

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 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2022 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 2022 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: MD-503 - Annapolis/Anne Arundel County CoC

1A-2. Collaborative Applicant Name: Anne Arundel County, Maryland

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Anne Arundel Department of Social Services

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

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

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.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 with individuals with disabilities, including the availability of accessible electronic formats;
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)

New members are invited to join the Coalition on an ongoing basis by: a) ACDS, the lead agency, publishes coalition meeting information on its website and has an open invitation for new members on its website; b) a Board Development Committee annually evaluates current membership and identifies/outreaches to persons involved in preventing or ending homelessness who are not currently represented; and c) CoC successes are highlighted on ACDS Facebook page which is used as an outreach tool.

The MD-503 CoC remains open to any person or agency interested in preventing or ending homelessness in Anne Arundel County. The open invitation to join the Coalition is posted on the ACDS website, with staff contact information on how to both receive information and get involved. Interested individuals are also encouraged to sign up for the CoC newsletter/email distribution list through MailChimp to stay informed. Current members invite interested groups and individuals to CoC meetings, as well as make requests via email to add new members to the distribution list.

The lead agency, ACDS, has contact information available on their website for individuals with disabilities who require accommodations to access or attend public hearings or other meetings. Additionally, documents are available in PDF format with speak to text captions on any graphics posted on the ACDS website. The ACDS website is ADA-compliant.

During the last year, all Coalition meetings and hearings have taken place either electronically on Zoom or Google platform, or hybrid between electronic and in-person formats. This updated platform, which is capable of real-time captions, has expanded accessibility of Coalition meetings and training. Electronic minutes of these meetings are shared with participants, as are recordings of quarterly General Body Meetings and other Sessions that deliver information of interest to a large audience. Please note that monthly Board Meetings are not recorded so that members may discuss clients as needed with privacy.

The CoC invited iCommunity Connection Services (iCCS) to join the CoC due to continuous prioritization of the large Veteran population in our County; iCCS currently operates the County’s Veterans Service Phone Line that serves as a one-stop-shop for veterans seeking assistance with County services, including navigation to homeless services.

The MD-503 CoC works with its members to identify and invite homeless or formerly homeless members to join and

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

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

(limit 2,500 characters)

MD-503 CoC invites all individuals and organizations in Anne Arundel County interested in ending homelessness in our region. Quarterly General Body Meetings are held on the third Friday of each quarter, during which announcements are made and training is offered on evidence-based practices like trauma-informed care, Housing First, harm reduction, anti-discrimination, and racial equity. Board/Leadership Meetings are open to anyone interested in attending and are held during the first Friday of each month. They focus on deep discussion related to homelessness that ultimately informs decision-making and long-term County-wide strategy. Topics include but are not limited to affordable housing, education, mental health and substance use, and workforce development. CoC members are given the opportunity to provide recommendations of needed topics for discussion. All meeting announcements are advertised on the lead agency (ACDS) website and shared with the 150+ person distribution list that is also managed by the lead agency. The CoC has various subcommittees that meet at ad hoc times to discuss more specific and detailed topics including coordinated entry, shelter, and homelessness diversion.

The CoC outreaches via Mailchimp to 150+ email contacts to alert them of meetings, availability of funds, and availability of draft plans and applications, which are posted on ACDS' website. CoC members request time on the agenda of local meetings to gather feedback including the local HIV/AIDS commission or Veterans Task Force. Each meeting provides a space for other items where CoC members can share, update, and give input to the CoC leadership. Stakeholder opinions are solicited in the Consolidated Planning process by ACDS, the lead agency.

The CoC incorporates and considers information regarding needs, programmatic changes, and ideas that would improve the Continuum of Care for the homeless in the County. CoC members are encouraged to partake in the many training sessions hosted by HUD, National Alliance, and the State of Maryland DHCD which highlight best practices for a range of issues. These ideas are discussed at the local level. CoC also utilizes and solicits input gathered through the annual HUDs during the homelessness consolidated planning process - Action Planning - by incorporating feedback from the County's two annual housing and community development public hearings; and hosting roundtable discussion providing opportunity to comment.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
NOFO Section VII.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.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.	
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(limit 2,500 characters)

The MD CoC actively solicits projects that have not been previously funded through the CoC program. On August 10, 2022, the FY22 Continuum of Care Notice of Funding Opportunity (NOFO) was sent to 150+ members of the Coalition via email distribution list announcing the competition, providing application updates and resources, and inviting all interested nonprofits, both new and renewal, to apply. Notice was also given of the FY2022 CoC Application Information and Planning Meeting held virtually on August 12, 2022 and a reminder about this meeting was sent on the morning of August 12 via email. Notice that the CoC was accepting project application proposals from the public, and where applications should be submitted was also posted on the ACDS, lead agency, website, and contact information for ACDS staff was provided. CoC Application announcement emails stated that new organizations are welcome to apply. ACDS received inquiries from three new organizations, one of which submitted a new project application.

Application submission instructions were sent to the CoC listserv and posted online on the ACDS website. Submission instructions were also reviewed in the CoC Application Information and Planning Session, which was recorded and shared with attendees afterwards and made available to the CoC. Finally, instructions are also included on the project application itself. All renewals were asked to submit a renewal application providing updated program information and answering various equity questions.

ACDS emailed the CoC email list and linked to the ranking and review criteria for new and renewal CoC projects; this information was also posted on the ACDS website. The process for evaluating applications, including the review committee and notification of project ranking, were also posted on the ACDS website. All projects that met the minimum requirement as stipulated by HUD would be considered for submission. For example, the CoC received one new application which could not be submitted via the esnaps system as the project was requesting funds for only services, - no housing, the population to be served did not meet HUD's requirements, the program did not work with the CoC's coordinated entry, and they did not provide a match.

The lead agency, ACDS, has contact information on their website for individuals with disabilities to request accommodations. Also, the ACDS website is ADA-compliant.

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) 2022 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 VII.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC's geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	No
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	No
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 VII.B.1.b.	

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

(limit 2,500 characters)

ACDS, the MD-503 CoC's Collaborative Applicant, is under contract with Anne Arundel County to administer the ESG and CoC programs and to provide staff support to the County's Homeless Coalition (e.g. MD-503 CoC members). All ESG program recipients are part of the County's Homeless Coalition which is active in the planning process for ESG and ESG-CV funds. ACDS consults with the Homeless Coalition to establish the strategy for the use of ESG, ESG-CV, HOME ARP and other available funding sources. CoC members are invited to participate in a minimum of two annual budget hearings discussing the allocation of ESG and ESG-CV funds and to provide input into their usage. ACDS staff is responsible for leading the County's consolidated planning process and as such involves MD-503 CoC members in the process. The Annapolis Community Development Administrator, a Coalition Board member, administers CDBG for the City of Annapolis.

The CoC has a performance evaluation committee that evaluates performance of ESG funded Programs through the review of HMIS data, total homeless counts and ESG funded shelter performance data (e.g. length of stay, occupancy, income, housing placement and performance measures), HIC, and PIT data. Performance data from ESG funded programs as well as monitoring visit reports are used to make recommendations for other funding sources including the State funded Homelessness Solutions Program (HSP) and FEMA. Consideration is also given to information shared by the County's HMIS lead on data quality and the experience of working and coaching individuals responsible for data entry in our County's HMIS.

ACDS staff is responsible for leading the County's Consolidated Plan and incorporated PIT Count and HIC data into the Plan. This data was used to evaluate the efficacy of Con Plan goals by evaluating the needs of the community compared to available resources.

ACDS staff is responsible for leading the County's Consolidated Plan and as such involves MD-503 CoC members in the process by inviting them to meetings, presenting at CoC meetings, and requesting written feedback on Consolidated Plan goals and strategies for addressing homelessness.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	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 AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	
	Require all programs to participate in CE where all families must be accepted w/o separation	Yes

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.	
	NOFO Section VII.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)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section VII.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 MD-503 collaborates with a broad network of educational youth service providers operating in local schools and place-based programs including:

(1) The County has a formal partnership with Catholic Charities to operate a day care center for children who experience homelessness that is co-located with the Sarah's House Family Shelter. The program assists families applying for childcare vouchers from DSS, which can be used throughout the County once permanent housing is secured.

(2). The MD-503 has a formal partnership with the local educational agency (LEA). The County's public school system has a designated Homeless Liaison who is an active member of the CoC's Board/coalition, and a lead on the committee for homeless youth.

(3) CoC partners with the McKinney-Vento SEA through the Youth Reach Count to administer the Youth Reach Survey to unaccompanied homeless youth at local high schools.

(4) Strategic partnership between the school system and CoC led to better access to resources such as school Pupil Personnel Workers (PPWs) identifying and referring at-risk and homeless families to a United Way funded prevention and rapid re-housing program. Additionally, the school system provided funding to support a dedicated case manager and housing locator positions meant to assist families with children who experience homelessness.

(5) The State of Maryland requires that the school district Homeless Liaison attend CoC meetings; there is an ex officio role on the CoC Board.

(6) The County funds Kingdom Kare, Inc.. which operates an early childhood education center, a mentoring program for students in the Meade High School feeder system, and the new West County Family Support Center, which provides educational services to teen parents and their children as they earn their GED. The Program works with homeless families that are identified by the school system.

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

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

(limit 2,500 characters)

The CoC has policies and procedures to inform homeless families and unaccompanied youth of their educational rights. Each family shelter program actively works with Pupil Personnel Workers (PPWs) and school personnel to implement these policies and enroll students in these services. The County’s PPWs maintain a comprehensive list of all students eligible for services including those children doubled up and at-risk of homelessness. PPWs work closely with the family emergency shelters to ensure families are linked to services. For example, at Sarah’s House Shelter, case workers and childcare staff communicate with PPWs about transportation, organize school orientation to educate families about rights and resources, arrange and host parent/teacher conference at the shelter; and together (PPW, teachers, and Program staff) arrange tutoring and other academic supports for families.

The County's school system Homeless Liaison actively participates in the CoC by attending Homeless Coalition meetings as a Board member, and helps to lead the Youth and Family Subcommittee meetings. The Homeless Liaison educates CoC Coalition members and other stakeholders about eligibility for education services and McKinney- Vento Programs that benefit children experiencing homelessness. The Homeless Liaison also meets with families residing in local motels to enroll children in school and services to ensure they have wrap-around services.

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

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

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	Yes
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	No	Yes
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–Collaborating with Victim Service Providers.	
	NOFO Section VII.B.1.e.	

	Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:
1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

The CoC strongly supports Trauma Informed Care as an evidence based practice. The updated MD-503 CoC program manual includes information about the The Violence Against Women Reauthorization Act of 2013 (VAWA) and outlines required protections for addressing the needs of domestic violence, dating violence, sexual assault, and stalking survivors. Programs are required to implement policies that ensure survivors are not denied benefits, shelter, or access to housing programs due past experience of violence or other trauma. This also supports the establishment of sustainable emergency transfer plans in cases when they are needed.

To ensure the needs of vulnerable populations are met, the CoC coordinates with the YWCA of Anne Arundel County, the region’s expert on issues related to domestic violence, sexual assault, teen dating violence, stalking, and trafficking. The YWCA is active on a MD-503 CoC Board of Directors, regularly attending meetings and updating the CoC with changes in trends and laws addressing these issues and sharing best practices for responses to those changes. In addition to being a member of the CoC, the YWCA is a member of the Anne Arundel County Human Trafficking Collaborative and has received a grant to build a shelter for youthful victims of trafficking. The County Human Trafficking Regional Navigator, a new position, is expected to work with the CoC providers to identify the service needs for this population.

The CoC annually hosts training on best practices, such as trauma-informed care, safety and planning protocols for servicing survivors, for service providers and community members. In addition to the YWCA, all shelters, Outreach, and housing providers have received training in trauma informed care and incorporate it into their program design. Additionally, on a County wide basis, in 2020, 20 individuals were trained in Trauma Informed Care for criminal justice as police are frequently the first contact for many survivors of domestic violence and sexual assault. In the past, the County’s police officers have received evidence based training from the SAMHSA Gains Center to demonstrate what a trauma informed police response is and how to incorporate those principles in their day to day work. This training was given to the Annapolis City Police Department in 2021 and will be included in the Anne Arundel County Police Academy in early 2023. The Police and Crisis Response Teams work closely with the County CE and home

1C-5a.	Annual Training on Safety and Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.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)

Training on Trauma Informed Care has been offered to the entire CoC staff, although not in the past year, as the focus of most meetings have been on addressing issues caused by the pandemic. However, the CoC plans to host a series of training, including one on TIC, in 2023. All three of the County’s shelters have incorporated trauma-informed care, strength based, victim centered care into their programs. Programs have protocols and guidance on how to best respond to individuals when they disclose experience of violence, and focus on strength based assessments. For example, Sarah’s House, the County’s Family shelter, staff are trained annually on trauma informed care through Catholic Charities. Each staff member is required to take supplemental classes (TIC for Children, TIC for Supervisors, etc) based on their job titles and duties that are offered through Relias (aCChieve Learning). Additionally, each year Sarah’s House’s management team also completes two Trauma Informed Environment assessments in order to ensure the program is serving people in the most conducive spaces. When a survivor of domestic violence is identified, Sarah’s House works in close collaboration with the YWCA, to develop a safety plan, if necessary, or to ensure they receive victim centered care. Sarah’s House has safety and planning protocol to ensure that a family is safe which may include referring them to the safe house given Sarah’s House is not a secure location. Sarah’s House staff will work closely with the YWCA to make the transfer as long as it is the survivors choice. Case managers connect and then remain connected to ensure that there is a continuity of support for those receiving services. Other programs have similar training programs and procedures.

The YWCA works closely with the County’s coordinated entry staff to provide training in best practices and safety and planning protocols and as a result the CE uses a lethality assessment to determine risk. One of the initial questions in the CE intake process asks “are you in danger”. If there is any indication that there is a risk of danger, the applicant is referred via a warm handoff directly to the YWCA 24-hour hotline for further assessment and placement in the secure YWCA Safe House. If a Safe House bed is not available in the County, the YWCA works with a network of Safe Houses throughout the State in order for safety needs to be met prioritizing a victim’s rights, safety, choice, and control. The YWC

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC uses 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 MD-503 CoC utilizes various data sources to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking. The YWCA of Annapolis & Anne Arundel County, the organization focused on domestic violence, sexual assault, trafficking/sexual exploitation, stalking and teen dating violence. The YWCA is identified by the Governor’s Office of Crime Control & Prevention as the State’s “Comprehensive domestic violence and sexual assault provider” for Anne Arundel County. This means that the organization provides the full array of crisis response services, ranging from shelter to hotline to legal representation and counseling. The YWCA maintains a separate but comparable database of services provided and serves over 1000 survivors annually. The CoC relies on the data provided by the YWCA. The other source data is captured in the County’s HMIS system, as it is estimated that approximately 25 percent of those served in County’s emergency shelters and housing programs have a history of DV.

The de-identified aggregate data has been used to develop programs directly benefiting those experiencing homelessness and domestic violence or trafficking. The YWCA has a Safe House to serve 40 individuals including children, operates a ESG-CV funded Rapid Re-housing Program, recently received funds for the development of a shelter for teens who are victims of trafficking. During the Pandemic, data was used to create separate motel placement (de-concentrate the shelter)for survivors of DV to ensure safety.

1C-5c.	Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
1.	the emergency transfer plan policies and procedures; and	
2.	the process for individuals and families to request an emergency transfer.	

(limit 2,500 characters)

CoC protocols prioritize safety by providing prompt risk assessment and safety planning; and 24-hour access to domestic violence (DV) providers. The YWCA is the primary provider for DV, dating violence, sexual assault and stalking and offers 24-hour access to case managers and intake staff for prompt response to individuals in crisis. The YWCA operates a DV safe house shelter and offers licensed therapy, legal services, support groups, hospital accompaniment for SAFE exams, and community education/outreach. DV survivors have the housing choice to enter the Safe House or Sarah's House family shelter if they are not in active danger. Sarah's House has 24 hour staff ensuring all emergencies are handled efficiently. All entryways are locked to ensure safety.

The CoC emergency transfer plan is in accordance with VAWA and allows DV survivors who are in imminent risk of further violence based on their placement location to request an emergency transfer to a new placement; and if another placement is available the CoC will accommodate the request. Documentation of the threat of further violence and that they were a victim of DV within 90 days of the transfer request are required.

In practice, those at risk would go through the YWCA 24-hour hotline and access the County's Safe House. If no bed is available in County but is needed, the YWCA will work with its network of DV providers with the State of Maryland to locate a safe placement. The individual always has the choice to not seek DV related services and be assessed for no DV shelter and housing programs.

Participants of PSH and Rapid Rehousing Program, as tenants, may request an emergency transfer if it is needed. Programs will follow the guidance outline in the CoC manual on Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking.

** **

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

Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area.

(limit 2,500 characters)

The YWCA provides a full continuum of victim-centered services that address the specific needs of this client population that ensures victim self-determination, safety, and self-sufficiency through the following services: Residential services (emergency safe house shelter, safe alternative shelter through hotel placement and rapid rehousing); educational and wellness services; 24-hour crisis hotlines for domestic violence; individual trauma counseling; case management; advocacy; victim and trauma support groups; art and play therapy; hospital accompaniment; legal representation in the process of obtaining peace and protective orders and domestic violence-related divorce and custody; community education and outreach and education services, and abuse intervention programming.

All CoC housing and shelter services are available to survivors if they choose not to use the services offered by the YWCA. They would access these to service through the CoC. In practice, the YWCA, once safety is established, refers survivors to the CE for shelter and housing placement. Confidentiality protections are in place to ensure safety.

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

(limit 2,500 characters)

Safety Protocols. The CoC's coordinated entry is a staffed call center and CE staff work closely with the YWCA, police, and Crisis Response Team to ensure the safety of a victim of domestic violence. One of the initial questions in the CE intake process asks "are you in danger". The CE uses a lethality assessment to determine risk and when a homeless or at-risk individual is identified by the CE to be in need of domestic violence services, the YWCA will be contacted by phone and a warm hand off made to the YWCA hotline staff. If the individual does not seek DV specific services, they will be eligible for all CE services and referrals to shelter or housing. If a client does not wish to receive DV specific services, they will be informed of the ways to ensure his/her safety, including contacting law enforcement, and Crisis Response.

Planning Protocols. The CE staff completes lethality assessment and makes the appropriate referral based on the wishes of the individuals.

Confidentiality Protocols. In compliance with VAWA, the client's location and information related to the DV incident are kept confidential unless the client provides written permission to release the information or if disclosure is required by law.

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

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that 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 VII.B.1.f.	

Describe in the field below:
1. whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
2. how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
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)

As the lead CoC member, ACDS monitors anti-discrimination rules and regulations and updates all CoC members on significant developments or changes. ACDS ensures that trainings regarding anti-discrimination and fair housing laws are provided at least annually for all CoC members. Written training materials are available to CoC members. Also, ACDS staff, including ACDS general counsel, are available to assist CoC members with specific issues or questions. With regard to admission, all programs accept clients from the CE process, which also adheres to the established anti-discrimination rules.

All CoC members are required to have anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination. In addition to training regarding general anti-discrimination and fair housing laws, ACDS insures that CoC members are provided with training regarding HUD’s Equal Access Rule, which prohibits discrimination based on sexual orientation, gender identity, or marital status and prohibits family separation. All CoC members agree that CoC anti-discrimination policies will be followed, and each CoC member is required to have their own agency and project-specific anti-discrimination policy that adheres to the law and CoC guidelines as a condition of funding. ACDS is available to assist all CoC members with development of policies that are appropriate to their particular program.

CoC members agree in writing to ensure they have anti-discrimination policies in place that are consistent with CoC-wide policies. ACDS monitors all programs for compliance. Additionally, since all referrals to shelters and most housing programs come via the CoC’s Coordinated Entry process, the CoC is able to monitor the acceptance rate, treatments, and patterns of homeless service providers.

All CoC providers are required to have grievance policies that allow applicants and participants to formally dispute the provider’s decisions and actions. The policy must include the method that an applicant would be made aware of the provider’s grievance procedure and the formal process for review and resolution of the grievance. In the event a participant is unsatisfied with the results of the grievance process with a CoC provider, the provider will advise the participant that ACDS can be contacted to lodge a complaint or request additional assistance.

1C-7.	Public Housing Agencies within Your CoC’s Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.	
NOFO Section VII.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 FY 2021 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 2021 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?
Housing Commission of Anne Arundel County	7%	Yes-HCV	Yes
		No	No

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

Describe in the field below:

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

(limit 2,500 characters)

The Housing Commission of Anne Arundel County (HCAAC) Director of Housing is an active member of the CoC board and is the largest PHA in the County. While the HCAAC does not have any admissions preferences, they have implemented and made available HCV through a number of avenues that directly benefit individuals and families experiencing homelessness. In collaboration with the CoC, HCAAC has set aside 25 project-based vouchers available for homeless families exiting shelter and 8 project-based vouchers for homeless individuals. The CoC and HCAAC also developed a move-on strategy for clients in PSH who still need a housing subsidy, but no longer require the supportive services component to free up CoC-funded PSH units for more vulnerable and chronically homeless individuals. Additionally, as the HCAAC was not awarded EHP vouchers directly in response to COVID, the HCAAC provided 60 emergency tenant-based housing vouchers that are specifically targeted to families experiencing homelessness or housing instability in the County. The vouchers are issued on referral from the CoC Coordinated Entry system. Of the 60 vouchers made available, 59 have been issued. Twenty-nine (29) of the new voucher holders have moved into housing, and the rest are searching for housing with the help of the CoC. The use of vouchers is a challenging process due to rising rents in the area. Additionally, the HCAAC received ARPA funds and purchased a 16 unit apartment complex that had been used as weekly, short term housing. It is anticipated that HOME ARP funds will be used to rehabilitate the property and the property used as transitional or “stepping stone” housing for households experiencing homelessness. Each household will be offered a HCV once they are ready to move on. The HCAAC is a strong partner in the CoC and has offered and supported creative solutions for housing the homeless.

The Housing Authority of the City of Annapolis (HACA) does not have homeless preference at this time. The housing voucher program is closed for new applications. ACDS, the CoC lead, implemented an eviction prevention program targeting HACA residents during Covid as a means to prevent mass eviction. A total of 178 households were prevented from becoming homeless. New HACA staff are invited and encouraged to attend CoC meetings. The CoC will continue to work with HACA to re-adopt a homeless admissions preference.

N/A

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	No
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section VII.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)	No
2.	Family Unification Program (FUP)	Yes
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:	

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section VII.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)?	Yes
		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.	Mainstream Vouchers, HOME ARP

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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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?	No
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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
This list contains no items

1D. Coordination and Engagement Cont'd

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition.	7
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 2022 CoC Program Competition that have adopted the Housing First approach.	7
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 2022 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 VII.B.1.i.	

Describe in the field below:

1.	how your CoC evaluates every recipient—that checks Housing First on their Project Application—to determine if they are actually 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 the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

The primary method for ensuring the CoC funded PSH and Rapid Re-Housing programs are actually using a Housing First approach is that they are required to accept their clientele from the CoC’s coordinated ACCESS Housing List, a shared vulnerability waitlist, and participate in case conferencing (often weekly if beds or units are available). All programs must have a referral from the County’s Homeless Coordinator documenting and verifying eligibility. Through this case conferencing, the CoC is able to the best of its ability to ensure programs are not denying applicants due to lack of income; treatment compliance, or having a criminal background, and that services are client driven and not mandatory. Leases are prohibited from having a service requirement. While challenging, programs are encouraged to locate landlords that do not impose stringent requirements that would prevent them from obtaining housing.

The following are some of the factors and indicators the CoC uses to evaluate the programs. Programs are monitored to ensure that (1) housing and service goals and plans are tenant-driven; (2) motivational interviewing is encouraged to use be used as a mode of case management and supportive services emphasize engagement and problem-solving over set goals; (3) participation in services or compliance with service plans are not conditions of tenancy, and (4) tenant rights are respected. Tenants are not terminated for substance use and substance use in and of itself, without other lease violations, is not considered a reason for eviction. Efforts are made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if a tenancy is in jeopardy and whenever possible, eviction back into homelessness is avoided. The CoC has a 97% rate of housing stability in its PSH programs.

ACDS and the County’s Homeless Coordinator, manager of the CE and Access Housing list, actively work with providers throughout the year to ensure participants are obtaining and maintaining housing. Projects are evaluated through its annual monitoring process by reviewing files of program participants to ensure that Housing First principles are in practice and that participants are not denied entry due to lack of income, substance use issues, or prior criminal activity.

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

(limit 2,500 characters)

MD-503 CoC has a comprehensive street outreach effort coordinated and operated by the Anne Arundel County Department of Social Services (DSS). The Street Outreach Team consists of five full time outreach workers targeting Glen Burnie, Annapolis, Pasadena, Brooklyn, and Laurel areas. The team also has a full-time housing case manager dedicated to working with individuals and families to obtain housing.

The CoC Homeless Outreach Team covers 100% of the County.

Outreach workers visit all known encampments and street locations a minimum of once a month but frequently more often to build relationships and link persons experiencing homelessness to services. The CoC Homeless Outreach Team conducts outreach Monday-Friday, and the Crisis Response Team is available 24/7 for emergency situations.

The Outreach Team outreaches those most unlikely to receive services by working with individuals in known encampments and visiting new locations, encampments, and cars identified by word of mouth, receiving tips from concerned citizens through the CE, from police, and Crisis Response line. Outreach workers use a person-centered approach with sensitivity to the lived experiences of homeless individuals when providing services. Workers meet clients where they are, literally and figuratively, thereby engaging the clients least likely to request assistance. Services, when possible, are brought to the encampments. For example, one member of the Team completes applications for income benefits; staff from the County's Health Department has been brought to the camp to give flu shots and COVID vaccines have been offered; and housing assessments, such as VI-SPDAT, are administered as new individuals are identified to place clients on the coordinated Access Housing List for permanent supportive housing. Further, due to the agency being the lead agency for Coordinated Entry for emergency shelter and permanent supportive housing, the team has been directly engaged with assessing and working with helping them obtain shelter and housing.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section VII.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:

		Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		
	Provided mental health training - Trauma Informed Care to police	Yes	No

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).		
	NOFO Section VII.B.1.I.		
		2021	2022
Enter the total number of RRH beds available to serve all populations as reported in the HIC—only enter bed data for projects that have an inventory type of "Current."		39	45

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section VII.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:		

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	TANF–Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	
	Trauma-Informed Care	Yes

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section VII.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, 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)

The CoC regularly hosts training on available resources with up-to-date information and all CoC homeless service providers have procedures and systemically help program participants enroll in mainstream benefits. The County Department of Social Services (DSS) has a benefits eligibility staff on-site at the County’s largest family shelter. The Homeless Outreach Team enrolls homeless persons in Food Stamps and TANF, and the general assistance program. Programs utilize SOAR to apply for SSI/SSDI. The County has two ACT Teams that also link homeless to mainstream benefits. The Homeless Coordinator holds periodic meetings for case managers to educate all on available resources and new programs. Updates on mainstream resources are emailed to the 100+ person CoC distribution list on an as-available basis.

CoC has a relationship with the County Health Department (HD), Mental Health Agency and DSS to assist with enrollment in health insurance. CoC frequently collaborates with the HD when working with special needs populations who are in HUD-funded housing, such as persons living with HIV/AIDS. Homeless Providers staff work to enroll all eligible clients in Medicaid so they can access services. The Mental Health Agency has a crisis response hotline that links persons to needed services, such as mental health treatments and substance abuse programs. Arundel House of Hope offers a recovery center for the homeless, as well as several housing programs tailored for this population. Staff provide education to clients around eligible services that extend past physical health, such as mental health services, Medicaid transportation services for medical appointments, home and community-based services, substance use treatment, and supported employment opportunities. Effective use of these benefits provides comprehensive services and preventative services that ensure clients remain stably housed and reduce emergency costs. Many of the CoC PSH programs utilize state and federal Medicaid – both grant funded and fee-for-service funds – for mental health/health services for participants.

The Anne Arundel County Mental Health Agency is the lead agency for S.O.A.R. Staff are regularly trained to provide S.O.A.R. assistance to help participants to apply for SSI/SSDI. The agency is responsible for ensuring S.O.A.R. training is available in the County. At this time, new staff can be trained through the completion of an online virtual S.O.A.R. offered through the State o

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

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

(limit 2,500 characters)

During the pandemic the County opened an emergency hotel shelter to serve approximately 90 homeless persons which allowed for social distancing and compensated for reduced shelter capacity. Other congregate shelter programs were rehabilitated and restructured to allow for increased social distancing. Post pandemic, the use of the Red Roof Inn is no longer financially viable; however the CoC is developing plans to open new programs including:

1. The County has allocated \$300,000 in funds for the development of a new non-congregate shelter or interim housing for older adults and those with disabilities who are experiencing homelessness. The new non-congregate shelter, interim housing program is anticipated to have 7-8 new shelter beds;
2. HOME ARP funds are being recommended to be provided to the Housing Commission of Anne Arundel County (HCAAC) for the acquisition and rehabilitation of a 16-unit apartment complex that has operated as a weekly rental long term hotel to provide transitional shelter allowing families to identify and address any barriers to housing. The HCAAC is committed to providing a Housing Choice Voucher to each family upon exit. The CoC is also exploring other options and funding sources to increase the amount of non-congregate housing.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section VII.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)

The Anne Arundel County Health Department is the lead agency with regard to developing the CoC - wide policies and procedures to respond to infection disease outbreak and provide the guidance and direction necessary to safeguard homeless programs including people experiencing homelessness and staff. The Health Department, working closely with the County Executive office and Emergency Management team have the expertise and resources necessary to quickly mitigate and address any new infectious disease outbreak. For example, during the Covid-19 Pandemic, the CoC met monthly via Zoom to discuss homeless services and communicate information regarding COVID-19. Information from the Health Department was regularly communicated via email to the CoC email listserv, which has over 100 agency members. The HD communicated local COVID-19 transmission data to homeless service providers and provided regular guidance on COVID-19 response protocol, including individual meetings with the congregate shelters to create a COVID-19 safety plan. Therefore, the primary policy the CoC follows and has incorporated into its planning is to work closely with the Department of Health and to follow their policies and procedures to respond to infectious disease outbreaks.

The Health Department employed the following method during the Pandemic to mitigate and prevent the spread of infectious disease and it is anticipated that a similar effort would be deployed with other contagious diseases including Monkeypox, flu, and Covid. The Health Department and Emergency Management team, convened a Vulnerable Populations Group (VPG) that served as a liaison between the hospitals, homeless services providers and the Department of Social Services. The VVPG coordinated COVID testing prior to shelter entry, and provided weekly testing at emergency shelters. The Health Department also communicated updated Local, State and CDC protocols, and provided PPE to the CoC as needed. Health Department officials visited homeless shelters to provide guidance on safe social distancing and made a plan with homeless providers on how to safely house and shelter clients within the congregate setting. The Health Department had regular meetings with the VPG and the Department of Social Services to coordinate vaccine distribution and made vaccines available to homeless persons as a vulnerable priority group. Vaccines were offered directly on site at local homeless service agencies for both clients and staff.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section VII.B.1.o.	
	Describe in the field below how your CoC effectively equipped providers to prevent or limit infectious disease outbreaks among program participants by:	
1.	sharing information related to public health measures and homelessness, and	
2.	facilitating 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 would use the planning processes developed in response to the Covid-19 Pandemic to collaborate with the Health Department ensuring information related to public health measures and homelessness were shared broadly. For example, in response to the Covid-19 Pandemic, the CoC met monthly via Zoom to discuss homeless services and communicate information regarding COVID-19. Information from the local Health Department (HD) was regularly communicated via email to the CoC email listserv, which has over 100 agency members. The HD communicated local COVID-19 transmission data to homeless service providers and provided regular guidance on COVID-19 response protocol, including individual meetings with the congregate shelters to create a COVID-19 safety plan. Guidance from the CDC regarding mask use and PPE was communicated to homeless service providers by the HD and ACDS, the lead agency, including educational materials for staff and clients on handwashing and mask-wearing.

ACDS staff, the CoC lead participate in monthly meetings held by Maryland DHCD which provides resources, information sharing, best practices, up to date information on COVID and MPX; information about vaccination clinics and eligibility that can be incorporated by the CoC in addressing. The meetings are open to all MD-503 CoC members to attend.

The Vulnerable Population Group was created to facilitate communication between public health agencies and homeless service providers and to coordinate among agencies to share information and to obtain supplies. For example, Bank of America provided the Light House with a large donation of 180,000 masks, 50,000 gloves, and 10 cases of hand sanitizer and the Light House distributed a portion of these supplies to local partners. The Health Department officials also visited homeless shelters to provide guidance on safe social distancing and made a plan with homeless providers on how to safely house and shelter clients within the congregate setting. Based on this guidance, all the shelters reduced capacity and reconfigured space to maximize social distancing. Hotels were used to shelter the overflow capacity. Washing stations were established near larger known encampments and the health department joined street outreach staff to reach homeless less likely to obtain services, information, testing, and vaccinations.

1D-9.	Centralized or Coordinated Entry System—Assessment Process.	
	NOFO Section VII.B.1.p.	
	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)

MD-503 CoC has Coordinated Entry (CE) for both its shelter system and permanent supportive housing programs. The CE system covers 100% of the County and is managed by a Triage Specialist. MD-503 has a Homeless Outreach Team and Crisis Response Team, which reach clients least likely to apply for assistance (chronically street homeless).

The CE uses a comprehensive standardized assessment tool that prioritizes homeless individuals and families based on the following ratings: (1) Housing Rating - CoC gives first priority to those on street (2) Income Rating- priority is given to those with no income; (3) Safety Rating - priority is given to those fleeing domestic violence and choose not to utilize DV specific programs (In most cases DV survivors are referred to the DV Hotline for services); (4) Health Rating priority is given to those with chronic health problems. Shelter priority is given to most at-risk based on the assessment vulnerability score. Clients are prioritized based on need for shelter utilizing the risk assessment, and therefore people most in need of assistance are served first. Assessments are entered into HMIS in real time to ensure timely services.

The CE Triage Specialist coordinates weekly case conferencing meetings with homeless service providers to ensure smooth transitions and placement as well to provide ongoing feedback to improve the coordinated entry process. Feedback is welcome by the CoC from those experiencing homelessness as well as advocates assisting individuals and families through the process.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section VII.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)

MD-503 CoC has Coordinated Entry (CE) for both its shelter system and permanent supportive housing programs. The CE system covers the entire County. Anyone can be assessed for shelter using a universal assessment tool via telephone. The CoC also has a Homeless Outreach Team and Crisis Response Team, which reach clients least likely to apply for assistance (chronically street homeless; mentally ill). Both teams assist with CE assessment. CE is affirmatively marketed on ACDS and County websites, listing contact information for each CE location and homelessness prevention program. Crisis Response Team provides 24-hour/7 days a week referrals for accessing CE and homelessness assistance resources. Therefore, the CE system is well-advertised and easily accessed. Outreach and services are conducted with a person-first approach, focused on client choice, sensitivity to client lived experiences, and clear CE policies so clients understand the process.

Shelter priority is given to the most at-risk based on the assessment vulnerability score. Individuals residing on the street are given priority to shelter. Assessments are entered into the Homeless Management Information System (HMIS) database in real time to ensure timely services.

Those who seek Permanent Supportive Housing are additionally screened with the VI-SPDAT (Vulnerability Index – Service Prioritization Decision Assessment Tool). The tool is used to prioritize individuals and families experiencing homelessness and score at a high level of vulnerability quicker access to housing resources. Higher scoring individuals are offered housing based on their preferences and assigned to a housing locator/case manager who will assist them in obtaining housing in a timely manner.

The CE Triage Specialist coordinates weekly case conferencing meetings with homeless service providers to ensure smooth transitions, placement, and reduce burdens. The committee is committed to ensuring that all that access the CE are sheltered or served within the County’s homeless system.

1D-10.	Promoting Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section VII.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.	08/15/2022

1D-10a.	Process for Analyzing Racial Disparities—Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section VII.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)

The CoC’s process for analyzing whether any racial disparities are present in the provision or outcome of homeless assistance involves a comparative review of data by program type. The CoC evaluates whether racial minorities are able to access housing programs or other resources at the same rate as non-minorities. We do this by comparing the total population eligible for the type of program broken down by race and then review outcome data again broken down by race. If the percentage of those served or receiving housing (outcome) is greater than that of the population as a whole than we would determine that racial disparities are not present; however, it is clear that the percent served by the program and receiving housing is less than that of the population, then we would need the program to address racial disparities in the program. Bottom line, the CoC goal is to ensure that all families and individuals are able to access the housing of their choice. The CoC wants to ensure that racial minorities have equal access to permanent housing opportunities.

For example, the CoC evaluated its racial equity in the provision of rapid re-housing (RRH) services. During LFY 2022, the population residing in the County family emergency shelter was approximately 54% African American. A significant portion of RRH clients, over 89%, were residing in an emergency shelter immediately prior to RRH program entry. So, the CoC evaluated if the percentage of racial minority families accessing RRH services was congruent with the percentage of racial minority families residing in the emergency shelter. The goal was to assess equal access to permanent solutions, and to ensure that permanent housing solutions were not offered to white households at a higher rate. The evaluation revealed that during Fiscal Year 2022, about 70% of family shelter residents identified as a racial minority, and approximately 54% identified as African American. In LFY 2022, approximately 76% of CoC-funded RRH participants identified as a racial minority, with about 68% identifying as African American. Based on this evaluation, the CoC concluded that RRH services were equitable and in this regard, racial equity in homelessness. This analysis is completed across program types (e.g. PSH, Other housing etc.).

The CoC identified a slight disparity in housing outcomes for individuals experiencing homelessness. In the County, the homeless population residing on the street have a higher populatio

1D-10b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.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.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

With regard to the disparity identified above in the housing outcomes of the County’s individuals experiencing unsheltered homelessness, the CoC has been exploring the addition of new questions pertaining the impact of race on health disparities in its assessment tool - the VI-SPDAT. While the assessment tool has not been formally changed as of yet due to some legal questions, awareness of this disparity will bring a racial component into the case conference meeting when referrals for PSH programs are held.

Another action the CoC has taken to address known disparities is in the implementation of the County ERAP eviction prevention program. Recognizing that the minority communities would be at particular risk of eviction and homeless, the program was targeted to the County’s lower income and minority communities. As a result of the targeted assistance, in the ACDS EEP program, 77% of those served identified as a minority. Statistically, approximately, 27% of Anne Arundel County identify as a racial minority. The action targeting ERAP funding may have significantly decreased the number of new families in the homeless system.

The Anne Arundel County Continuum of Care has taken steps to address disparities and unconscious bias in the provision of services and also outcomes for homeless assistance. We support services that promote aging with dignity, achieving empowering careers, healing from trauma and addiction, securing stable housing in inclusive communities, preparing for educational success, and feeling welcome as immigrant neighbors. We recognize that many of our clients are experiencing the world with many cultural and other identities, as well as limited English proficiency. We see the communities we work with as part of the solution, focusing on each individual’s strengths and goals and encouraging participation in program design from those with lived experience.

Additionally, CoC providers are also taking actions to address known disparities. Catholic Charities which operates Sarah’s House Rapid Rehousing Program uses an equity lens to review its program and noted that many of their Black and African-American clients have only been able to qualify for housing in areas closer to the Baltimore City due to financial challenges including but not limited to lower credit scores, lower income from employment, and higher debt and develop programs, such as provide landlord incentives to address these barriers.

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

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.
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(limit 2,500 characters)

The MD-503 CoC will continue to monitor and evaluate the CoC programs through an equity lens as outlined above in question 1D10a to ensure that no group is able to disproportionately have unfair advantage and access to PSH or housing opportunities. The CoC will continue to track the results of this analysis and use it to make any necessary programmatic changes to prevent or eliminate disparities. Analysis and tracking will be completed on a quarterly basis throughout the next fiscal year. In addition, CoC member agencies also have been working to analyze their agencies through an equity lens.

Some examples of system-level steps that have been taken to address disparities include special committees that are tasked with analyzing both staff and client policies, practices, and procedures with an equity lens. This includes the Department of Social Services' (DSS) Diversity Equity and Inclusion (DEI) Committee, which is led by the Director and supported by the Quality Assurance Manager. This group was specifically created to ensure undue barriers are present neither in staffing practices nor interactions with customers.

Sarah's House also implements ongoing staff development training and hosts open agency-wide affinity groups that include conversations on current social and racial events in our nation. Additionally, they consider feedback from annual customer satisfaction surveys and annual staff assessments to monitor and evaluate the efficacy of investment into equity training. They reported greater staff awareness of unconscious biases and how those biases impact approach to service delivery, as well as greater transparency and understanding around race and identity in general. Through research and sharing this experience and others, our CoC has developed more empathetic connections with folks who receive services and, ultimately, an incredible ability to effect change.

Anne Arundel County's Mental Health Agency goes as far as to address the goals of equity and proportional representation in their mission statement. To that end, the Agency formed the AIDE (Address Inclusion, Diversion, and Equity) Group, which is charged with analyzing the Agency's policies and procedures with an equity lens as well as creating and operationalizing DEI events and opportunities for education agency-wide.

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

People with lived experience of homelessness, as well as other lived experiences like BIPOC, women, and LGBTQ+ are represented in service delivery and involved in decision-making throughout Anne Arundel County. There are concerted efforts to involve folks with lived experience on Boards of Directors, advisory boards, and special committees. For the past ten years, Arundel House of Hope’s Board of Directors has included two people who self-identify as having experienced homelessness, substance abuse, and mental health challenges; unfortunately after the COVID-19 pandemic, one member is no longer able to serve on the Board. The Department of Social Services has a new recommended Board Member who has shared a background of homelessness in her youth. Associated Catholic Charities’ agency leadership, as well as staff, include BIPOC and women; they also collect employee demographic and sexual orientation data biennially in an anonymous employment survey. The Mental Health Agency of Anne Arundel County incorporates providers and program representatives with lived experience on their Board’s Steering Committee, which assists with developing plans and goals for the agency. And finally, People Encouraging People is explicitly setting goals to increase equity and developing a plan to increase program enrollments. Until just recently, PEP’s Board also included an expert with lived experience on their Board of Directors; unfortunately they passed away just a few months ago and that position currently remains vacant. PEP regularly consults a Community Advisory Board for input into decision-making.

Beyond these efforts driven mainly by our providers who work hard to remain united in their energy and direction, the CoC announces all opportunities, meetings, materials, and resources via email distribution list to over 150+ recipients; anyone can request to be added to this list, and anyone can be added at the request of another member. This past year, we have had three new individuals with direct experience with homelessness request to be added to our listserv either themselves or by another member of the Coalition. Many times, these new participants share their experiences during meetings and listen and weigh in on Coalition-wide discussions and decision-making processes. One of our Coalition’s current Co-Chairs has experienced homelessness in her past, and her insight is invaluable for developing policies and understanding what is feasible in the landscape of homeless

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

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

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

4.	Included in the decisionmaking processes related to addressing homelessness.	2	0
5.	Included in the development or revision of your CoC's local competition rating factors.	1	0

1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.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)

Providers in our geographic region make a regular practice of hiring people with lived experience with homelessness and share personal identities with the people they serve. For example, PEP has several managers that identify as a part of the LGBTQ+ community and who represent their community every day while they do this important work. To support these staff and also recognize general need for support, training is offered to all employees in regard to equity and factors that effect it, like race, gender, sexual orientation, etc.

Sarah's House hired two managers within the last two years who have lived experience with homelessness. In addition, both administrative assistants at Sarah's House are former clients of the program. Their Director shared that the insight and perspective that they contribute to the team is priceless and helps to guide decisions on a daily basis. In addition to contributing to making management level decisions, both of these staff often help with training new staff members to ensure that they are aware of the clients' perspectives at all times.

The Light House has developed a catering business and a full service restaurant in the City of Annapolis which provides opportunities for individuals with lived experience of homelessness. Arundel House of Hope regularly employs those with lived experience to staff their day center and to be house managers of their housing programs. Beginning in the calendar year 2023, the Anne Arundel County Continuum of Care will offer stipends to representatives with lived experience who lend their expertise to the Coalition's Board. The CoC will be using HSP funds awarded by the State to support this initiative. Lived experience representatives will have current or previous homeless experience as defined by HUD and must currently reside in the County. The CoC will offer a stipend amount for time spent in meetings and contributing expertise, as well as strive to meet accommodations that would remove barriers to service to the CoC, like transportation or technology costs.

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

Describe in the field below how your CoC:

1.	how your CoC routinely gathered feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance; and
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2.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness
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(limit 2,500 characters)

The MD-CoC and the providers that make up the CoC gather feedback from people experiencing homelessness and people who have received assistance through programs offered in our County. Shelter and housing providers invite those experiencing homeless to attend meetings. Zoom and remote meeting have made it possible for people experiencing homelessness to participate in meetings. The CoC will provide a stipend to further reduce barriers and as an incentive to participate in meetings. Feedback is also obtained through client satisfaction surveys that are completed either at the completion of a program or at regular intervals throughout the year. There are also various forms of grievance policies and complaint procedures that are permitted and upheld for clients to ensure their challenges are aptly addressed. Complaints are sent to the lead CoC. At Arundel House of Hope, for example, their grievance policy allows each client to have an issue reviewed by the Executive Director, while at Sarah's House, client concern forms are available at the front desk, which are then reviewed by and follow up on by the appropriate manager. Finally, most programs have a Resident or Advisory Committee that meets monthly and consists of clients who represent each building that is a part of the program. Clients express concerns directly to Program Assistant Supervisors who discuss issues with the management team for evaluation and further action.

Provider agencies and members of the Anne Arundel CoC also regularly participate in meetings for other groups throughout the County where peer membership is present and where other perspectives are prioritized and expanded upon. Examples include gun violence groups like the Gun Violence Intervention Team, substance abuse resource and advocacy groups like the Opioid Intervention Team, the Mental Health Task Force with Anne Arundel County Public Schools, or veterans groups like the Veteran's Commission for Suicide Prevention and others. Generally, membership on new committees and establishment of new groups and affinities is intentional through the inclusion of those with relevant lived experience that represents the diversity of our County.

In Anne Arundel County, with the exception of the need for affordable housing, the CoC does not usually hear complaints from clients who experience programs and services.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that 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)

Members of the CoC, along with a broader coalition of housing advocates, have advocated and worked to increase opportunities for new affordable housing development through the following actions: (1) advocated for Workforce Housing Legislation which was passed by the County Council in 2021. During the last 12 months, members of the CoC provided input into the development of the regulatory processes to implement this new Workforce Housing conditional zoning provision, which includes a 50 percent reduction in water and sewer fees for new affordable housing units built under the law, in addition to zoning incentives for creating new affordable developments. As a result of the Workforce Housing policy, at least one new multi-family rental project was initiated and one new affordable multi-family project serving seniors was initiated; and (2) advocate and explore strategies to adjust Adequate Public Facilities (APF) requirements and how they are used to prevent new affordable family housing.

In addition, members of the CoC worked to address the affordability barrier by reducing taxes for affordable housing developer as well as increasing funds for new projects (1) supported affordable housing developers in their efforts to obtain Payments-in-Lieu of Taxes (PILOTs) agreements as a financial incentive for developers building affordable rental housing. In the past year, the County introduced PILOT legislation, which was passed by the County Council to support the creation of 406 new units for older adults and families as well as to rehabilitate and preserve 757 units for families; (2) advocated in the creation and endowed of a Affordable Housing Trust Fund with \$10 million in one-time County general funds and continues to advocate for creation of a revenue stream for ongoing funding. This will increase the available funding for new affordable housing development in the County in the next year.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.B.2.a. and 2.g.	
	You must upload the Local Competition Deadline attachment to the 4B. Attachments Screen.	

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC's local competition.	08/10/2022
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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 VII.B.2.a., 2.b., 2.c., and 2.d.	
	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.	No
5.	Used data from comparable databases to score projects submitted by victim service providers.	No

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 VII.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)?	
2.	How many renewal projects did your CoC submit?	
3.	What renewal project type did most applicants use?	

You must provide a response for elements 1 through 3 in question 1E-2a.

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

Describe in the field below:

1.	how your CoC collected and 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)

The MD-503 CoC gave preference as evidenced by awarding higher ranking and rating points thereby prioritizing projects that serve the following four vulnerable populations with the most severe needs the chronically and vulnerable homeless and homeless families.,

In order to determine how each project has successfully housed program participants in permanent housing, the CoC Application Review Committee reviewed APR and HMIS generated program data. The CoC also asked all renewal projects to address this question in a supplemental application explaining their outcomes, success, and any barriers experienced in helping participants locate permanent housing.

Again, in order to determine how long it takes to house people in permanent housing, the CoC Application Review Committee reviewed the projects APR and HMIS data and reviewed the program entry date and the date when a participant was housed. This number did not typically include the total time a participant is homeless but from the point of referral.

Given all of the PSH renewal projects are required to accept from the CoC By-Name list the most vulnerable, chronically homeless individuals identified in the County, the CoC Application Review Evaluation committee takes this into consideration, Many of these clients have multiple barriers to obtaining housing and given the tight rental market in Anne Arundel County, the CoC recognizes the challenges.

CoC recognizes the challenges projects that provide housing and services to the hardest to serve populations may result in lower performance levels. The CoC Review Committee takes this into consideration and looks at the programmatic components that mitigate some of the challenges. For example, the review committee looks to see if providers have landlord mediation, incentives, and a strong housing search component.

1E-3.	Promoting Racial Equity in the Local Competition Review and Ranking Process.	
	NOFO Section VII.B.2.e.	
	Describe in the field below:	
1.	how your CoC obtained input and included persons of different races, particularly those over-represented in the local homelessness population;	
2.	how the input from persons of different races, particularly those over-represented in the local homelessness population, affected how your CoC determined the rating factors used to review project applications;	
3.	how your CoC included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; and	
4.	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)

1. The CoC Ranking and Review Committee was composed of a diverse group of stakeholders from groups that work directly with people experiencing homelessness. An announcement was made during the CoC meetings on August 5 and September 9 to recruit Committee members, including a special ask to include people with lived experience, if available and willing to support this effort. Approximately 40% of participants were people of color and one member of the CoC Ranking and Review Committee has lived experience of homelessness. Approximately 85% of the Committee were women.
2. The CoC takes care throughout the year to continuously solicit and incorporate feedback from people with lived experience and folks who identify as non-white. While special weight is not bestowed upon these individuals and tokenism is avoided, it is understood that varying perspectives are important and that we all do not have the identical understandings of the homeless experience.
3. In the local homeless population, racial minorities are overrepresented, specifically African Americans. While the Anne Arundel County CoC does not solicit members based on their race or background, diverse professional expertise and personal experiences are lifted up as both valuable and valid. Providers in the region have been hiring increasingly diverse staff, which in turn drives the diversity of the CoC and increases representation from folks with varying backgrounds.
4. The CoC made available for review the rating factors for both renewal and new CoC applications at the monthly CoC Board meeting. The criteria were reviewed by CoC members, and feedback regarding the prioritization of both rating criteria and prioritization of project type was solicited and received by ACDS, the lead agency. All feedback was considered, including that received regarding barriers to participation potentially effecting some groups more than others.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section VII.B.2.f.	
	Describe in the field below:	
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	
2.	whether your CoC identified any projects through this process during your local competition this year;	
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; 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 MD-503 CoC annually and formally evaluates renewal projects to determine if they are meeting performance benchmarks, regulatory requirements, and effectively managing their programs. Criteria for evaluation include a review of average program costs per client, coordinated entry participation, Housing First and low barrier policies and implementation, commitment to fair housing and diversity, program design including strong housing, and success at meeting established performance measurements. These monitoring results are incorporated as a part of the objective review criteria during the application process. Monitored programs are given the opportunity to correct any concern or action identified and this too is included in the discussion by the review committee. The MD-503 CoC written policies states that the CoC may reallocate projects that no longer meets a HUD defined Policy priorities and has a reduced likelihood of being funded (e.g. supportive service only, transitional housing programs etc.); b) the CoC may re-allocate the funding of a low performing project that fails to meet established performance measures or maintain regulatory compliance. If a project scores below 100 points on the Rating Tool for renewal projects, the project is considered low-performing and at-risk of having the project funds reallocated for a new project that better meets the needs of the CoC. At this time, all of MD-503 existing Projects scored higher than 150 points on the Rating Tool and continue to provide needed rental housing opportunities for the CoC’s most vulnerable homeless.

No existing projects scored less than 100 points of the rating and ranking tools.

N/A

At this time, all of MD-503 existing Projects scored higher than 150 points on the Rating Tool and continue to provide needed rental housing opportunities for the CoC’s most vulnerable homeless.

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/15/2022

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section VII.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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/15/2022
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1E-5b.	Local Competition Selection Results–Scores for All Projects.	
	NOFO Section VII.B.2.g.	
	You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes
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1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	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.	09/28/2022
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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 VII.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 has been posted on the CoC’s website or partner’s website.	09/28/2022
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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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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-Community Services (Service Point)
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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.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

	Enter the date your CoC submitted its 2022 HIC data into HDX.	04/20/2022
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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 VII.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 databases that meet HUD’s comparable database requirements; and
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2. state whether your CoC is compliant with the 2022 HMIS Data Standards.

(limit 2,500 characters)

The YWCA of Annapolis and Anne Arundel County is the primary DV provider in the County. The YWCA utilizes Social Solutions Apricot, which is considered a comparable database to HMIS in compliance with 2022 HMIS Data Standards. Social Solutions Apricot is a comparable database to the HMIS data system used by the CoC and is therefore able to pull de-identified aggregate reports that mirror HMIS data reports including APRs and the CAPER report. The YWCA is an ESG-CV grantee and is able to provide performance, demographic, and financial expenditure data to the HMIS lead and the CoC lead agency, and would be able to replicate these de-identified aggregate reports for COC programs.

The CoC is compliant with the 2022 HMIS Data Standards

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

Enter 2022 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	224	0	224	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	16	0	16	100.00%
4. Rapid Re-Housing (RRH) beds	33	0	33	100.00%
5. Permanent Supportive Housing	197	0	197	100.00%
6. Other Permanent Housing (OPH)	81	0	81	100.00%

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

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

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

(limit 2,500 characters)

100% are covered by the HMIS.

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

Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?	Yes
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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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	01/26/2022
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	04/20/2022
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2B-3.	PIT Count–Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	

Describe in the field below how during the planning process for the 2022 PIT count your CoC:

1.	engaged stakeholders that serve homeless youth;
2.	involved homeless youth in the actual count; and
3.	worked with stakeholders to select locations where homeless youth are most likely to be identified.

(limit 2,500 characters)

The CoC has an existing Homeless Youth Committee which consists of providers of youth related services, including one operating a RRH program for homeless youth, the school districts Homeless Liaison, and several grass roots faith based organizations. The Committee participates in and organizes a statewide Youth Reach Count surveying unaccompanied youth in the schools and the community annually during the Spring and so has an understanding of “known locations” and areas where youth may hang out. It should be noted that many of these youth do not meet the HUD’s homelessness definition used for the PIT count. The Homeless Youth Committee members participate in the 2022 PIT count by helping to identify homeless youth which meet HUD’s definition. The County’s Homeless Liaison also participates in trying to identify unaccompanied homeless youth in the school system that meet HUD’s definition of homelessness.

homeless youth did not participate in the actual counting of youth. (Homeless youth were identified in programs.)

The CoC worked with the Homeless Youth Committee to survey “known locations”, programs, and schools on the night of the PIT 2022.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section VII.B.5.a and VII.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 2021 and 2022, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, 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 2022.	

(limit 2,500 characters)

1. In 2022, no specific changes were made to the collection of the Sheltered PIT implementation or count. All service providers were required to report all clients residing in any shelter, either year round or cold weather on the night of the count. This was the same process as in prior year.
2. There was no change in the methodology between 2022 and 2021. All known locations and local knowledge was just to target new locations.
3. No changes regarding methodology. No impact on PIT count results.
4. A unsheltered count was conducted.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.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)

1. The risk factors that MD-503 CoC uses to identify individuals from becoming homeless for the first time include: pending eviction (within 10 days); couch surfing and unstable housing, paying more than 50 percent of income for housing; health crises including addiction or a mental health diagnosis; disability; and unstable employment or low wages. In FY2021, a total of 799 persons entered emergency or transitional housing programs for the first time.

2. Current strategies the CoC uses to address the needs of persons at risk of becoming homeless include: (1) developed a robust eviction prevention system using State, CDBG, CDBG-CV, ERAP and community funds to provide emergency rental assistance, supportive services, landlord mediation, utility turnoff prevention and affirmatively market the program to at-risk communities. A total of 2,826 households were prevented from loss of housing in FY2022; (2)coordinates with the Anne Arundel County’s Sheriffs’ office to identify individuals scheduled for eviction and rapidly processes payments to prevent evictions. (3) fund and coordinate with the legal services partner to obtain delays on evictions to allow an orderly move out or to allow time to process applications for rental assistance to prevent eviction (4) Offer relocation services utilizing funds made available for the County’s Emergency Rental Assistance Program to provide relocation assistance in the form of security deposits, first month’s rent and in some instances limited additional prospective rent for 42 households evicted from their units thereby preventing them from entering the shelter system. (5) fund and offer programs that address the housing needs of at-risk families identified through the school system. The United Way and the Anne Arundel County Public School System have provided resources to pay for case management, housing locator services, and rental assistance to families unstably or at-risk of homelessness.

3. Homeless Coordinator at Department of Social Services (DSS) and ACDS are responsible for this strategy.

2C-2.	Length of Time Homeless—CoC’s Strategy to Reduce.	
	NOFO Section VII.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)

1. The primary strategy to reduce the length of time individuals and families remain homeless is to link them to housing of their choice by: (1) increase housing opportunities for homeless persons to access rapid housing or permanent supportive housing quickly by (i) continuing to offer CoC funded PSH with Move On component; increase supply by providing targeted HCV to families experiencing homelessness (60 HCV made available in FY22), (ii) fund new Rapid Rehousing Program along with ESG-CV funded landlord incentives including 3 ESG-CV and 1 CDBG-CV funded programs (iv) implement a \$400,000 HOME/County funded rental subsidy program for the homeless. New HOME APR TBRA funds will be made available to providers in FY2022 for Rapid Re-Housing. (2) Fund Housing Specialist/Locator positions in shelters and outreach programs responsible for identifying and building relationships with landlords, supporting those experiencing homeless obtain housing including comprehensive assessment identifying housing barriers and options; (3) Coordinating weekly case conferences between staff of housing programs and shelters by subpopulation (e.g. families; chronically homeless) to identify and link the homeless to appropriate and available housing programs; (4) Ensuring families and individuals have applied to all applicable waitlists for housing including Housing Commission/Authority and new LIHTC projects.

2. Primary methods for prioritizing individuals and families who have experienced homelessness for the longest length of time is through HMIS data, Coordinated Entry (CE), and the Homeless Outreach Team. (1) The CoC's CE staff uses HMIS data and VI-SPDAT and Arizona Matrix scores to identify individuals and assess, length of homelessness, their vulnerability and prioritize them for housing intervention. (2) The Homeless Outreach Team works with individuals experiencing chronic street homelessness, who often have the longest length of time homeless. Clients are assessed and placed on the coordinated entry list for PSH, the ACCESS Housing list, based on vulnerability and staff work with clients to obtain necessary documentation for the housing process. A total of 75 households obtained permanent housing, including over 30 chronically homeless persons obtaining CoC funded PSH through this process.

3. Planning Staff at ACDS, the lead agency, oversee CoC strategy to reduce the length of time persons are homeless and staff from CE.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section VII.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)

1. The CoC main strategy to increase the rate at which those in emergency shelter, transitional housing, and rapid re-housing exit to permanent housing destinations includes: (a) comprehensive assessment to quickly identifying housing barriers and options in order to develop a housing plan; (b) develop and build strong landlord relations and operate a landlord mitigation fund, which will encourage landlords to accept clients with multiple barriers; (c) continuously identifying new housing opportunities including obtaining increased funding from the County which set aside nearly \$400,000 in new funding for rental assistance programs; (d) implementing the "Move On" strategy with PHAs to free up additional PSH space; (e) leveraging ESG-CV landlord incentives to obtain and maintain permanent housing placements for persons who are difficult to house. The CoC will continue the strategy of using the byname lists for all PSH programs and holding weekly case conferencing meetings with the focus of getting participants housed as quickly as possible.
2. The CoC's strategy to increase the rate at which those in PSH remain permanently housed include: (a) incorporating the Housing First model into program design and to minimize discharge from programs; (b) providing comprehensive supportive evidence-based services while in program including financial management, budgeting, apartment maintenance and providing ongoing services with individualized service plan goals to build on independence and self-sufficiency, even once clients have stabilized; and (c) strengthening landlord relations and developing partnerships. The CoC has a strong 97% retention/successful exit rate for PH projects.
3. Staff at ACDS, the lead agency, oversee CoC this strategy

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section VII.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. The CoC identifies returns to homelessness by primarily through the CoC's Coordinated Entry (CE), which is a single access point to County programs, analysis of HMIS data, and consulting with providers. Commonalities are found in this group, which include (a) an untreated addiction or mental health diagnosis, (b) families or individuals who rely on a shelter as a safety net due to unstable employment and high housing cost.
2. The CoC strategy to reduce returns is to (a) develop an array of housing resources including PSH, rapid re-housing, and other PH programs and to target resources through case conferencing meetings, assessments, and utilizing the by-name lists to target the housing intervention; (b) offer intensive case management, linkage to services and Workforce Development and follow-up services such as Sarah's House Service Linked Housing Program; and (c) minimize discharge from PSH programs by again offering case management, landlord mediation, and transfer to mainstream vouchers when possible. The CoC has prioritized housing extremely vulnerable, chronically homeless, as well as increasing the number of rapid re-housing programs in the County. Expand housing opportunities with a path to permanent housing such as the 20 units of transitional housing at Ft. Meade for families provided by Catholic Charities. These families are given priority to receive a mainstream Housing Choice Voucher when they leave. Or a new proposed HOME ARP funded 16 unit transitional housing project which will also provide a permanent mainstream HCV to take with them when they are ready to move.
3. ACDS, the lead agency, oversees this strategy

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section VII.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 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)

Strategies include (1) referring and connecting those experiencing homelessness to the Anne Arundel County Workforce Development Corporation. The Workforce Development Corporation (WDC) markets programs to CoC members and providers. WDC has programs which offer financial incentives for participation which are used to encourage participants to apply; (2) Providers develop targeted employment/training programs such as the Light House Shelter (LH) Building Employment Success Training, which prepares students for employment with skills training in construction or the food service industry, education, and credentialing. The LH has built relationships with many employers who hire clients after completion of training programs in the construction or food service industry; (2) Offer supported employment for CoC tenants. As many of the PSH participants are chronically homeless with various disabilities, the Mental Health Agency works to link participants to supported employment programs which helps participants increase income and gain skills. Sarah’s House has built relationships with service industry based employers although many of these programs closed and reopened at reduced capacity due to the pandemic. It is hoped these businesses will hire at pre-pandemic rates in 2022-2023. The program also provides participant transportation assistance to places of employment.

The Workforce Development Corporation (WDC) Executive Director is on the Board of the Homeless Coalition and WDC regularly attend meetings to ensure that providers of homeless services are aware of the WDC programs including a program which offers financial incentives in the amount of \$500 for participation in employment assessment, placement, and training. The WDC has partnerships with many local employers, which creates employment opportunities for homeless persons. For example, WDC has a partnership with BWI Airport to hire WDC clients. This year, identified the homeless population as a key target population for services. WDC accepts referrals from CoC providers, and has long standing agreements with many providers, including the three County shelters.. There is an MOU between WDC and the CoC.

ACDS planning staff ensure implementation of these strategies.

2C-5a.	Increasing Non-employment Cash Income–CoC’s Strategy	
	NOFO Section VII.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)

CoC providers are responsible for linking their participants to all eligible benefits and they do this by implementing the following strategies: (1) Anne Arundel County Department of Social Services (DSS) provides on-site services at emergency shelters to enroll participants in mainstream programs on a weekly basis. DSS workers are able to determine eligibility for benefits such as SNAP, Medicaid, WIC or TANF and assist participants with a consolidated benefits application for all of these programs; (2) Mental Health Agency staff are trained to provide S.O.A.R. assistance and assist people experiencing homeless in their applications for SSI/SSDI; (3) the Homeless Outreach Team, operated by DSS, is able to enroll clients in benefits out in the community, thereby increasing access to non-employment cash sources and reaching the hardest to serve clients; and (4) Workforce Development Corporation (WDC), the local workforce development board, outreaches and affirmatively markets workforce development and educational programs to local shelters and has funded a program at the Light House Shelter.

DSS is responsible for overseeing the implementation of this strategy.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.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?	No
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section VII.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
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.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
This list contains no items			

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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

(limit 2,500 characters)

N/A

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.C.	

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

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	

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)

N/A

4A. DV Bonus Project Applicants

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Did your CoC submit one or more new project applications for DV Bonus Funding?	No
Applicant Name		
This list contains no items		

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. |

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Deadline	Yes	Local Competition...	09/27/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/27/2022
1E-2a. Scored Renewal Project Application	Yes		
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/27/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of ...	09/27/2022
1E-5b. Final Project Scores for All Projects	Yes		
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		

3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool, New and
Renewal

Attachment Details

Document Description:

Attachment Details

Document Description: Notification of Project Rejected

Attachment Details

Document Description: Notification of Projects Accepted

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Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/17/2022
1B. Inclusive Structure	09/27/2022
1C. Coordination and Engagement	09/27/2022
1D. Coordination and Engagement Cont'd	09/27/2022
1E. Project Review/Ranking	09/27/2022
2A. HMIS Implementation	09/27/2022
2B. Point-in-Time (PIT) Count	09/27/2022
2C. System Performance	09/27/2022
3A. Coordination with Housing and Healthcare	09/27/2022
3B. Rehabilitation/New Construction Costs	09/27/2022
3C. Serving Homeless Under Other Federal Statutes	09/27/2022

4A. DV Bonus Project Applicants	09/27/2022
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

Continuum of Care (CoC) Grants

FY2022 CONTINUUM OF CARE (CoC) PROGRAM COMPETITION

The U.S. Department of Housing and Urban Development (HUD) has announced the NOFO (Notice of Funding Opportunity) for FY2022 funds for the Continuum of Care Homeless Assistance Program (CoC Application). The Continuum of Care NOFO is an online application which will be coordinated by Arundel Community Development Services (ACDS) on behalf of the [Anne Arundel and Annapolis Coalition to End Homelessness](#). Please view our application process timeline below.



[Home](#)

[Upcoming Events](#)

[Contact Us](#)

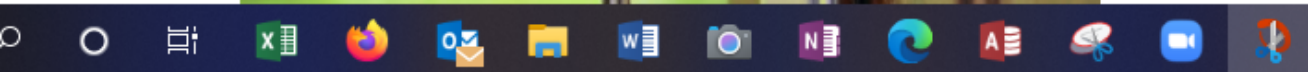
[Applications & Forms](#)

[Signature Projects](#)

[Where to Start](#)



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FY2022 CoC LOCAL COMPETITION OVERVIEW

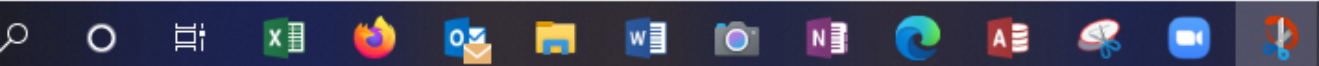
Arundel Community Development Services (ACDS), on behalf of Anne Arundel and Annapolis Coalition to End Homelessness, the Anne Arundel County and the City of Annapolis Continuum of Care (the Anne Arundel County CoC), invites applications under HUD's FY2022 Continuum of Care (CoC) Program for renewal, new, and bonus projects at this time.

This local competition for projects serving Anne Arundel County and the City of Annapolis is in accordance with the Notice of Funding Opportunity (NOFO) for the 2022 Continuum of Care Program (2022 CoC Competition) by the U.S. Department of Housing and Urban Development.

The NOFO for the FY2022 CoC Competition is an online application that will be coordinated by ACDS. The complete application includes the Consolidated CoC Application for the Anne Arundel County CoC. ACDS, on behalf of the AA CoC, will submit one collaborative "Continuum of Care Application" as well as all New and Renewal Project Applications.



[Translate >](#)



FY2022 CoC LOCAL COMPETITION KEY DATES

Friday, August 12, 2022, 1:00pm – FY2022 CoC Application Information and Planning Meeting (Virtual via Zoom)

In this meeting, we will discuss the FY2022 CoC Application changes; project review procedures; potential new projects; review and ranking criteria. Applicants interested in submitting a CoC Project application in the FY2022 Competition, interested Coalition Board and General members can and should attend. Please contact Hannah Breakstone, hbreakstone@acdsinc.org, if you require a special accommodation for participation in this virtual session (e.g. interpreter for deaf and hard of hearing or an interpreter for persons with limited English proficiency to participate in CoC meetings, application translation)

RSVP is not required, please click the link to join! (<https://us02web.zoom.us/j/83814414301>)

*A recording of this meeting was sent to all invitees of the event on 8/13/22. Please contact Hannah Breakstone, hbreakstone@acdsinc.org, if you would like to receive a copy of this recording.

Friday, August 26, 2022, 3:00pm – New and Renewal Applications due via email to ACDS

Please submit all applicant materials, including match letters to Hannah Breakstone, CoC Planning and Grants Manager, hbreakstone@acdsinc.org

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Translate >



Friday, August 26, 2022, 3:00pm – New and Renewal Applications due via email to ACDS

Please submit all applicant materials, including match letters to Hannah Breakstone, CoC Planning and Grants Manager, hbreakstone@acdsinc.org.

Tuesday, September 6, 2022 – Ranking and Review Committee Meeting

Monday, September 12, 2022 – Notification of Ranking and Review Committee Results for FY2022 CoC Project Applicants

FY2022 CoC NEW PROJECT APPLICATION: APPLY NOW!

The FY2021 CoC New Project Application is available at the link [here](#). The updated FY2022 application will be posted on this page by Wednesday, August 10, 2022. Changes from the previous year's application will be evident in the new form. Applications and required attachments are due Friday, August 26, 2022 at 3:00pm via email to Hannah Breakstone, CoC Planning and Grants Manager, at hbreakstone@acdsinc.org. Please note the CoC New Project Application is for new projects only and CoC Renewal Projects will complete a separate

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FY2022 CoC NEW PROJECT APPLICATION: APPLY NOW!

The FY2021 CoC New Project Application is available at the link [here](#). The updated FY2022 application will be posted on this page by Wednesday, August 10, 2022. Changes from the previous year's application will be evident in the new form. Applications and required attachments are due Friday, August 26, 2022 at 3:00pm via email to Hannah Breakstone, CoC Planning and Grants Manager, at hbreakstone@acdsinc.org. Please note the CoC New Project Application is for new projects only and CoC Renewal Projects will complete a separate application.

*Please contact us if you require a special accommodation (e.g. interpreter for deaf and hard of hearing or an interpreter for persons with limited English proficiency to participate in CoC meetings, application translation) to complete or participate in the FY2023 Application process.

FY2022 HUD CoC FUNDING AMOUNTS

HUD will continue to require CoC projects to be ranked in two (2) tiers. Projects ranked in Tier 1 will be conditionally selected provided the project applications pass both eligibility and quality threshold review. Tier 2 is the difference between Tier 1 and the CoC's ARD. This does not include funds made available for CoC Planning.



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FY2022 HUD CoC FUNDING AMOUNTS

HUD will continue to require CoC projects to be ranked in two (2) tiers. Projects ranked in Tier 1 will be conditionally selected provided the project applications pass both eligibility and quality threshold review. Tier 2 is the difference between Tier 1 and the CoC's ARD. This does not include funds made available for CoC Planning.

- The Anne Arundel County CoC ARD is \$2,412,801.00.
- The Anne Arundel County Tier I is \$2,292,160.95.
- The Anne Arundel County Tier II is \$120,640.00.
- The Anne Arundel County CoC can apply for a Bonus Project award up to \$120,640.00.
- The Anne Arundel County CoC can apply for a Domestic Violence (DV) Bonus Project award up to \$185,040.

FY2022 CoC RANKING/REVIEW CRITERIA

The ranking and review criteria for the FY2022 Continuum of Care Competition is available at the bottom of this webpage for both new projects and renewal (existing) projects. These scoring tools are used to rank and review new and renewal applications, respectively. Please refer to these tools to see how project applications will be scored and how points are awarded in the competition. A ranking and review committee comprised of CoC Board Members and other local

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FY2022 CoC RANKING/REVIEW CRITERIA

The ranking and review criteria for the FY2022 Continuum of Care Competition is available at the bottom of this webpage for both new projects and renewal (existing) projects. These scoring tools are used to rank and review new and renewal applications, respectively. Please refer to these tools to see how project applications will be scored and how points are awarded in the competition. A ranking and review committee comprised of CoC Board Members and other local experts will use this ranking and review criteria to evaluate all FY2022 CoC applications and will use the scoring tools to determine project ranking, which will be included in the Consolidated Application package that is submitted to HUD.

FY2022 CoC REALLOCATION POLICY

Any CoC grantee interested in voluntarily reallocating funding to better reach the goal of ending homelessness is encouraged to create a new project that will better achieve that goal – please reach out to ACDS staff if you are considering creating a new CoC project. Low performing projects may have funding reallocated through the process of review and ranking procedures per the MD-503 Anne Arundel County CoC Reallocation Policy, available [here](#).

CoC COMPETITION TIMELINE

Monday, August 1, 2022 – HUD Released FY2022 CoC Program Competition

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CoC COMPETITION TIMELINE

Monday, August 1, 2022 – HUD Released FY2022 CoC Program Competition

Friday, September 30, 2022 – FY2022 CoC Program Competition
Submission Deadline

FY2022 CoC RESOURCES

Information about the FY2022 Continuum of Care Application is available on HUD's website at:

[https://www.hudexchange.info/programs/e-snaps/?](https://www.hudexchange.info/programs/e-snaps/?utm_source=HUD+Exchange+Mailing+List&utm_campaign=22010e6484-CoC-FY22-Program-Competition-08.03.22&utm_medium=email&utm_term=0_f32b935a5f-22010e6484-19797020#Project)

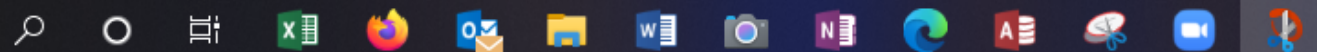
[utm_source=HUD+Exchange+Mailing+List&utm_campaign=22010e6484-CoC-FY22-Program-Competition-08.03.22&utm_medium=email&utm_term=0_f32b935a5f-22010e6484-19797020#Project](https://www.hudexchange.info/programs/e-snaps/?utm_source=HUD+Exchange+Mailing+List&utm_campaign=22010e6484-CoC-FY22-Program-Competition-08.03.22&utm_medium=email&utm_term=0_f32b935a5f-22010e6484-19797020#Project).

It is important that you review and understand the FY2022 CoC NOFO and the changes so we can build the best application together.

CONTACT

For answers to any questions related to the FY2022 CoC NOFO, Program Competition, Local

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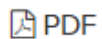
CONTACT


For answers to any questions related to the FY2022 CoC NOFO, Program Competition, Local Competition, Program, or Application, please contact:

Hannah Breakstone, CoC Planning and Grants Manager | (410) 222-3958 |
hbreakstone@acdsinc.org

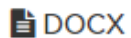
Available Downloads:


FY2022 Notice of Funding
Opportunity



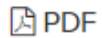
 DOWNLOAD


FY2022 New Project
Application



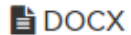
 DOWNLOAD


FY2022 New and Renewal
Application Rating and Review
Criteria



 DOWNLOAD

MD-503 CoC Re-Allocation
Policy



 DOWNLOAD

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Housing Resources

ACDS offers a variety of housing resources for Anne Arundel County residents.

[Read More](#)

[Read More >](#)

Community Planning & Development

Serving as the community's main development planning agency.

[Read More >](#)

Funding Opportunities

Funding opportunities for qualified developers, nonprofit organizations, and communities.

[Read More >](#)

Upcoming Events

ACDS is dedicated to our community, and we want to keep you informed of what's happening. Check out some of the upcoming events in our community!

Upcoming Events

AUG 11:00 am - 12:30 pm

24 **Property Tax Credit Workshop**

AUG 3:00 pm

26 **FY2022 CoC Provider Applications due to ACDS**

SEP 8:30 am - 3:00 pm

24 **Annual Hispanic Health Festival and Resources**

[View Calendar](#)



[Translate >](#)

Hannah Breakstone

From: Hannah Breakstone
Sent: Thursday, September 15, 2022 2:14 PM
To: 'Kia Chandler'
Cc: Elizabeth Brush
Subject: FY22 CoC Competition - Ranking Results

Dear Kia Chandler,

Thank you for submitting an application for the FFY22 Continuum of Care (CoC) competition. The CoC Ranking and Review Committee met to discuss all applications submitted as a part of this competition and evaluated them using the Review Criteria, which is available on the [ACDS website](#), to determine the FFY22 Priority Ranking.

Below is the ranking order of the projects submitted in the FFY22 CoC competition. The Veterans Service Coordination Center Project was not ranked in this year's competition; the Committee ultimately felt that iCCS' application did not meet HUD's Competition Requirements for funding that were laid out in this year's [Notice of Funding Opportunity \(NOFO\)](#). The grant request, as submitted, would not meet the requirements to operate a Tenant Based Housing Program. Discussion was also had of the great benefit to iCCS of capacity building around the integral ways in which these programs operate with support services and case management. These rankings can also be found on the [ACDS website](#).

Priority Ranking	Project	TOTAL
1	Behavioral Health - MHA	\$445,639.00
2	AHOH - Safe Haven	\$132,098.00
3	Catholic Charities - Sarah's House	\$152,225.00
4	Mental Health Agency - SHOP	\$402,474.00
5	AHOH - Community Housing	\$135,085.00
6	PEP Housing First	\$205,084.00
7	Anne Arundel Partnership for Housing	\$940,196.00

\$2,412,801.00

Should you have any questions or concerns, please feel free to reach out.

Have a lovely afternoon,
Hannah



Hannah Breakstone

CoC and Grants Manager

she/her

410-222-3958

2666 Riva Road, Suite 210
Annapolis, MD 21401

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From: **Hannah Breakstone** <hbreakstone@ACDSINC.org>
To: **'Priya Arokiaswamy -MDH-'** <priya.arokiaswamy@maryland.gov>
CC: **'Mona Figueroa -MDH-'** <mona.figueroa@maryland.gov>; **'Marian Bland -MDH-'** <marian.bland@maryland.gov>; **'Catherine Gray'** <cgray@aamentalhealth.org>; **Elizabeth Brush** <EBrush@ACDSINC.org>
Subject: FY22 CoC Competition - Ranking Results
Date: 15.09.2022 18:36:03 (+02:00)

Dear Priya Arokiaswamy,

Thank you for submitting an application for the FFY22 Continuum of Care (CoC) competition. The CoC Ranking and Review Committee met to discuss all applications submitted as a part of this competition and evaluated them using the Review Criteria, which is available on the [ACDS website](#), to determine the FFY22 Priority Ranking.

Below is the ranking order of the projects submitted and accepted in the FFY22 CoC competition. The BHA PSH Anne Arundel FY 2022 Project was ranked first (1) in this year's competition. These rankings can also be found on the [ACDS website](#).

Priority Ranking	Project	TOTAL
1	Behavioral Health - MHA	\$445,639.00
2	AHOH - Safe Haven	\$132,098.00
3	Catholic Charities - Sarah's House	\$152,225.00
4	Mental Health Agency - SHOP	\$402,474.00
5	AHOH - Community Housing	\$135,085.00
6	PEP Housing First	\$205,084.00
7	Anne Arundel Partnership for Housing	\$940,196.00
		\$2,412,801.00

Should you have any questions or concerns, please feel free to reach out.

Have a lovely afternoon,
Hannah



Hannah Breakstone

CoC and Grants Manager

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SUMMARY PDFEN

Datetime 2022-09-27 19:09:48
ID b1b6500c-700e-4f6e-81c5-91931f13cfc
Name PDFen

Black = File converted without warnings

Orange = File has been converted with warnings, please check the result

Red = Conversion of file has failed

ID	Filename	Status	Type	Pages	Extra	#
1	FY22 CoC Competition - Ranking Results AHOH 1	OK	msg	3		1
2	FY22 CoC Competition - Ranking Results AHOH 2	OK	msg	2		1
3	FY22 CoC Competition - Ranking Results AHOH 3	OK	msg	1		1
4	FY22 CoC Competition - Ranking Results BHA	OK	msg	1		1
5	FY22 CoC Competition - Ranking Results CC	OK	msg	1		1
Subtotal						5
Total reduced from your account						5

From: **Hannah Breakstone** <hbreakstone@ACDSINC.org>
To: **'Tanya Steele Clements -DHS- Anne Arundel County'**
<tanya.steeleclements@maryland.gov>
CC: **Justin Bieler -DHS- Anne Arundel County** <justin.bieler@maryland.gov>;
Elizabeth Brush <EBrush@ACDSINC.org>
Subject: FY22 CoC Competition - Ranking Results
Date: 15.09.2022 18:53:24 (+02:00)

Dear Tanya Clements,

Thank you for submitting an application for the FFY22 Continuum of Care (CoC) competition. The CoC Ranking and Review Committee met to discuss all applications submitted as a part of this competition and evaluated them using the Review Criteria, which is available on the [ACDS website](#), to determine the FFY22 Priority Ranking.

Below is the ranking order of the projects submitted in the FFY22 CoC competition. The Anne Arundel Partnership for Housing Project was ranked seventh (7) in this year's competition; DSS SHP Case Management is a component of this project. These rankings can also be found on the [ACDS website](#).

Priority Ranking	Project	TOTAL
1	Behavioral Health - MHA	\$445,639.00
2	AHOH - Safe Haven	\$132,098.00
3	Catholic Charities - Sarah's House	\$152,225.00
4	Mental Health Agency - SHOP	\$402,474.00
5	AHOH - Community Housing	\$135,085.00
6	PEP Housing First	\$205,084.00
7	Anne Arundel Partnership for Housing	\$940,196.00
		\$2,412,801.00

Should you have any questions or concerns, please feel free to reach out.

Have a lovely afternoon,
Hannah



Hannah Breakstone

CoC and Grants Manager

she/her

410-222-3958

2666 Riva Road, Suite 210
Annapolis, MD 21401

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From: **Hannah Breakstone** <hbreakstone@ACDSINC.org>
To: **Imhillen@hcaac.org** <Imhillen@hcaac.org>
CC: **'Lindsey Graves'** <lmgraves@hcaac.org>; **'Clifton Martin'** <ccmartin@hcaac.org>; **Elizabeth Brush** <EBrush@ACDSINC.org>
Subject: FY22 CoC Competition - Ranking Results
Date: 15.09.2022 18:56:21 (+02:00)

Dear Lanita Hillen,

Thank you for submitting an application for the FFY22 Continuum of Care (CoC) competition. The CoC Ranking and Review Committee met to discuss all applications submitted as a part of this competition and evaluated them using the Review Criteria, which is available on the [ACDS website](#), to determine the FFY22 Priority Ranking.

Below is the ranking order of the projects submitted in the FFY22 CoC competition. The Anne Arundel Partnership for Housing Project was ranked seventh (7) in this year's competition. These rankings can also be found on the [ACDS website](#).

While the Housing Commission of Anne Arundel County (HCAAC) did not provide application materials during the FY2022 CoC Local Competition, your organization is an integral part of this important county-wide initiative. As materials were missing from your organization, one of three that makeup this project, it was ranked last using the Review Criteria, which could ultimately effect overall funding for Anne Arundel County.

Priority Ranking	Project	TOTAL
1	Behavioral Health - MHA	\$445,639.00
2	AHOH - Safe Haven	\$132,098.00
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Have a lovely afternoon,
Hannah



Hannah Breakstone

CoC and Grants Manager

she/her

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Annapolis, MD 21401

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sender by reply email and destroy all copies of the original message.

From: **Hannah Breakstone** <hbreakstone@ACDSINC.org>
To: **'Tonia Stokes'** <ToniaS@peponline.org>; **Kevin Greoski** <KevinG@peponline.org>
CC: **Elizabeth Brush** <EBrush@ACDSINC.org>
Subject: FY22 CoC Competition - Ranking Results
Date: 15.09.2022 18:51:06 (+02:00)

Dear Tonia Stokes,

Thank you for submitting an application for the FFY22 Continuum of Care (CoC) competition. The CoC Ranking and Review Committee met to discuss all applications submitted as a part of this competition and evaluated them using the Review Criteria, which is available on the [ACDS website](#), to determine the FFY22 Priority Ranking.

Below is the ranking order of the projects submitted in the FFY22 CoC competition. The Housing First Project was ranked sixth (6) in this year's competition. These rankings can also be found on the [ACDS website](#).

Priority Ranking	Project	TOTAL
1	Behavioral Health - MHA	\$445,639.00
2	AHOH - Safe Haven	\$132,098.00
3	Catholic Charities - Sarah's House	\$152,225.00
4	Mental Health Agency - SHOP	\$402,474.00
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Have a lovely afternoon,
Hannah



Hannah Breakstone

CoC and Grants Manager

she/her

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From: **Hannah Breakstone** <hbreakstone@ACDSINC.org>
To: **'Catherine Gray'** <cgray@aamentalhealth.org>
CC: **Chelsea Bednarczyk** <cbednarczyk@AAMentalHealth.org>; **Shevonne Walton** <swalton@aamentalhealth.org>; **Stephanie Trice** <strice@aamentalhealth.org>; **Elizabeth Brush** <EBrush@ACDSINC.org>
Subject: FY22 CoC Competition - Ranking Results
Date: 15.09.2022 18:49:37 (+02:00)

Dear Catherine Gray,

Thank you for submitting an application for the FFY22 Continuum of Care (CoC) competition. The CoC Ranking and Review Committee met to discuss all applications submitted as a part of this competition and evaluated them using the Review Criteria, which is available on the [ACDS website](#), to determine the FFY22 Priority Ranking.

Below is the ranking order of the projects submitted in the FFY22 CoC competition. The Support Housing Opportunities Program (SHOP) Project was ranked forth (4) in this year's competition. These rankings can also be found on the [ACDS website](#).

Priority Ranking	Project	TOTAL
1	Behavioral Health - MHA	\$445,639.00
2	AHOH - Safe Haven	\$132,098.00
3	Catholic Charities - Sarah's House	\$152,225.00
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6	PEP Housing First	\$205,084.00
7	Anne Arundel Partnership for Housing	\$940,196.00
		\$2,412,801.00

Should you have any questions or concerns, please feel free to reach out.

Have a lovely afternoon,
Hannah



Hannah Breakstone

CoC and Grants Manager

she/her

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Annapolis, MD 21401

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From: **Hannah Breakstone** <hbreakstone@ACDSINC.org>
To: **'Priya Arokiaswamy -MDH-'** <priya.arokiaswamy@maryland.gov>
CC: **'Mona Figueroa -MDH-'** <mona.figueroa@maryland.gov>; **'Marian Bland -MDH-'** <marian.bland@maryland.gov>; **'Catherine Gray'** <cgray@aamentalhealth.org>; **Elizabeth Brush** <EBrush@ACDSINC.org>
Subject: FY22 CoC Competition - Ranking Results
Date: 15.09.2022 18:36:03 (+02:00)

Dear Priya Arokiaswamy,

Thank you for submitting an application for the FFY22 Continuum of Care (CoC) competition. The CoC Ranking and Review Committee met to discuss all applications submitted as a part of this competition and evaluated them using the Review Criteria, which is available on the [ACDS website](#), to determine the FFY22 Priority Ranking.

Below is the ranking order of the projects submitted and accepted in the FFY22 CoC competition. The BHA PSH Anne Arundel FY 2022 Project was ranked first (1) in this year's competition. These rankings can also be found on the [ACDS website](#).

Priority Ranking	Project	TOTAL
1	Behavioral Health - MHA	\$445,639.00
2	AHOH - Safe Haven	\$132,098.00
3	Catholic Charities - Sarah's House	\$152,225.00
4	Mental Health Agency - SHOP	\$402,474.00
5	AHOH - Community Housing	\$135,085.00
6	PEP Housing First	\$205,084.00
7	Anne Arundel Partnership for Housing	\$940,196.00
		\$2,412,801.00

Should you have any questions or concerns, please feel free to reach out.

Have a lovely afternoon,
Hannah



Hannah Breakstone

CoC and Grants Manager

she/her

410-222-3958

2666 Riva Road, Suite 210
Annapolis, MD 21401

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MD-503 FY2022 CoC APPLICATION PROJECT RANKING

UPDATED: September 15, 2022

The Anne Arundel and Annapolis Coalition to End Homelessness (MD-503 CoC) used the Ranking and Review Criteria for Renewal and New Projects posted at the bottom of this webpage to evaluate projects for inclusion in the FY 2022 CoC Consolidated Application. One new provider applied for a CoC project this year.

The following projects were evaluated and ranked based on approved Ranking and Review Criteria. Below is the listing of projects renewed, ranked, and accepted for the FY2022 Continuum of Care Competition for the MD-503 CoC. The MD-503 CoC will also submit an application for Planning funds, which is not included in the project ranking.

Questions about the Ranking and Review for the FY2022 CoC Competition may be directed to Hannah Breakstone at (410)222-3958 or hbreakstone@acdsinc.org.

Priority Ranking	Project	TOTAL
1	Behavioral Health – MHA	\$445,639.00
2	AHOH – Safe Haven	\$132,098.00
3	Catholic Charities – Sarah's House	\$152,225.00
4	Mental Health Agency – SHOP	\$402,474.00
5	AHOH – Community Housing	\$135,085.00
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MD-503 FY2022 CoC APPLICATION PROJECT RANKING

UPDATED: September 15, 2022

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Priority Ranking	Project	TOTAL
1	Behavioral Health – MHA	\$445,639.00
2	AHOH – Safe Haven	\$132,098.00
3	Catholic Charities – Sarah’s House	\$152,225.00

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Criteria: Below is the listing of projects reviewed, ranked, and accepted for the FY2022

Continuum of Care Competition for the MD-503 CoC. The MD-503 CoC will also submit an application for Planning funds, which is not included in the project ranking.

Questions about the Ranking and Review for the FY2022 CoC Competition may be directed to Hannah Breakstone at (410)222-3958 or hbreakstone@acdsinc.org.

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