors who are parents often receive support from Peace at Home's in-house legal services program for divorces and child custody cases or the counseling program that can work on helping strengthen the parent-child bond after violence.

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

(limit 2,500 characters)

Including Lived Experience

To provide effective programming for survivors of domestic violence experiencing homelessness that promotes the dignity of the individual, it is vital that the voices of those who have personal lived experience with domestic violence and homelessness are represented in the organizational leadership and program development. Peace at Home's board of directors, senior leadership, victim service advocates, and community volunteers all include individuals who have experienced domestic violence and its impoverishing impacts, including homelessness. Additionally, Peace at Home has a feedback survey in place for clients at the end of service so that the thoughts and perspectives of survivors accessing services can provide feedback on program design and effectiveness.

Efforts to prevent and end homelessness for survivors of domestic violence should consider and address racial inequities to achieve positive outcomes for all persons experiencing homelessness. Black and Indigenous women are disproportionately impacted by domestic violence and face increased barriers accessing support due to systemic racism. To work towards racial equity for survivors of domestic violence, Peace at Home's programs view services through the lens of intersectionality by recognizing that all survivors have unique identities and strengths and that multiple systemic prejudices can be in play that negatively impact a survivor in their efforts to maintain permanent housing. Specific for housing assistance, Victim Service Advocates engaged in housing support are aware of housing discrimination regulations to help advocate for and with clients when they face discrimination in their housing search.

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

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

1.	Applicant Name	Hub of Hope
2.	Project Name	RRH Project
3.	Project Rank on the Priority Listing	11
4.	Unique Entity Identifier (UEI)	W3V8NDVHWZF4
5.	Amount Requested	\$51,816
6.	Rate of Housing Placement of DV Survivors—Percentage	100%
7.	Rate of Housing Retention of DV Survivors—Percentage	75%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:	
	1. how the project applicant calculated both rates;	
	2. whether the rates accounts for exits to safe housing destinations; and	
	3. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

(limit 1,500 characters)

Hub of HOPE has been honored to journey with over 200 victims of trafficking over the past 6 years. In that time, we have been able to work collaboratively with a partner agency to provide 12 unsheltered homeless individual/families with permanent housing and the services needed to make that housing sustainable.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project applicant:	
	1. ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
	2. prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;	
	3. determined which supportive services survivors needed;	
	4. connected survivors to supportive services; and	
	5. moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

Through Hub of HOPE's Rapid Rehousing project, we will use our expertise in working with vulnerable, unsheltered, homeless individuals/families to connect to resources for housing, case management, trauma care, medical services and with the community at large. The Rapid Rehousing project will be used to house up to 5 individuals/families for a 12-month period where at least one person in the household has been identified as homeless and who has experienced human trafficking or who are vulnerable to human trafficking due to their unsheltered homelessness. Number of Proposed Units - The number of housing units for this rapid rehousing project will be 5 total units - three, 2-bedroom units and two, 1 bedroom units with a FMR (Fair Market Rent) of \$764 and \$930 a month, respectively. Identification and Screening of Potential Clients - All individuals/families with potential for housing through this project will be identified and screened using Coordinated Entry procedures as outlined by the CoC. "Coordinated entry is an important process through which people experiencing or at risk of experiencing homelessness can access the crisis response system in a streamlined way, have their strengths and needs quickly assessed, and quickly connect to appropriate, tailored housing and mainstream services within the community or designated region." - Department of Housing and Urban Development. Individuals/Families experiencing a housing crisis connect in different ways with Hub of HOPE. Access comes through the National Human Trafficking Hotline, our Hub of HOPE HELPLine, referral from other agencies, and/or through our outreach programs. After the person accesses our services, we meet with them for assessment to better understand their needs, including housing, vulnerability and preferences. Through coordinated entry and case conferencing, each person will be entered onto the NWA by-name list. The vulnerability assessment reveals the barriers and needs which will be used to determine the type of housing and resources needed. If a person does not want to be entered onto the NWA by-name list due to confidentiality surrounding their human trafficking of HOPE has been honored to journey with over 200 victims of trafficking over the past 6 years. In that time, we have been able to work collaboratively with a partner agency to provide 12 unsheltered homeless individual/families with permanent housing and the services needed to make that housing sustainable

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

(limit 2,500 characters)

Safety and Confidentiality - Hub of HOPE staff, board members and volunteers sign confidentiality agreements upon initial engagement with our program. Hub of HOPE conducts a background check on all staff, volunteers and board members who work in any capacity with Hub of HOPE clients to ensure the safety of our clients. During the intake process, Hub of HOPE clients sign an agreement of the understanding of our confidentiality policy in regards to their protection.

A detailed "Program, Policy, and Procedures" manual is made available to all staff, volunteers and board members which defines how we work with clients to ensure safety of all who engage with Hub of HOPE. Conversations with Hub of HOPE clients are held in private spaces to further ensure confidentiality.

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

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

(limit 2,500 characters)

Improving System Performance - Hub of HOPE's Rapid Rehousing project will measure the length of homelessness with our clients, defining how many times clients have returned to homelessness, and whether or not they are in a first-time occurrence of homelessness. It is understood that an intentional focus on stabilizing clients, successfully finding, and retaining housing, and job and income growth are all an integral part of seeing an end to homelessness.

SUPPORTIVE SERVICES: Each client that is part of Hub of HOPE's Rapid Rehousing project will have connection with a case manager who will assist them in identifying needs and connect them to resources. Each client also has access to the programs available at Hub of HOPE which include survivor support groups, life skills classes, therapeutic art, and more. With the provision of these supportive services a client is likely to be more successful in remaining housed and live self-sustainably.

Case Management - Through strong case management and connection to Hub of HOPE advocates, clients will have assistance with connection to mainstream resources, financial assistance for costs related to housing and other identified barriers and needs. Case managers and advocates will provide trauma-informed care directly related to the identified needs that victims of human trafficking face. Hub of HOPE's case management will be on-going with emphasis on a client centered approach, providing clients with choices and the ability for them to set goals that would promote success in sustaining their housing. Case management can include assisting with accessibility to sustainable food resources, clothing, medical needs, retrieval of stolen documentation, legal services, insurance, trauma-informed counseling, transportation, job skill training, job acquisition, and education. Case managers will also provide assistance in establishing financial stability by assisting with budget creation, credit recovery, and creating a savings plan, if desired by the client. Case managers are overseen by the executive director and are provided supervision formally on a weekly basis and informally multiple times per week. Safety is of utmost importance and truly is a priority.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
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7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.
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(limit 5,000 characters)

Housing First Approach - There are risk factors that have been identified for human trafficking including recent migration/relocation, substance use, unstable housing, runaway/homeless youth, and mental health concerns. The data suggests that homelessness is a key risk factor for trafficking and if unmet, has negative outcomes for victims. The social determinants of "unstable housing" further highlight the connection between indicators and risk factors for becoming a victim of human trafficking.

As defined in the "housing first" approach, the Hub of HOPE's Rapid Rehousing project will prioritize providing housing to clients who are identified as unsheltered homeless. It is understood that this will provide a focus on the priority of "ending homelessness for all persons" and become a base upon which further focus on personal goals to reach self-sustainability can be pursued. As much as possible, clients will be placed in housing as quickly as housing is identified and the proper documentation and approval from the property owner is established. The project will focus on providing client choice and supportive services to restore dignity and success in remaining housed and free from the vulnerability that brings on the advances of traffickers.

Case Management - Through strong case management and connection to Hub of HOPE advocates, clients will have assistance with connection to mainstream resources, financial assistance for costs related to housing and other identified barriers and needs. Case managers and advocates will provide trauma-informed care directly related to the identified needs that victims of human trafficking face. Hub of HOPE's case management will be on-going with emphasis on a client centered approach, providing clients with choices and the ability for them to set goals that would promote success in sustaining their housing. Case management can include assisting with accessibility to sustainable food resources, clothing, medical needs, retrieval of stolen documentation, legal services, insurance, trauma-informed counseling, transportation, job skill training, job acquisition, and education. Case managers will also provide assistance in establishing financial stability by assisting with budget creation, credit recovery, and creating a savings plan, if desired by the client. Case managers are overseen by the executive director and are provided supervision formally on a weekly basis and informally multiple times per week.

Advancing racial equity - The Office on Trafficking in Persons states, "it is evident that inequity is deeply connected to the causes and risk factors for human trafficking, including disproportionate impact of housing and economic instability, interpersonal violence and intergenerational trauma, displacement and disconnection from support, and discrimination." We understand the truth of this statement and recognize that the current demographic makeup of those we serve does not fully reflect the diversity we see in our region. To promote equity with those we serve, Hub of HOPE conducts outreach within areas of communities where inequity is statistically high and where survivors face barriers in connecting to resources. Outreach takes place monthly in substance use disorder clinics, incarcerated populations, and behavioral health agencies. We work to develop relationships in diverse, underserved and rural communities to better capture how they are affected by homelessness in regard to human trafficking and how we can address any gaps in access to services that may be present.

Because of bias and discrimination in housing and jobs, traffickers find an open door to exploit the vulnerability of LGBTQ+ individuals by pretending to be the answer to filling their needs. The Hub of HOPE's Rapid Rehousing project will provide LGBTQ+ community members with connection to housing and other

supportive services.

Engaging persons with lived experience - Hub of HOPE is honored to serve alongside strong human trafficking survivors. We have board members, volunteers, and victim service advocates who have lived experiences of trafficking and homelessness. Their voices and leadership promote a healthy hope for other survivors who are in the beginning stages of escaping a life of trafficking and connecting to resources for sustainable housing and other needs. Hub of HOPE recognizes that persons with a lived experience of human trafficking and homelessness connect to the needs that victims face. We put high emphasis on being a survivor- led and survivor- informed agency. It is important that we provide clients with opportunities to share feedback on victim services, make suggestions and plan for program improvement.

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

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

(limit 5,000 characters)

SUPPORTIVE SERVICES

Each client that is part of Hub of HOPE's Rapid Rehousing project will have connection with a case manager who will assist them in identifying needs and connect them to resources. Each client also has access to the programs available at Hub of HOPE which include survivor support groups, life skills classes, therapeutic art, and more. With the provision of these supportive services a client is likely to be more successful in remaining housed and live self-sustainably.

Case Management - Through strong case management and connection to Hub of HOPE advocates, clients will have assistance with connection to mainstream resources, financial assistance for costs related to housing and other identified barriers and needs. Case managers and advocates will provide trauma-informed care directly related to the identified needs that victims of human trafficking face. Hub of HOPE's case management will be on-going with emphasis on a client centered approach, providing clients with choices and the ability for them to set goals that would promote success in sustaining their housing. Case management can include assisting with accessibility to sustainable food resources, clothing, medical needs, retrieval of stolen documentation, legal services, insurance, trauma-informed counseling, transportation, job skill training, job acquisition, and education. Case managers will also provide assistance in establishing financial stability by assisting with budget creation, credit recovery, and creating a savings plan, if desired by the client. Case managers are overseen by the executive director and are provided supervision formally on a weekly basis and informally multiple times per week.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(e)	

Describe in the field below examples of how the new project(s) will:

1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish 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.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

Housing First Approach - There are risk factors that have been identified for human trafficking including recent migration/relocation, substance use, unstable housing, runaway/homeless youth, and mental health concerns. The data suggests that homelessness is a key risk factor for trafficking and if unmet, has negative outcomes for victims. The social determinants of "unstable housing" further highlight the connection between indicators and risk factors for becoming a victim of human trafficking.

As defined in the "housing first" approach, the Hub of HOPE's Rapid Rehousing project will prioritize providing housing to clients who are identified as unsheltered homeless. It is understood that this will provide a focus on the priority of "ending homelessness for all persons" and become a base upon which further focus on personal goals to reach self-sustainability can be pursued. As much as possible, clients will be placed in housing as quickly as housing is identified and the proper documentation and approval from the property owner is established. The project will focus on providing client choice and supportive services to restore dignity and success in remaining housed and free from the vulnerability that brings on the advances of traffickers.

Case Management - Through strong case management and connection to Hub of HOPE advocates, clients will have assistance with connection to mainstream resources, financial assistance for costs related to housing and other identified barriers and needs. Case managers and advocates will provide trauma-informed care directly related to the identified needs that victims of human trafficking face. Hub of HOPE's case management will be on-going with emphasis on a client centered approach, providing clients with choices and the ability for them to set goals that would promote success in sustaining their housing. Case management can include assisting with accessibility to sustainable food resources, clothing, medical needs, retrieval of stolen documentation, legal services, insurance, trauma-informed counseling, transportation, job skill training, job acquisition, and education. Case managers will also provide assistance in establishing financial stability by assisting with budget creation, credit recovery, and creating a savings plan, if desired by the client. Case managers are overseen by the executive director and are provided supervision formally on a weekly basis and informally multiple times per week.

Advancing racial equity - The Office on Trafficking in Persons states, "it is evident that inequity is deeply connected to the causes and risk factors for human trafficking, including disproportionate impact of housing and economic instability, interpersonal violence and intergenerational trauma, displacement and disconnection from support, and discrimination." We understand the truth of this statement and recognize that the current demographic makeup of those we serve does not fully reflect the diversity we see in our region. To promote equity with those we serve, Hub of HOPE conducts outreach within areas of communities where inequity is statistically high and where survivors face barriers in connecting to resources. Outreach takes place monthly in substance use disorder clinics, incarcerated populations, and behavioral health agencies. We work to develop relationships in diverse, underserved and rural communities to better capture how they are affected by homelessness in regard to human trafficking and how we can address any gaps in access to services that may be present.

Because of bias and discrimination in housing and jobs, traffickers find an open door to exploit the vulnerability of LGBTQ+ individuals by pretending to be the answer to filling their needs. The Hub of HOPE's Rapid Rehousing project will provide LGBTQ+ community members with connection to housing and other

supportive services.

Engaging persons with lived experience - Hub of HOPE is honored to serve alongside strong human trafficking survivors. We have board members, volunteers, and victim service advocates who have lived experiences of trafficking and homelessness. Their voices and leadership promote a healthy hope for other survivors who are in the beginning stages of escaping a life of trafficking and connecting to resources for sustainable housing and other needs. Hub of HOPE recognizes that persons with a lived experience of human trafficking and homelessness connect to the needs that victims face. We put high emphasis on being a survivor- led and survivor- informed agency. It is important that we provide clients with opportunities to share feedback on victim services, make suggestions and plan for program improvement.

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

(limit 2,500 characters)

Engaging persons with lived experience - Hub of HOPE is honored to serve alongside strong human trafficking survivors. We have board members, volunteers, and victim service advocates who have lived experiences of trafficking and homelessness. Their voices and leadership promote a healthy hope for other survivors who are in the beginning stages of escaping a life of trafficking and connecting to resources for sustainable housing and other needs. Hub of HOPE recognizes that persons with a lived experience of human trafficking and homelessness connect to the needs that victims face. We put high emphasis on being a survivor- led and survivor- informed agency. It is important that we provide clients with opportunities to share feedback on victim services, make suggestions and plan for program improvement.

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

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:	

1.	Applicant Name	Legal Aid
2.	Project Name	RRH Project
3.	Project Rank on the Priority Listing	12
4.	Unique Entity Identifier (UEI)	YJX2LARC7EV8
5.	Amount Requested	\$52,082
6.	Rate of Housing Placement of DV Survivors–Percentage	100%
7.	Rate of Housing Retention of DV Survivors–Percentage	90%

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

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

During FY2023 (YTD), Legal Aid provided Supportive Service related to housing placement and retention for people escaping domestic violence to 434 people residing in Benton, Washington, Carroll, and Madison counties. These are the counties included in the entire NWA-CoC service area. Of those served, 91% of clients identified as female, 9% identified as male and 2 people identified as other. Only 38 applicants self-reported as LGBTQ+. Additionally, 592 children under the age of 18 years old were reported to be living in the homes. These data were sourced from Legal Aid's case management system, LegalServer.

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

Describe in the field below how the project applicant:

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

(limit 2,500 characters)

Legal Aid has extensive experience in providing Supportive Services to DV survivors as they work toward gaining/retaining secure housing. They are closely partnered with the Northwest Arkansas Women's Shelter. Legal Aid's Coordinating Attorney coordinates services with NWAWS to provide emergency housing and location services while removing barriers (via civil legal services) the DV survivors' ability to secure permanent, sustainable housing. Utilizing the precepts of Trauma Informed Care, the CA will conduct a comprehensive assessment to determine what services will move the DV client into permanent housing – and then connect each survivor to those services. Additionally, using the McKinney-Vento and HUD rule changes, Legal Aid has extensive experience in helping DV victims quickly become survivors using a Housing First model that can allow them to remain at the same address – but no longer homeless – while retaining the social network, rental amount, and they have already established via that address. This new dimension to Rapid Rehousing fills a gap in services as shelters and other service providers can send people who have been wait-listed to Legal Aid who can immediately help them with their housing needs. Research suggests most victims try to leave their abuser 7 times before succeeding. This new model is important in helping to reduce that number.

These services include (but are not limited to): Orders of Protection, Divorces, Child Custody, Housing (e.g., evictions, removing the abuser from the lease, obtaining housing vouchers, the retention of service animals, and housing discrimination), and accessing/maintaining Mainstream Benefits (e.g., Medicaid, unemployment, SNAP, SSI, etc.). Additionally, if the client needs civil legal intervention (e.g., credit repair, bankruptcy, taxes, employment, or criminal history expungement) the CA will assist them in resolving these issues. These services can be integral to augmenting a DV client's ability to gain stability and financial independence apart from the abuser. Unfortunately, domestic violence can wreak havoc on one's employment at the exact moment one's job has become integral to financial survival. The CA can aid a DV client in retaining (or seeking) stable employment despite the client's additional obligations of attending court hearings, meeting with attorneys and therapists, and fending off attempts by the abuser to re-enter a relationship by sabotaging the victim's attempt to retain stable,

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

(limit 2,500 characters)

Legal Aid staff are highly experienced and motivated to protect the safety and security of DV survivors. Staff receive basic safety and security training each year. Legal Aid's staff develop safety plans with each DV client and work with the local shelters to optimize safety plans if the survivor is residing in a shelter. Legal Aid's Springdale office is designed to optimize client security. The waiting room is accessible to the public with a receptionist who controls access to the locked area beyond. All staff have private offices in which interviews take place to ensure confidentiality. Staff are trained in keeping clients safe, keeping the office space safe, and in emergency protocols. Issues of safety and confidentiality are recorded in Legal Aid's case management system, LegalServer, regarding safety issues and whether it is safe to reach out to them via the contact information at hand. All staff are trained regarding the strict privacy surrounding client information. Survivors are the ones who will make informed decisions (as Legal Aid's staff presents all identifiable options and explores them with each survivor) regarding what will be needed to empower them to gain/retain safe, secure housing.

Attorneys and staff are all thoroughly trained and receive ongoing in-service training to aid them in ensuring all interactions with clients are trauma informed. Attorneys work to build trust and confidence by providing all identified options and empowering the DV survivor to guide their decisions regarding safety and where to live. Clients work with their attorney to identify housing options that might enhance their safety - and the DV survivor's selected option becomes the housing/safety goal. Legal Aid is extremely capable of ensuring the safety of our DV clients. Our staff are thoroughly trained in how to de-escalate potential violence, how to seamlessly keep perpetrators away from (and from following) DV survivors as they enter or leave the courthouse, our offices, and mediations. We represent clients in obtaining Orders of Protection and stalking injunctions - which also work to ensure our clients' safety.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.	

(limit 2,500 characters)

As a law firm, Legal Aid is legally obligated to maintain the confidentiality and security of its clientele to protect them and keep them safe. Work Group Leaders evaluate attorney and staff activities and these evaluations are guided by the American Bar Association, Legal Services Corporation, the Legal Aid Board of Directors, and Legal Aid's Executive Director. Legal Services Corporation and Legal Aid will also contract with outside entities to always ensure a stalwart focus on security and confidentiality. For example, Legal Services Corporation recently engaged the services of KnowB4 to test how well attorneys and staff held to the established rules and protocols surrounding cybersecurity. A pre-test was used to allow KnowB4 to tailor their training to the specific needs of Legal Aid employees, all staff were required to participate in the training, and a post-test ensured compliance; reinforcing security and working to keep all clients safe.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

The 2022 -2026 Strategic Plan set out by the Department of Housing and Urban Development (HUD) prioritizes the goal of "Fortify[ing] support for underserved communities and support equitable community development for all people." We support underserved communities - recognizing their specific needs and working to meet those needs while utilizing a Housing First approach. Legal Aid has served DV victims and survivors throughout Arkansas for decades. Victims and Survivors of domestic violence are laboring under both their ethnic cultures and general trauma culture and Legal Aid has historically recognized and honored their needs utilizing a trauma-informed, victim centered approach which engenders mutual respect.

People escaping DV are chronically underserved and misunderstood during large portions of the DV cycle. Their high cortisol levels and reactions to kindness, empathy, authority, and perceived apathy can be confusing and off-putting to service providers as the DV client works to create a new normal. They have a high need for stability and consistency as they heal. Using this grant, we can be a stable, substantive support by using a Coordinating Attorney to help them move quickly toward sustainable, permanent housing first; while using civil legal services to stabilize their lives.

For DV clients, equitable service means intense, stable service that allows them the opportunity to make their own decisions in a mutually respectful space.

Legal Aid uses a victim-centered approach to empower each client in making informed decisions; promoting a sense of autonomy and self-confidence. The Attorneys and Staff at Legal Aid are trained through conferences, in-service trainings, work group trainings, and daily reminders in utilizing victim-centered, trauma-informed approaches to optimally meet the needs of clients trying to escape domestic violence. All staff and volunteer attorneys are thoroughly trained regarding the importance of utilizing a trauma informed care approach and the complexities of working with DV survivors, including the need to prioritize client safety and confidentiality in each case.

If funded, Legal Aid will continue its current practice of prioritizing and honoring the DV victim's choices while working hard to effect stabilization in order to move survivors to safe, permanent housing as quickly as possible. We will continue being sensitive to the trauma which each DV client has experienced; recognizing ways to reduce the power differential issues through which they are working and providing them with information on trauma while also helping each client quickly gain confidence in the choices they make.

Our proposed use of a Coordinating Attorney to guide each client through their specific civil legal needs while working to ensure their safety is designed to reduce the amount of trauma clients experience. The attorney/client relationship will work to engender trust in the client's own decisions while providing an opportunity for each client to also build trust in a professional relationship in the public realm. Many abused people are constantly denigrated and socially isolated by their abuser. Building trust in one's ability to navigate relationships and learning to advocate for one's own personal needs is important.

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

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

(limit 5,000 characters)

Legal Aid of Arkansas is a non-profit law firm with extensive experience in meeting the civil legal service needs of people who are working to escape domestic violence. We are committed to helping people who have suffered from domestic violence regardless of their income.

Some of the legal services Legal Aid provides to help victims and survivors of domestic violence retain or regain safe, sustainable housing include; Orders of Protection, Document Retention, Orders to Cease and Desist Stalking, Child Support, help with all mainstream benefits, Child Custody, Parent Time, Job protection when survivors' must have extra time for court and therapy, expungement of Criminal History, Bad Credit History, ensuring children are accepted into schools after the family relocates due to domestic violence, help with legal issues that are geared toward helping people with adjacent substance use disorders

Legal Aid empowers survivors by employing attorneys and the law to provide legal services to meet all of these DV client needs. We can seal criminal histories and bad credit histories, we assist people in retaining their employment, we refer clients to health care providers and other service providers we can meet their basic needs, we aid parents in educational issues from bullying to IEPs, and we aid clients in matters of child custody, visitation, and child support. We do not provide job training; however, we have strong community partnerships to whom we can refer our DV clients when needed. We refer clients to local health provider partners for physical/mental care and clients with Substance Use Disorders to Legal Aid's Beyond Opioids Program for services and support.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(e)	

	Describe in the field below examples of how the new project(s) will:
1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish 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.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

All providers of services can attest to the fact that intensive services can be concentrated on a few clients; but providing less intensive services allows more clients to be served. Due to funding limitations, Legal Aid currently utilizes a hybrid model to triage services based on legal issues at hand. During FY23 so far, 61% of DV clients served, received limited services (i.e., counseling or advice) and 39% received more extensive services (i.e., limited representation, full representation). Legal Aid, noting that people in DV crisis often do not have the wherewithal to follow advice and counseling, plan to flip the script; using the funds from this grant to provide extensive Housing First services to, at minimum, 61% of all NWA CoC cases wherein domestic violence has been a reported matter.

This unprecedented change would provide people working to escape DV the support needed to find sustainable ways retain their original housing (minus the abuser) or move their households to a new safe and affordable home.

How Participants Will Be Identified. Participants will self-select into these services. The services will be described and an invitation extended to people while they are still in the courthouse securing an Order of Protection. Legal Aid welcomes clients with financial struggles, issues with service utilization, and substance use disorders - utilizing trauma-informed services (meaning they will make informed choices along with their attorney regarding services and options in a safe and mutually respectful setting.) Legal Aid also houses the Beyond Opioids project and we can utilize that program to help victims and survivors of DV to augment the services they receive, if needed. No qualifying client is turned away from Legal Aid without help.

This Project and HUD's Homeless Priorities. This project is foundationally grounded in a Housing First approach wherein we are striving to provide extensive civil legal services to all people who are working to escape domestic violence who have no other resources. Domestic violence is an insidious crime which renders victims homeless in the places they live through no fault of their own. Without housing secured, victims cannot gain the traction necessary to successfully navigate their way to successfully becoming a survivor. We plan to use DV Bonus funding to empower victims to regain their place in a safe, secure home.

Legal Aid does not utilize a wait list, as wait lists have been found to be lethal to victims of domestic violence. Legal Aid is diligent in improving system performance and relies on partnerships with community service providers to work toward ending homelessness for everyone. We actively reach out to more vulnerable groups (e.g., LGBTQ+, minorities based on race and ethnicity, etc.) in meaningful ways to increase their access to services.

Chronic Homelessness. Legal Aid plans to aid people who are deemed homeless as defined - Homeless Category 4 Fleeing/ Attempting to Flee Domestic Violence. Victims of domestic abuse with no resources to escape the place they live are forced to live in housing which is, at best, temporary and fraught with danger. This has recently been recognized as a state of homelessness under the McKinney-Vento Act and under CFR 25 § 578, the victim (and, possibly, other family members) are not living in decent housing, or even in a suitable living environment, as long as they are unable to escape the abusive partner. Most victims of DV engage in a series of attempts (on average, seven) to escape the violent relationship before finally succeeding. Leaving is complicated and fraught with danger. The person fleeing violence is often impaired by PTSD, lacking adequate resources to live separately from their abuser, worries that the courts will leave their child/ren trapped with the abusive parent under laws of visitation or custody, being told they have been placed on

a wait list for the help the need, or confused by convoluted laws involving immigration. Legal Aid is passionately committed to providing the services to individuals and families experiencing chronic homelessness that can reduce the 7 attempts at leaving considerably. We currently serve all chronically homeless DV victims working to ensure they can quickly find themselves in safe housing.

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(f)	

Describe in the field below how the new project will involve survivors:

1.	with a range of lived expertise; and
2.	in policy and program development throughout the project's operation.

(limit 2,500 characters)

Commitment to Diversity and Racial Equity In the Provision of Services. Legal Aid is committed to the improvement of racial equity in service provision and outcome. While racial equity and diversity training occurs each year during our annual conference, stand-alone conferences, and Work Group trainings, we have prioritized it during the past year by requiring all employees to participate in Diversity/Equity/Inclusion (DEI) training provided by the IDEALS Institute. Completion of this intensive year-long training was required of all employees. Subsequently, we have created a DEI committee to ensure this work is ongoing. We are committed to championing equal justice for low-income individuals and communities and remedying the conditions that burden and marginalize them. The training has guided employees through introspective activities while teaching them more about foundational topics such as microaggression, cultural responsiveness, implicit bias, race in the South, and outright "isms" (i.e., racism, sexism, genderism, etc.). Legal Aid is always monitoring the services we provide to ensure equitable access. For example, we have worked hard to create access for our Marshallese community - aligning their unique culture with how we reach out to them and how we provide services. This strategy has been extremely successful. We are currently working on a strategic plan to increase wide- ranged access to our Latinx population. Our strategies to increase racial equity are incorporated into our daily work - as well as our analysis of data

Involvement of Those With Lived Experience. The planning of this project is informed and augmented by the lived experiences of Board Members, Attorneys, and Support Staff who have experienced the intersections of domestic violence and homelessness – including chronic homelessness - from first-hand and second-hand perspectives. Many of our Board Members and Staff Attorneys have provided services for, and legally represented, people escaping domestic violence situations and/or experiencing vulnerabilities regarding homelessness. One member of our Board was personally affected by domestic violence and has spent time living in a DV Shelter because of that violence.

4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.		
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.		
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.		
4.	Attachments must match the questions they are associated with.		
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.		
6.	If you cannot read the attachment, it is likely we cannot read it either.		
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).		
	. We must be able to read everything you want us to consider in any attachment.		
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.		
8.	Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.		
Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	Fayetteville Hous...	09/15/2023
1C-7. PHA Moving On Preference	No	Fayetteville Hous...	09/15/2023
1D-11a. Letter Signed by Working Group	Yes	Lived Experience	09/19/2023
1D-2a. Housing First Evaluation	Yes	Housing First Che...	09/13/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Competition Deadl...	09/15/2023
1E-2. Local Competition Scoring Tool	Yes	Scoring rubric	09/18/2023
1E-2a. Scored Forms for One Project	Yes	New Beginnings Re...	09/12/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/12/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/22/2023
1E-5b. Local Competition Selection Results	Yes	Local Competen A...	09/22/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HDX Competition Report	09/13/2023
3A-1a. Housing Leveraging Commitments	No	Peace at Home & F...	09/15/2023
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: Fayetteville Housing Authority

Attachment Details

Document Description: Fayetteville Housing Authority

Attachment Details

Document Description: Lived Experience

Attachment Details

Document Description: Housing First Checklist -

Attachment Details

Document Description: Competition Deadline Posting

Attachment Details

Document Description: Scoring rubric

Attachment Details

Document Description: New Beginnings Renewal Scorecard

Attachment Details

Document Description: Notification of Projects Rejected

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Accepted Projects

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: HDX Competition Report

Attachment Details

Document Description: Peace at Home & FHA EHV leverage

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/09/2023
1B. Inclusive Structure	09/20/2023
1C. Coordination and Engagement	09/20/2023
1D. Coordination and Engagement Cont'd	09/21/2023
1E. Project Review/Ranking	09/22/2023
2A. HMIS Implementation	09/21/2023
2B. Point-in-Time (PIT) Count	09/20/2023
2C. System Performance	09/21/2023
3A. Coordination with Housing and Healthcare	09/20/2023
3B. Rehabilitation/New Construction Costs	09/20/2023
3C. Serving Homeless Under Other Federal Statutes	09/20/2023

4A. DV Bonus Project Applicants	09/21/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

PHA Policy

The PHA will use the following local preferences:

1. The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.
2. The PHA will offer a preference to families that include victims of domestic violence, dating violence, sexual assault, or stalking who have either been referred by a partnering service agency or consortia or is seeking an emergency transfer under VAWA from the PHA's public housing program or other covered housing program operated by the PHA.

The PHA will work with the following partnering service agencies:

Peace at Home Women's Shelter & NWA Women's Shelter

The applicant must certify that the abuser will not reside with the applicant unless the PHA gives prior written approval.

The PHA will first assist families that have been terminated from the HCV program due to insufficient funding and then assist families that qualify for the VAWA preference.

3. The PHA will offer preference for families that are homeless. The PHA will allocate 10% of new vouchers to NWA Continuum of Care to be administered according to their coordinated entry policy. The HUD definition of homeless will be enforced in determining the eligibility of homeless families. The NWA Continuum of Care will be responsible for confirming homeless status.

4-III.B. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use.

Local Preferences [24 CFR 960.206]

PHAs are permitted to establish local preferences and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan and must be based on local housing needs and priorities that can be documented by generally accepted data sources [24 CFR 960.206(a)].

PHA Policy

The PHA will use date and time of application for selection from waiting list.

Homeless Preference: The PHA will offer preference for families that are homeless. The PHA will allocate 10% of new public housing openings to the NWA Continuum of Care to be administered according to their coordinated entry policy. The HUD definition of homeless will be enforced in determining eligibility of homeless families. The NWA Continuum of Care will be responsible for confirming homeless status.



DIVA & DUDE

Community Outreach/Training Center

September 16, 2023

Greetings!

As a board member of the Northwest Arkansas Continuum of Care board of directors. I, Carla Thompson, attest that I am a person with lived experience of homelessness within the last seven years.

As part of my role on the board I am included in the decision-making processes related to addressing homelessness, included in the development or revision of your CoC's local competition rating factors, included in the development or revision of your CoC's coordinated entry process, as well as an active participant on the CoC's DEI committee.

We are a person of color lead organization, providing professional development and employment opportunities. Our role in the community is not only to serve the homeless populations but also to train them to become direct service providers for the homeless. 99% of our Street Outreach team are persons with lived experience arriving from an unsheltered situation within the last three years.

Our 'Pay Your Way' program allows homeless to complete various task or services as an independent contractor to divert to paid shelter. As well, as our collaborative efforts to host various listening parties throughout the region. Intersections will provide regional platforms for our homeless population to be included in the decision-making processes related to addressing homelessness. This is also an opportunity to train organizations on various topics such as- how to approach the homeless, addressing cultural differences in homelessness, understanding the variances of homelessness by area.

Sincerely,

Carla Thompson

Dr. Carla Thompson, Executive Director
1200 W Walnut #1500
Rogers, Arkansas 72756





Housing First Checklist: Assessing Projects and Systems for a Housing First Orientation

Housing First is a proven approach, applicable across all elements of systems for ending homelessness, in which people experiencing homelessness are connected to permanent housing swiftly and with few to no treatment preconditions, behavioral contingencies, or other barriers. It is based on overwhelming evidence that people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate level of services. Study after study has shown that Housing First yields higher housing retention rates, drives significant reductions in the use of costly crisis services and institutions, and helps people achieve better health and social outcomes.ⁱ

This checklist was designed to help you make a quick assessment of whether and to what degree housing programs — and entire systems — are employing a Housing First approach. Robust tools and instruments are available elsewhere to quantitatively measure program quality and fidelity to Housing First. This tool is not meant to take the place of those more rigorous assessments, but is intended to help Continuums of Care, individual housing and services providers, funders, and other stakeholders to communicate about, and quickly assess, alignment with key Housing First approaches.

Core Elements of Housing First at the Program/Project Level

For your homelessness service system to work the most efficiently and effectively, individual programs must embrace a Housing First approach. This portion of the checklist can help you assess the extent to which your local programs are implementing Housing First. You can use this tool for trainings or planning sessions, during a site visit or program audit, as a guide when reviewing funding applications, or for many other uses.

- ☐ Access to programs is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions.
- ☐ Programs or projects do everything possible not to reject an individual or family on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that are interpreted as indicating a lack of “housing readiness.”
- ☐ People with disabilities are offered clear opportunities to request reasonable accommodations within applications and screening processes and during tenancy, and building and apartment units include special physical features that accommodate disabilities.

Quick Screen: Does Your Project Use Housing First Principles?

- 1) Are applicants allowed to enter the program without income?
- 2) Are applicants allowed to enter the program even if they aren’t “clean and sober” or “treatment compliant”?
- 3) Are applicants allowed to enter the program even if they have criminal justice system involvement?
- 4) Are service and treatment plans voluntary, such that tenants cannot be evicted for not following through?

- ☐ Programs or projects that cannot serve someone work through the coordinated entry process to ensure that those individuals or families have access to housing and services elsewhere.
- ☐ Housing and service goals and plans are highly tenant-driven.
- ☐ Supportive services emphasize engagement and problem-solving over therapeutic goals.
- ☐ Participation in services or compliance with service plans are not conditions of tenancy, but are reviewed with tenants and regularly offered as a resource to tenants.
- ☐ Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some tenants' lives. Tenants are engaged in non-judgmental communication regarding drug and alcohol use and are offered education regarding how to avoid risky behaviors and engage in safer practices.
- ☐ Substance use in and of itself, without other lease violations, is not considered a reason for eviction.
- ☐ Tenants in supportive housing are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.
- ☐ Every effort is made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if a tenancy is in jeopardy. Whenever possible, eviction back into homelessness is avoided.

Core Elements of Housing First at the Community Level

Housing First should be adopted across your community's entire homelessness response system, including outreach and emergency shelter, short-term interventions like [rapid re-housing](#), and longer-term interventions like [supportive housing](#). You can use this part of the checklist to assess the extent to which your community has adopted a system-wide Housing First orientation, as well as guide further dialogue and progress.

- ☐ Your community has a coordinated system that offers a unified, streamlined, and user-friendly community-wide coordinated entry process to quickly assess and match people experiencing homelessness to the most appropriate housing and services, including rapid re-housing, supportive housing, and/or other housing interventions.
- ☐ Emergency shelter, street outreach, and other parts of your crisis response system implement and promote low barriers to entry or service and quickly identify people experiencing homelessness, provide access to safety, make service connections, and partner directly with housing providers to rapidly connect individuals and families to permanent housing.
- ☐ Outreach and other crisis response teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing.
- ☐ Your community has a data-driven approach to [prioritizing housing assistance](#), whether through analysis of the shared community assessment and vulnerability indices, [system performance measures](#) from the Homeless Management Information System, data on utilization of crisis services, and/or data from other

systems that work with people experiencing homelessness or housing instability, such as hospitals and the criminal justice system.

- ☐ Housing providers and owners accept referrals directly from the coordinated entry processes and work to house people as quickly as possible, using standardized application and screening processes and removing restrictive criteria as much as possible.
- ☐ Policymakers, funders, and providers conduct joint planning to develop and align resources to increase the availability of affordable and supportive housing and to ensure that a range of options and mainstream services are available to maximize housing choice among people experiencing homelessness.
- ☐ Mainstream systems, including social, health, and behavioral health services, benefit and entitlement programs, and other essential services have policies in place that do not inhibit implementation of a Housing First approach. For instance, eligibility and screening policies for benefit and entitlement programs or housing do not require treatment completion or sobriety.
- ☐ Staff in positions across the entire housing and services system are trained in and actively employ evidence-based practices for client/tenant engagement, such as motivational interviewing, client-centered counseling, critical time interventions, and trauma-informed care.

Additional Resources

- [Implementing Housing First in Supportive Housing](#) (USICH, 2014) – discusses supportive housing and Housing First as tools for ending chronic homelessness and helping people with disabilities live independently in the community.
- [Webinar: Core Principles of Housing First and Rapid Re-Housing](#) (USICH, 2014) – describes the core components of the Housing First approach and the rapid re-housing model and how both work together to help end homelessness.
- [Four Clarifications about Housing First](#) (USICH, 2014) – clarifies some common misperceptions about Housing First.
- [It's Time We Talked the Walk on Housing First](#) (USICH, 2015) – advances our thinking on Housing First.
- [Housing First in Permanent Supportive Housing](#) (HUD, 2014) – provides an overview of the principles and core components of the Housing First model.
- [Permanent Supportive Housing Evidence-Based Practices KIT](#) (SAMHSA, 2010) – outlines the essential components of supportive housing, along with fidelity scales and scoresheets.

ⁱ Lipton, F.R. et. al. (2000). "Tenure in supportive housing for homeless persons with severe mental illness," *Psychiatric Services* 51(4): 479-486. M. Larimer, D. Malone, M. Garner, et al. "Health Care and Public Service Use and Costs Before and After Provision of Housing for Chronically Homeless Persons with Severe Alcohol Problems." *Journal of the American Medical Association*, April 1, 2009, pp. 1349-1357. Massachusetts Housing and Shelter Alliance. (2007). "Home and Healthy for Good: A Statewide Pilot Housing First Program." Boston.

7. Renewal Project Letter of Intent

The following documents will help guide your way as you fill out the Local Proposal:

1. [HUD FY 2023 NOFO Continuum of Care \(CoC\) Competition](#)
2. [FY 2023 Competition Resources](#)

The following links can serve as a guide should your projects be approved by the NWA CoC. Becoming familiar with this application process in e-snaps as soon as possible is advised.

1. [e-snaps](#) is the electronic Continuum of Care (CoC) Program Application and Grants Management System that HUD's Office of Special Needs Assistance Programs (SNAPS) uses to support the CoC Program funding application and grant awards process for the CoC Program.
2. [CoC New Application Detailed Instructions](#)
3. [CoC Renewal Project Application Detailed Instructions](#)
4. [CoC Estimated Annual Renewal Demand Report](#), which lines out the funds available for the NWA CoC (AR-501 Fayetteville/ Northwest Arkansas CoC) to apply for.

The document below describes the process by which the NWA CoC develops the Local NOFA.

[Rank and Review Policies](#)

The documents below describe the NWA CoC's funding priorities and are used to develop the local NOFA.

[NAEH HUD Policy Priorities FY 2021 NOFO](#)
[2019 NWA CoC Needs Analysis and Funding Priorities](#)

Added July 31, 2023

Rank Review Committee
Combined Average



FY 2023 HUD Competition Funding Allocations by Rank and Review

RENEWAL PROJECTS

<u>Organization</u>	<u>Project</u>	<u>Households Served</u>	<u>Amount Requested</u>	<u>Amount Approved</u>	<u>Average Score</u>	<u>Rank</u>
1 New Beginnings	Supportive Housing Project	3	\$ 44,306.00	\$ 44,306.00	66.75	1
2 City of Fayetteville	PSH 2023	16	\$ 171,164.00	\$ 171,164.00	91.375	2
3 City of Fayetteville	PSH Bonus 1	4	\$ 32,404.00	\$ 32,404.00	86.75	3
4 City of Fayetteville	PSH Bonus 2	4	\$ 35,147.00	\$ 35,147.00	86.75	4
5 City of Fayetteville	AR0071 PSH	7	\$ 75,867.00	\$ 75,867.00	63	5
SUM of Tier 1				\$ 358,888.00		

NEW DV and NON DV PROJECTS

6DV	Peace at Home - DV	RRH	10	\$ 156,246.00	\$ 52,348.00	96	6DV
7	New Beginnings	Supportive Housing Expansion - F	4	\$ 50,000.00	\$ 42,890.01	81.75	7
8	Cocoon Collective	PSH/RRH	26	\$ 106,500.00	\$ 42,889.02	67	8
9	Micah 6:8	New Digs Now - RRH	14 (up to 50)	\$ 79,850.30	\$ 42,888.02	77.75	9
11DV	Hub of Hope - DV	RRH	5	\$ 51,816.00	\$ 51,816.00	70.75	10DV
12DV	Legal Aid - DV	RRH	UNK	\$ 100,401.27	\$ 52,082.00	68.25	11DV
SUM of Tier 2+BONUSES				\$ 284,913.05			

Tier 2

\$ 19,295.05

Rank Review Committee
Combined Average

CoC Bonus	\$ 109,372.00
DV Bonus	\$ 156,246.00



FY2023 HUD NOFO CoC Local Competition Projects Accepted – Public Posting

Rank	AGENCY	PROJECT	PROJECT TYPE	REQUESTED AMOUNT
RENEWALS (Tier 1)				
1	New Beginnings	New Beginnings PSH	PH-PSH	\$ 44,306.00
2	City of Fayetteville	Hearth PSH	PH-PSH	\$171,164.00
3	City of Fayetteville	Hearth PSH bonus (1)	PH-PSH	\$ 32,404.00
4	City of Fayetteville	Hearth PSH bonus (2)	PH-PSH	\$ 35,147.00
5	City of Fayetteville	Hearth PSH AR0071	PH-PSH	\$ 75,867.00

NEW DV and NON DV PROJECT (Tier 2), CoC Bonus and DV Bonus				
6	Peace at Home (DV)	PAH – Home Restored Proj	RRH	\$52,348.00
7	New Beginnings	NB Supportive Housing Exp.	RRH	\$42,890.01
8	Cocoon NWA	Cocoon NWA RRH	RRH	\$42,889.02
9	Micah 6:8	New Digs Now - RRH	RRH	\$42,888.02
10	Hub of Hope (DV)	HoH Rapid Rehousing FY2023	RRH	\$51,816.00
11	Legal Aid (DV)	Legal Aid NWACOC DV	RRH	\$52,082.00

** Both New (Non DV) and New (DV) projects adjusted to meet the funding criteria per the NOFO and funding requirements.

Rank Review Committee
Combined Average



FY 2023 HUD Competition Funding Allocations by Rank and Review

RENEWAL PROJECTS

<u>Organization</u>	<u>Project</u>	<u>Households Served</u>	<u>Amount Requested</u>	<u>Amount Approved</u>	<u>Average Score</u>	<u>Rank</u>
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5 City of Fayetteville	AR0071 PSH	7	\$ 75,867.00	\$ 75,867.00	63	5
SUM of Tier 1				\$ 358,888.00		

NEW DV and NON DV PROJECTS

6DV	Peace at Home - DV	RRH	10	\$ 156,246.00	\$ 52,348.00	96	6DV
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Tier 2

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Rank Review Committee
Combined Average

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DV Bonus	\$ 156,246.00

2023 HDX Competition Report

PIT Count Data for AR-501 - Fayetteville/Northwest Arkansas CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	352	312	343	436
Emergency Shelter Total	172	90	165	200
Safe Haven Total	0	0	0	0
Transitional Housing Total	25	67	78	45
Total Sheltered Count	197	157	243	245
Total Unsheltered Count	155	155	100	191

Chronically Homeless PIT Counts

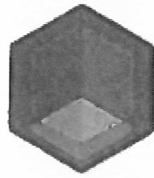
	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	98	64	49	116
Sheltered Count of Chronically Homeless Persons	53	19	31	43
Unsheltered Count of Chronically Homeless Persons	45	45	18	73

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	16	24	30	30
Sheltered Count of Homeless Households with Children	13	21	27	25
Unsheltered Count of Homeless Households with Children	3	3	3	5

Homeless Veteran PIT Counts

2020 PIT 2021 PIT 2022 PIT * 2023 PIT 2024 PIT



FAYETTEVILLE HOUSING AUTHORITY

Memorandum of Understanding – Emergency Housing Vouchers

This Memorandum of Understanding (MOU) has been created and entered into on July 1, 2021 by and between the following parties in relation to the assistance under Emergency Housing Vouchers and the requirements of PIH Notice 2021-15 (HA).

Fayetteville Housing Authority, 1 North School Ave., Fayetteville, AR 72701

Northwest Arkansas Continuum of Care, PO Box 3643, Fayetteville, AR 72702
Service Providers – Havenwood, 7 Hills, Salvation Army, New Beginnings, City of Fayetteville,
Veterans Healthcare Systems of the Ozarks, St. Francis House: Supportive Services for Veteran
Families

Victim Service Providers- Peace at Home, NWA Women's Shelter, & Children's Safety Center

I. Introduction and Goals

- a) The Fayetteville Housing Authority and NWA CoC including their housing service providers are committed to administering the EHV's in accordance with all program requirements.
- b) Fayetteville Housing Authority and NWA CoC will follow the goals and standards of success in administering the program.

Lead EHV Liaisons:

- a) Lead HCV Liaison: Hannah Logan, Housing Navigator and Inspector
- b) Lead PHA Liaison: Victoria Dempsey, Director of Vouchers & Supportive Services
- c) Lead CoC Liaison: Pam Hutcheson, Executive Director
- d) Lead Coordinated Entry Liaison: Debbie Martin, Executive Director Havenwood
- e) Lead VSP Liaisons: Teresa Mills, Executive Director Peace at Home
Brandy Osmus, Executive Director NWA Women's Shelter
Elizabeth Shackelford, Executive Director Children's Safety Center

II. EHV Eligibility

The population eligible to be assisted under this agreement are households certified by the CoC Coordinated Entry and/or Victim Service Providers as meeting the following conditions:

1. Homeless;
2. At Risk of Homelessness
3. Fleeing or attempting to flee domestic violence, sexual assault, stalking, or human trafficking
4. Recently homeless and for whom providing rental assistance will prevent the family's homelessness or having high risk of housing instability

III. Services to be provided to eligible EHV families

1. Partnering service providers will support individuals and families in completing applications and obtaining necessary supporting documentation to support referrals and applications
2. Partnering service providers will support PHAs in ensuring appointment notifications to eligible individuals and families and will assist eligible households in getting to meetings with the PHA.
3. PHAs will establish windows of time for EHV applicants to complete intake interviews for EHV.
4. Partnering service providers will provide housing search assistance for eligible individuals and families.
5. Partnering service providers will provide counseling on compliance with rental lease requirements.
6. Partnering service providers will assess individuals and families who may require referrals for assistance on security deposits, utility hook-up fees, and utility deposits.
7. Partnering service providers will assess and refer individuals and families to benefits and supportive services, where applicable.

IV. PHA Roles and Responsibilities

1. Designate and maintain a lead EHV liaison to communicate with the CoC.
2. Accept direct referrals for eligible individuals and families through the CoC Coordinated Entry System. Certify initial program eligibility and conduct annual

recertifications for continued eligibility.

3. Commit a sufficient number of staff and necessary resources to ensure that the application, certification, and voucher issuance processes are completed in a timely manner.
4. Commit a sufficient number of staff and resources to ensure that inspections of units are completed in a timely manner.
5. Comply with the provisions of this MOU.

V. CoC Roles and Responsibilities

1. Designate and maintain a lead EHV liaison to communicate with the PHA.
2. Assess eligible households for EHV and additional supportive services if needed.
3. Refer eligible individuals and families to PHA using the community's coordinated entry system.
4. Support eligible individuals and households in completing and applying for supportive documentation to accompany admissions application to the PHA (i.e. self-certifications, birth certificate, social security card, etc.).
5. Assess all households referred for EHV for mainstream benefits and supportive services available to support eligible individuals and families through their transition.
6. Identify and provide supportive services to EHV families. (While EHV participants are not required to participate in services, the CoC should assure that services are available and accessible.)
7. Comply with the provisions of this MOU.

VI. Victim Service Provider Roles and Responsibilities

1. Assess eligible households for EHV and additional supportive services if needed.
2. Refer eligible individuals and families directly to PHA
3. Support eligible individuals and households in completing and applying for supportive documentation to accompany admissions application to the PHA (i.e. self-certifications, birth certificate, social security card, etc.).
4. Assess all households referred for EHV for mainstream benefits and supportive services available to support eligible individuals and families through their transition.
5. Identify and provide supportive services to EHV families. (While EHV participants are not required to participate in services, the VSP should assure that services are

available and accessible.)

6. Comply with provision of this MOU.

VII. Program Evaluation

The PHA, and CoC or designated CoC recipient agree to cooperate with HUD, provide requested data to HUD or HUD-approved contractor delegated the responsibility of program evaluation protocols established by HUD or HUD-approved contractor, including possible random assignment procedures.


Signed by:


Executive Director, PHA

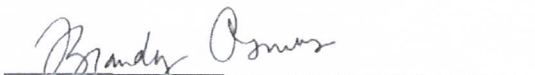
6/28/2021
Date


Executive Director, CoC

06/29/2021
Date


Executive Director, Peace at Home

7/2/2021
Date


Executive Director, NWA Women's Shelter

7/6/2021
Date


Executive Director, Children's Safety Center

7/6/2021
Date